Campaign Finance Report

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

Filer Identificat Number :	ion 2003	194			Repo Filed		:	CANDI	DATE		СОМ	MITTEE	✓	LOBI	BYIS			
Name of Filing (Committee, Candid	ate or Lo	obbyist:		PADF I	_							L					
Street Address:	200 N 3RD ST	STE 15	500															
City:	HARRISBURG							State:	PA			Zip Code: 17101-1585						
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY					IY F Ary	POST-	3.		AMENDN REPORT		Yes		No	\checkmark	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	ND FRIDAY PRE- 5. X 3 LECTION				Y F TON	POST- 6.			TERMIN REPORT	Yes		١o	\checkmark		
report type)	ANNUAL REPORT	7.	Year 2004					IG METHO				PAPER		\checkmark	DIS	(ETTE		
Name of Office Sought by Candidate:								DATE O	F ELEC	CTIC	N	District Number	Office Code	Par	ty Co	le Cou Cod		
								мо	DAY	Y	EAR	rtumber	coue					
								11		2	2004	 	(SEE INS	TRUCTI	ONS FO	R CODE	S)	
	Receipts and	мо	DAY	YEAR	2			мо	DAY	Y	EAR	FC	OR OFFIC	E USE	ONL	Y		
Expenditures	s from:		1 1		1	то)	10	1	.8	2004							
A. Amount Bro	ught Forward From	n Last R	eport				\$			15,	086.00							
B. Total Monetary Contributions And Receipts (From Schedule I)									0.00									
C. Total Funds Available (Sum Of Lines A and B)							\$			15,	086.00							
D. Total Expen	ditures (From Sch	edule II	I)				\$			5,0	00.00							
E. Ending Cash	Balance (Subtract	t Line D	From Line	C)			\$			10,0	086.00							
F. Value Of In-	Kind Contributions	s Receivo	ed (From S	chedu	le II)		\$				0.00	4						
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	/)			\$				0.00		,					
				AFF	IDAV	IT	SE	CTION										
PART I - If this i	s a Committee rep	ort, trea	surer sign	here. 1	If this i	is a	Can	didate re	eport, c	andi	date sig	gn here.						
I swear (or affirm correct and compl) that this report, incl ete.	uding the	attached sc	hedules	s filed o	n pa	per o	or by elect	ronic me	dium	i, are to i	the best o	of my knov	vledge	and b	elief , t	true	
Sworn to and subs	scribed before me this day of	5	20							5	Signature	e of Perso	n Submitt	ing Rep	oort		_	
		ra				_						Prin	ted Name				_	
My Commission E	-											Ema	il				-	
	мо	D/	AY	YR					Are	ea Co	de	Daytin	ne Teleph	one Nu	mber			
Part II- If this is	a report of a cand	didate's	authorized	Comm	nittee,	Can	ndida	ate shall	sign he	ere.								
I swear (or affirm) No 320) as amend) that to the best of n ed.	ny knowle	edge and beli	ief this	politica	l co	ommi	ittee has n	ot violat	ed ar	ıy provis	ions of th	e act of Ju	ine 3,1	937 (F	P.L. 13	33,	
Sworn to and subso	cribed before me this day of		20								s	ignature	of Candida	ite			_	
												Printe	ed Name				-	
My Commission Exp	Signature					_						Ema	il				_	
	-					_											_	
	МО	D	AY	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: 10/18/2004 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)** 0.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 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 \$ 0.00 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 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 Candida	te		Rep	orting P	eriod					
			From: To			0:				
					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 Schedule I, Detailed Summary Page, Section 2.										

