

Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification Number : 2003194		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: PADF PAC											
Street Address: 200 N 3RD ST STE 1500											
City: HARRISBURG					State: PA		Zip Code: 17101-1585				
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3. X	AMENDMENT REPORT?	Yes	No <input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2004	FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/>		DISKETTE			
Name of Office Sought by Candidate:					DATE OF ELECTION			District Number	Office Code	Party Code	County Code
					MO	DAY	YEAR				
					11	2	2004	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		1	1	1		5	17	2004			
A. Amount Brought Forward From Last Report					\$		14,592.00				
B. Total Monetary Contributions And Receipts (From Schedule I)					\$		5,840.00				
C. Total Funds Available (Sum Of Lines A and B)					\$		20,432.00				
D. Total Expenditures (From Schedule III)					\$		1,023.00				
E. Ending Cash Balance (Subtract Line D From Line C)					\$		19,409.00				
F. Value Of In-Kind Contributions Received (From Schedule II)					\$		0.00				
G. Unpaid Debts And Obligations (From Schedule IV)					\$		0.00				

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
PADF PAC	From: To: <u>5/17/2004</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 2,070.00

2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	
Contributions Received From Political Committees (Part A)	\$ 0.00
All Other Contributions (Part B)	\$ 2,010.00
TOTAL for the Reporting Period (2)	\$ 2,010.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 0.00
All Other Contributions (Part D)	\$ 1,760.00
TOTAL for the Reporting Period (3)	\$ 1,760.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 0.00

Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 5,840.00
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<div> <div> <div>PART A</div> <div>CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES</div> <div>\$50.01 TO \$250.00</div> <div>Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.</div> </div> </div>							
Name of Filing Committee or Candidate				Reporting Period			
				From:	To:		
				DATE	AMOUNT		
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL	
\$	0.00

PART B
ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

**Use this Part to itemize all other contributions with an aggregate value from
\$50.01 to \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part A)**

Name of Filing Committee or Candidate	Reporting Period
PADF PAC	From: To: <u>5/17/2004</u>

DATE	AMOUNT
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Full Name of Contributor	MO	DAY	YEAR	\$ 140.00
CARIN BAKER				
Mailing Address 140 FREDERICKTOWN RD				
City DARLINGTON	State	Zip Code (Plus 4)	4 26 2004	
	PA	16115		

Full Name of Contributor	MO	DAY	YEAR	\$ 100.00
DAVID BYLER				
Mailing Address 190 BARRVILLE MT ROAD				
City REEDSVILLE	State	Zip Code (Plus 4)	4 26 2004	
	PA	17084		

Full Name of Contributor	MO	DAY	YEAR	\$ 100.00
DUKE CARL				
Mailing Address 39 HOWELL DR				
City BLOOMSBURG	State	Zip Code (Plus 4)	4 26 2004	
	PA	17815		

Full Name of Contributor	MO	DAY	YEAR	\$ 250.00
D. EBERSOLE				
Mailing Address 6158 TIMBER RIDGE RD				
City BIG COVE TANNER	State	Zip Code (Plus 4)	4 26 2004	
	PA	17212		

Full Name of Contributor	MO	DAY	YEAR	\$ 100.00
HENRY FREY				
Mailing Address 15769 MADISON RD				
City MIDDLEFIELD	State	Zip Code (Plus 4)	4 26 2004	
	OH	44062		

Full Name of Contributor	MO	DAY	YEAR	\$ 100.00
PATRICIA HUTCHISON				
Mailing Address 1104 BRIDGE ST				
City ELLWOOD CITY	State	Zip Code (Plus 4)	4 26 2004	
	PA	16117		

Full Name of Contributor				MO	DAY	YEAR	\$ 200.00
GARY LANDIS				4	26	2004	
Mailing Address LANDIS CONSTRUCTION 11552 PUNCHBOWL RD							
City	MERCERSBURG	State	PA	Zip Code (Plus 4)	17236		

Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
JOHN MILLER				4	26	2004	
Mailing Address 14361 TRACY RD							
City	ALBION	State	PA	Zip Code (Plus 4)	16401		

Full Name of Contributor				MO	DAY	YEAR	\$ 200.00
LAURA SCHLABACH				4	26	2004	
Mailing Address 120 SHOE RD							
City	PUNXSUTAWNEY	State	PA	Zip Code (Plus 4)	15767		

Full Name of Contributor				MO	DAY	YEAR	\$ 70.00
CLIFFORD STITELY				4	26	2004	
Mailing Address HC 67 BOX 106T							
City	MIFFLIN	State	PA	Zip Code (Plus 4)	170589719		

Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
AMOS STOLTZFUS				4	26	2004	
Mailing Address 964 EISENBERGER RD							
City	STRASBURG	State	PA	Zip Code (Plus 4)	17579		

Full Name of Contributor				MO	DAY	YEAR	\$ 200.00
DAVID TROYER				4	26	2004	
Mailing Address RR 1 BOX 576							
City	MIFFLINTOWN	State	PA	Zip Code (Plus 4)	17059		

Full Name of Contributor				MO	DAY	YEAR	\$ 150.00
ELI TROYER				4	26	2004	
Mailing Address RR 01 BOX 174							
City	BEAVER SPRINGS	State	PA	Zip Code (Plus 4)	17812		

Full Name of Contributor				MO	DAY	YEAR	\$ 200.00
GREGORY WINAND				4	26	2004	
Mailing Address 630 PEAK VIEW RD							
City	YORK SPRINGS	State	PA	Zip Code (Plus 4)	17372		

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL

\$ 2,010.00

PART C
Contributions Received From Political Committees
OVER \$250.00

Use this Part to itemize only contributions received from Political committees
with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate	Reporting Period
	From: To:

DATE				AMOUNT
Full Name of Contributing Committee				
Mailing Address				
City	State	Zip Code (Plus 4)		

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.	PAGE TOTAL \$ 0.00
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PART D
ALL OTHER CONTRIBUTIONS
OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of
over \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate PADF PAC	Reporting Period From: To: <u>5/17/2004</u>
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				DATE	AMOUNT		
Full Name of Contributor MERLE MAST				MO	DAY	YEAR	\$ 500.00
Mailing Address 8671 TOWNSHIP RD 652				4	26	2004	
City FREDERICKSBURG	State OH	Zip Code (Plus 4) 44627					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	

Full Name of Contributor VERNON TROYER				MO	DAY	YEAR	\$ 1,260.00
Mailing Address RR 2 BOX 275				4	26	2004	
City MIFFLINTOWN	State PA	Zip Code (Plus 4) 17059					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 1,760.00

PART E OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.

Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate	Reporting Period From: To:
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			DATE	AMOUNT		
Full Name			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Receipt Description						

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 0.00

SCHEDULE II

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

**USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS
DURING THE REPORTING PERIOD.**

Detailed Summary Page

Name of Filing Committee or Candidate		Reporting Period	
PADF PAC		From:	To: <u>5/17/2004</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period		(1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period		(2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period		(3)	\$ 0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)			\$ 0.00

SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	Reporting Period From: To:
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						PAGE TOTAL \$ 0.00

SCHEDULE II
PART G
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OVER \$250.00

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

