Campaign Finance Report

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

	-				1	-			_			-		WIGT	
Filer Identificat Number :	ion 40)281			Repor Filed		CANDI	DATE	✓	СО	MMITTEI		LOBE	BYIST	
Name of Filing (Committee, Can	didate or	Lobbyist	:	ARGAL	L, DA\	/ID G.								
Street Address:	Street Address:														
City:							State:	Zip Code:							
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FF PRIMA	RIDAY PRE RY	- 2.	30 DA PRIMA		POST-	3. X		AMENDMENT REPORT?		Yes	No	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.					AY I TION	POST- 6.			TERMINATION REPORT?		Yes	No	\checkmark
report type)	ANNUAL REPO	RT 7.	Year 2	2004		FILING METHOD () CHECK ONE							\checkmark	DISKE	TTE
Name of Office	Sought by Candi	idate:	-				DATE O	F ELE	CTION		District Number	Office Code	Par	ty Code	County Code
	IVE IN THE GEN						мо	DAY	YEA	R	124	STH	REP		54
KLYKLJENTAT		ILKAL AS	SLMDLT				11		2 2	2004		(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAF	ર		мо	DAY	YEA	R	FO	R OFFIC	E USE	ONLY	
Expenditures	s from:		1	1	1	ГО	5		17 2	2004					
A. Amount Bro	ought Forward F	rom Last	Report			\$				0.00					
B. Total Monet	ary Contribution	ns And Re	ceipts (I	From Sche	edule I)	\$			1,41	5.66					
C. Total Funds	Available (Sum	Of Lines	A and B)			\$			1,41	5.66					
D. Total Expen	ditures (From S	chedule I	II)			\$			1,416	5.66					
E. Ending Cash	n Balance (Subtr	ract Line I) From L	ine C)		\$			(0.00	-				
F. Value Of In-	Kind Contributi	ons Recei	ved (Fro	m Schedu	ıle II)	\$			(0.00					
G. Unpaid Deb	ts And Obligatio	ons (From	Schedu	le IV)		\$			(0.00					
				AFF	IDAV	IT SE	CTION								
PART I - If this i	s a Committee r	eport, tre	asurer s	ign here.	If this i	s a Cai	ndidate re	eport, o	andida	te sig	gn here.				
I swear (or affirm correct and compl		including th	ne attache	ed schedule	s filed or	n paper	or by elect	ronic m	edium, a	re to t	the best of	my know	vledge	and beli	ef , true
Sworn to and subs	scribed before me day of	this	20						Sigi	nature	e of Person	Submitt	ing Rep	oort	
						_					Print	ed Name			
My Commission E	-	ature									Email				
	мо	I	DAY	YR				Ar	ea Code		Daytime	e Teleph	one Nu	mber	
Part II- If this is	a report of a c	andidate's	s author	ized Comr	nittee, (Candid	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amend		of my know	ledge and	l belief this	s politica	l comm	ittee has n	iot viola	ted any p	orovis	ions of the	act of Ju	ine 3,19	937 (P.L	. 1333,
Sworn to and subse		his								s	ignature o	f Candida	ite		
	day of										Printed	l Name			
	Signatu	re				_									
My Commission Ex	pires										Emai	I			
	мо	1	DAY	YF	ł	_		Area	Code		Da	ytime Te	elephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** From: To: ARGALL, DAVID G. 5/17/2004 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **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)** 0.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 0.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 1,416.66 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 1,416.66 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 \$ 1,416.66 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 Candidate				Reporting Period						
				From: To			:			
		·			DATE			AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4	4)							
								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 Candidate				Reporting Period						
			Fro	From: To):		
					DATE			AMOUNT		
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address		-					\$	0.00		
City	State	Zip Code (Plus 4)							
								PAGE TOTAL		
Enter Grand Total of Part A on	\$	0.00								

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	Name of Filing Committee or Candidate Reporting			g Period				
ARGALL, DAVID G.			From:			То:	5	<u>/17/2004</u>
				DA	TE		А	MOUNT
Full Name of Contributing Committee VOLUNTEERS FOR ARGALL					DAY	YEAR	\$	331.28
Mailing Address P.O. BOX 241	_				13	2004		
City TAMAQUA	State	Zip Code	e (Plus 4)					
	РА	18252						
Full Name of Contributing Committee				мо	DAY	YEAR		
VOLUNTEERS FOR ARGALL							\$	1,085.38
Mailing Address P.O. BOX 241				5	3	2004		,
City TAMAQUA	State	Zip Cod	e (Plus 4)					
	РА	18252						
								PAGE TOTAL
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.							\$	1,416.66

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				Reporting Period						
From:				om:			То:			
				DATE AI				MOUNT		
Full Name of Contributor				мо	DAY	YEAR	\$	0.00		
Mailing Address										
City	State	Zip Code (Plus	s 4)							
Employer Name				Occupation						
Employer Mailing Address/Principal Place of Business City					State		Zip Cod	e (Plus 4)		
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.							PAGE TOTAL \$ 0.00			

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						
				m: To:					
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (Plus 4)						
Receipt Description	·	•					•		
								PAGE TO	TAL
Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.						\$		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									
ARGALL, DAVID G.	From:	То:	<u>5/17/2004</u>							
. 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 PAR	T F)									
TOTAL for the Reporting Pe	eriod (2)	\$	0.00							
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)										
TOTAL for the Reporting Pe	eriod (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, 3		\$	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						
F				From:			То:		
				DATE			AMOUNT		
Full Name of Contributor				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 Detailed Summary Page, PAGE TOT Section 2.									
						\$	(0.00	

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

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate				Reporting Period						
				From:							
					DATE		AMOUNT				
Full Name of Contributor				мо	DAY	YEAR					
Mailing Address							\$ 0.00				
City	State	Zip Code(Plus 4)									
Employer of Contributor		•		Occupa	tion		•				
Employer Mailing Address/Principal Plac	e of Business C	lity	State	e Zip	Code(Plus 4)	Descri	ption of Contribution				
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.					PAGE TOTAL 0.00						

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period						
ARGALL, DAVID G.						То:	<u>5/17/2004</u>		
				DATE AM					
To Whom Paid				DAY	YEAR				
DAVID G. ARGALL			мо						
Mailing Address 106 LAKE DRIVE				3	2004	\$	1,085.38		
City NESQUEHONING State Zip Code (Plus 4)				tion of Exp	enditure				
	PA	18240	TRAVEL	EXPENSES	S, DINNE	r w/voi	<u>_</u>		
To Whom Paid			мо	DAY	YEAR				
DAVID G. ARGALL			MO						
Mailing Address 106 LAKE DRIVE			5	13	2004	\$	331.28		
City NESQUEHONING	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	PA	17240	DINNER	W/ FUND	RAISER H	IOSTS			
							PAGE TOTAL		
Enter Grand Total of Expenditures of	on Page 1, Report C	over Page, Item I).			\$	1,416.66		