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:	То:								
				DA	TE		A	AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR		0.00		
Mailing Address							\$	0.00		
City	State	Zip Cod	e (Plus 4)							
								PAGE TOTAL		
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 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 Candidate				Reporting Period						
From:					Т	То:				
			D	ATE		AM	OUNT			
			мо	DAY	YEAR	\$	0.00			
State	Zip Code (Plu	s 4)								
•			Occupation							
ce of Business	City			State		Zip Code	(Plus 4)			
dule I, Detailed Su	ummary Page	Sectio	on 3.				GE TOTAL 0.00			
	State ce of Business	State Zip Code (Plus ce of Business City	State Zip Code (Plus 4) ce of Business City	From: DA DA State Zip Code (Plus 4) Occupat	From: DATE DATE DATE State Zip Code (Plus 4) City Occupation Ce of Business City State	From: To DATE MO DAY YEAR State Zip Code (Plus 4) Image: Comparison of the second	From: To: DATE AM MO DAY YEAR \$ State Zip Code (Plus 4) Occupation ce of Business City State Zip Code			

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:			То:				
				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 Sched	ule 1, Detailed Sumn	nary 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		
PADF PAC	From:	То:	<u>10/18/2004</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 Re			Reporting	Period	·			
	From:			То:				
				DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address		_				7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:			1					
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,		PAGE TOTA	AL.
						\$		0.00

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

Name of Filing Committee or Candidate				Reporting Period						
						То:				
					DATE		AMOUNT			
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address							\$ 0.00			
City	State	Zip Code(Plus 4)								
Employer of Contributor				Occupa	ation					
Employer Mailing Address/Principal Plac	e of Business	City	State	e Zip	Code(Plus 4)	Descri	ption of Contribution			
Enter Grand Total of Part G on Scho Summary Page, Section 3.	edule II, In-Kin	d Contributions D	etaile	ed			PAGE TOTAL 0.00			

SCHEDULE III STATEMENT OF EXPENDITURES

Nam	Name of Filing Committee or Candidate				Reporting Period							
PADF	PAC				From			То:	<u>10/18/2004</u>			
						DATE			AMOUNT			
To WI	nom Paid				мо	DAY	YEAR					
SENA	TE REPUBLIC CAMPAIGN COMM	MITTEE										
Mailin	ng Address				9	24	2004	\$	1,000.00			
City	HARRISBURG	State	Zip Code (P	us 4)	Description of Expenditure							
PA				CONTRI	BUTION							
To Whom Paid					мо	DAY	YEAR					
SENA	TE DEMOCRAT CAMPAIGN COM	IMITTEE										
Mailin	ng Address				9	24	2004	\$	1,000.00			
City	HARRISBURG	State	Zip Code (P	us 4)	Descrip	tion of Exp	enditure					
PA				CONTRIBUTION								
To Whom Paid				мо	DAY	YEAR						
HOUS	E REPUBLICAN CAMPAIGN CO	MMITTEE			но		TEAK					
Mailin	ıg Address				9	24	2004	\$	1,000.00			
City	HARRISBURG	State	Zip Code (P	us 4)	Descrip	tion of Exp	enditure					
		PA			CONTRI	BUTION						
To Wi	nom Paid				мо	DAY	YEAR					
HOUS	E DEMOCRATIC CAMPAIGN CC	MMITTEE										
Mailin	ng Address				9	24	2004	\$	1,000.00			
City	HARRISBURG	State	Zip Code (P	us 4)	Description of Expenditure							
		PA			CONTRIBUTION							
To Wł	nom Paid				мо	DAY	YEAR					
PETER	R DALEY CAMPAIGN COMMITTE	E										
Mailin	ng Address				10	12	2004	\$	500.00			
City	HARRISBURG	State	Zip Code (P	us 4)	Descrip	tion of Exp	enditure					
		PA			CONTRI	BUTION						
To WI	nom Paid				мо	DAY	YEAR					
DEWE	EESE CAMPAIGN COMMITTEE				no							
Mailin	Mailing Address			10	13	2004	\$	500.00				
City HARRISBURG State Zip Code (Plus 4)			Descrip	tion of Exp	enditure	•						
	РА			CONTRIBUTION								
F 7									PAGE TOTAL			
Entei	r Grand Total of Expenditure	s on Page 1, I	keport Cover Page, .	item D				\$	5,000.00			