Campaign Finance Report

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

Filer Identificati Number :	Filer Identification 2003194 Number :							IDATE		СОМ	MITTEE	✓	LOBI	BYIST	
Name of Filing C	Committee, Candid	late or L	obbyist:		Filed PADF I	-									
Street Address:	200 N 3RD S	T STE 15	500												
City:	HARRISBURG	i					State:	PA			Zip Co	de: 17	101-1	585	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2.	30 D PRIM	DAY 1ARY	POST-	3. X		AMENDN REPORT		Yes	No	· 🗸
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 D ELEC	DAY CTION	POST- 6.			TERMIN REPORT		Yes	No	· 🗸
report type)	ANNUAL REPORT	7.					NG METH				PAPER		\checkmark	DISK	TTE
Name of Office S	bought by Candida	te:				•	DATE C	OF ELE	СТІС	N	District Number	Office Code	Par	ty Code	County Code
							мо	DAY	Y	AR		I			
							11	-	2	2004]	(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of Receipts and Expenditures from:							мо	DAY	YI	EAR	FC	OR OFFIC	E USE	ONLY	
Expenditures	s from:		1 1		1	ТО	5	5	17	2004					
A. Amount Bro	ught Forward Fro	m Last R	eport			ģ	5		14,	592.00					
B. Total Monet	dule I)	9	\$		5,8	340.00									
C. Total Funds	9	\$		20,4	432.00										
D. Total Expen	ditures (From Sch	edule II	I)			5	\$		1,0	023.00					
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)			\$		19,4	09.00	-				
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	le II)		\$			0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	/)		9	\$			0.00		·			
				AFF	IDAV	IT SI	ECTION								
	s a Committee rep	•	-					• •		-					
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	e attached sc	hedules	s filed o	n papei	r or by elect	tronic m	edium	, are to t	the best o	of my knov	vledge	and bel	ief , true
Sworn to and subs	cribed before me thi day of	S	20						9	Signature	e of Perso	n Submitt	ing Rep	oort	
	Signatu	ire				_					Prin	ted Name			
My Commission Ex	-										Ema	il			
	мо	D	AY	YR				Are	ea Coo	le	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a can	didate's	authorized	Comm	nittee,	Candi	date shall	sign he	ere.						
I swear (or affirm) No 320) as amende	that to the best of ı ed.	ny knowle	edge and beli	ief this	politica	l comr	nittee has r	not viola	ted an	ıy provis	ions of th	e act of Ju	ine 3,1	937 (P.I	L. 1333,
Sworn to and subso	ribed before me this day of		20							s	ignature	of Candida	ite		
											Printe	ed Name			
My Commission Exp	Signature					_					Ema	iil			
						_									
	MO DAY YR								Code		D	aytime Te	lephon	e Numb	ber

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** From: To: PADF PAC 5/17/2004 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 2,070.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 2,010.00 All Other Contributions (Part B) \$ **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 1,760.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 1,760.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 5,840.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

PART A CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

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.

Name of Filing Committee or Candida	Name of Filing Committee or Candidate			ng F				
F			From:	From: To:				
					DATE			AMOUNT
Full Name of Contributing Committee			мо)	DAY	YEAR		
Mailing Address							\$	0.00
City State Zip Code (Plus 4)								
							ſ	PAGE TOTAL

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

\$

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 Candida	te		Repo	Reporting Period				
PADF PAC			From	1:		Τα):	<u>5/17/2004</u>
								AMOUNT
Full Name of Contributor CARIN BAKER		мо	DAY	YEAR				
Mailing Address 140 FREDERICKTC	WN RD						\$	140.00
City DARLINGTON	ity DARLINGTON State Zip Code (Plus 4)							
	PA	16115						
Full Name of Contributor DAVID BYLER		мо	DAY	YEAR				
Mailing Address 190 BARRVILLE MT ROAD							\$	100.00
City REEDSVILLE	State PA	Zip Code (Plus 4)		4	26	2004		
Full Name of Contributor DUKE CARL	1	1		мо	DAY	YEAR		
Mailing Address 39 HOWELL DR							\$	100.00
City BLOOMSBURG	State	Zip Code (Plus 4)		4	26	2004		
	PA	17815						
Full Name of Contributor D. EBERSOLE				мо	DAY	YEAR		
Mailing Address 6158 TIMBER RIDO	ge RD						\$	250.00
City BIG COVE TANNER	State PA	Zip Code (Plus 4)		4	26	2004		
Full Name of Contributor HENRY FREY					DAY	YEAR		
Mailing Address 15769 MADISON RD							\$	100.00
City MIDDLEFIELD	State OH	Zip Code (Plus 4) 44062		4	26	2004		

Full Name of Contributor PATRICIA HUTCHISON			мо	DAY	YEAR		
Mailing Address 1104 BR	IDGE ST					\$ 10	0.00
City ELLWOOD CITY	State PA	Zip Code (Plus 4) 16117	- 4	26	2004		
Full Name of Contributor GARY LANDIS			мо	DAY	YEAR		
Mailing Address LANDIS	CONSTRUCTION 11552	PUNCHBOWL RD				\$ 20	0.00
City MERCERSBURG	State PA	Zip Code (Plus 4) 17236	4	26	2004		
Full Name of Contributor JOHN MILLER	мо	DAY	YEAR				
Mailing Address 14361 T	RACY RD					\$ 10	0.00
City ALBION	State PA	Zip Code (Plus 4) 16401	4	26	2004		
Full Name of Contributor LAURA SCHLABACH				DAY	YEAR		
Mailing Address 120 SHC	DE RD					\$ 20	0.00
Mailing Address 120 SHC City PUNXSUTAWNEY	DE RD State PA	Zip Code (Plus 4) 15767	- 4	26	2004	\$ 20	0.00
	State		4 MO	26 DAY	2004 YEAR	\$ 20	0.00
City PUNXSUTAWNEY Full Name of Contributor CLIFFORD STITELY	State						0.00
City PUNXSUTAWNEY Full Name of Contributor CLIFFORD STITELY	State PA						
City PUNXSUTAWNEY Full Name of Contributor CLIFFORD STITELY Mailing Address HC 67 E	State PA BOX 106T State	15767 Zip Code (Plus 4)	мо	DAY	YEAR		
City PUNXSUTAWNEY Full Name of Contributor CLIFFORD STITELY Mailing Address HC 67 E City MIFFLIN Full Name of Contributor AMOS STOLTZFUS Mailing Address	State PA BOX 106T State	15767 Zip Code (Plus 4)	мо 4	DAY 26 DAY	YEAR 2004 YEAR	\$ 7	
City PUNXSUTAWNEY Full Name of Contributor CLIFFORD STITELY Mailing Address HC 67 E City MIFFLIN Full Name of Contributor AMOS STOLTZFUS Mailing Address	State PA 30X 106T State PA	15767 Zip Code (Plus 4)	мо 4	DAY 26	YEAR 2004	\$ 7	0.00

Full Name of Contributor DAVID TROYER			мо	DAY	YEAR	
Mailing Address RR 1 BOX 576						\$ 200.00
City MIFFLINTOWN	State PA	Zip Code (Plus 4) 17059	4	26	2004	
Full Name of Contributor ELI TROYER				DAY	YEAR	
Mailing Address RR 01 BOX 174					2004	\$ 150.00
City BEAVER SPRINGS	State PA	Zip Code (Plus 4) 17812	4	26	2004	
Full Name of Contributor GREGORY WINAND			мо	DAY	YEAR	
Mailing Address 630 PEAK VIEW	RD					\$ 200.00
City YORK SPRINGS	State PA	Zip Code (Plus 4) 17372	4	26	2004	
				PAGE TOTAL		
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, S						\$ 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 Can	ndidate		Reporting Period					
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Comm	nittee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C or	n Schedule I, Detaile	ed Summary Pa	age, Sectio	n 3.			\$	0.00

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 Can	didate		R	Reporting Period					
PADF PAC			F	rom:		То	: <u>5/17/2004</u>		
			•	D/	ATE		AMOUNT		
Full Name of Contributor MERLE MAST				мо	DAY	YEAR			
Mailing 8671 TOWNSH	IIP RD 652						\$ 500.00		
City FREDERICKSBURG State Zip Code (Plus 4) OH 44627				4	26	2004			
Employer Name					Occupation				
Employer Mailing Address/Princi Business	oal Place of		City		State		Zip Code (Plus 4)		
Full Name of Contributor VERNON TROYER				мо	DAY	YEAR			
Mailing Address RR 2 BOX 275	5						\$ 1,260.00		
City MIFFLINTOWN	State PA		p Code (Plus 4) 7059	4	26	2004			
Employer Name				Occupat	tion				
Employer Mailing Address/Princi Business	oal Place of		City	I	State		Zip Code (Plus 4)		
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Sect			ction 3.			PAGE TOTAL			
	ter Grand Total of Part C on Schedule 1, Detailed Summary Page, Sec						\$ 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			Report	ing Perio	d					
			From:	From: To:						
					DATE					
Full Name				мо	DAY	YEAR				
Mailing Address	Mailing Address						\$		0.00	
City	State	Zip Code (Plus 4)							
Receipt Description	Receipt Description									
Enter Grand Total of Part E on Schedule T. Detailed Summary Page. Section				4				PAGE TO	TAL	
inter Grand Total of Part E on Schedule I, Detailed Summary Page, Section			Section				\$		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:	То:	<u>5/17/2004</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, 1		\$	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:			То:	
				DATE		AMOUNT	
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)	,				
Description of Contribution:							
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detai Section 2.			iled Sum	mary Pag	je,	PAGE	TOTAL
					4	5	0.00

PAGE 12

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

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

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidat	e		Reporti	ng Period					
PADF PAC			From			То:	<u>5/17/2004</u>		
				DATE			AMOUNT		
To Whom Paid BRETT FEESE CAMPAIGN COMMITTEE				DAY	YEAR				
Mailing Address				5	2004	\$	1,000.00		
City HARRISBURG State Zip Code (Plus 4) PA PA				Description of Expenditure CONTRIBUTION					
To Whom Paid M & T BANK			мо	DAY	YEAR				
Mailing Address MARKET STREET			5	17	2004	\$	23.00		
City HARRISBURG	tyHARRISBURGStateZip Code (Plus 4)Description of ExpenditurePA17101BANK FEE								
Enter Crand Tatal of Evnanditures					PAGE TOTAL				
Enter Grand Total of Expenditures				\$	1,023.00				

5/18/2024 8:41:00 PM