### **Campaign Finance Report**

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

						Ι_			CAN	DII	DATE		/ 60	MMITTEE		LORE	SYIST		
Filer Identificati Number :	on	4028	1				port ed B		CAN	ווט	DATE	~		MMITTEE		LODI	71131		
Name of Filing C	ommitte	e, Candida	ate or L	obbyist:		ARG	GALL	, DAV	ID G.										
Street Address:																			
City:									State:					Zip Code	e:				
TYPE OF REPORT	6TH TUES	_	1.	2ND FRIDA PRIMARY	Y PRE	-	2.	30 DA		Р	OST-	3.		AMENDME REPORT?	NT	Yes	No	)	<b>\</b>
(place X to the right of	6TH TUES		4.	2ND FRIDA ELECTION	y pri	E-	5. <b>X</b>	30 DA		Р	OST-	6.		TERMINAT REPORT?	ΓΙΟΝ	Yes	No	)	<b>√</b>
report type)	ANNUAL	. REPORT	7.	<b>Year</b> 2004					IG MET CHECK					PAPER		$\checkmark$	DISKI	TTE	
Name of Office S	L Sought by	/ Candidat	te:						DATE	0	FELE	СТІ	ON	District Number	Office Code	Par	ty Code	Cour	
									МО		DAY		YEAR	124	STH	REP		54	•
REPRESENTATI	VE IN TH	HE GENER	AL ASS	EMBLY						11		2	2004		(SEE INS	TRUCTIO	ONS FOR	CODES	)
Summary of	Receipts	s and	МО	DAY	YEAR	ł			МО		DAY	,	YEAR	FOF	R OFFIC	E USE	ONLY		
Expenditures	from:			1 1		1	T	0		10	:	18	2004						
A. Amount Bro	ught For	ward Fron	1 Last R	eport	•		1	\$				•	0.00						
B. Total Moneta	ary Contr	ributions A	And Rec	eipts (From	Sche	dule	e I)	\$				1	1,183.69						
C. Total Funds	Available	e (Sum Of	Lines A	and B)				\$				1	,183.69						
D. Total Expend	ditures (I	From Sche	edule II	I)				\$				1	,183.69						
E. Ending Cash	Balance	(Subtract	Line D	From Line	C)			\$					0.00						
F. Value Of In-	Kind Con	tributions	Receiv	ed (From S	chedu	le I	I)	\$					0.00						
G. Unpaid Debt	s And Ob	oligations	(From S	Schedule IV	)			\$					0.00		,				
					AFF	ID	AVI	T SE	CTIO	N									
PART I - If this is	s a Comm	nittee repo	ort, trea	surer sign	here.	If th	nis is	a Car	didate	re	port, c	cano	didate sig	ın here.					
I swear (or affirm) correct and comple		report, incl	uding the	attached scl	hedule	s file	ed on	paper	or by el	ectr	onic m	ediu	ım, are to t	he best of	my know	/ledge	and bel	ief , tr	ue
Sworn to and subs	cribed bef day of	ore me this		20						•			Signature	of Person	Submitt	ing Rep	ort		
	_	Signatu	re					-						Printe	ed Name				-
My Commission Ex	cpires							_		-				Email					
		мо	D	AY	YR						Are	ea C	ode	Daytime	Telepho	one Nu	mber		
Part II- If this is	a report	of a cand	lidate's	authorized	Comr	nitte	ee, C	andid	ate sha	all s	sign he	ere.							
I swear (or affirm) No 320) as amende		ne best of m	y knowle	edge and beli	ef this	poli	itical	comm	ittee ha	s no	ot viola	ted	any provis	ions of the	act of Ju	ne 3,19	937 (P.I	L. 133	3,
Sworn to and subsc		re me this											s	ignature of	Candida	te			-
	day of —							-						Printed	Name				-
		Signature						-							-				_
My Commission Exp	ires													Email					
	-	МО	D	AY	YR	ł		-			Area	Cod	e	Day	time Te	lephon	e Numl	er	-

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting Period		
ARGALL, DAVID G.	From:	To:	10/18/2004
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			
TOTAL for the Reporting	Period (1)	\$	0.00
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)		\$	0.00
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)		\$	1,183.69
All Other Contributions (Part D)		\$	0.00
TOTAL for the Reporting	Period (3)	\$	1,183.69
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa		\$	1,183.69

#### **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 Candidat	e	F	Reporting	Period			
		F	rom:		То	:	
				DATE			AMOUNT
Full Name of Contributing Committee			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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

### **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.

Name of Filing Comm	nittee or Candidate	Re	eporting F	eriod			
		Fr	rom:		Т	<b>)</b> :	
		,		DATE			AMOUNT
Full Name of Contribut	or		МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
							PAGE TOTAL

#### **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 Ca	andidate		Reporting	Period				
ARGALL, DAVID G.			From:			То:	<u>10</u>	)/18/2004
				DA	TE			MOUNT
Full Name of Contributing Com	mittee			мо	DAY	YEAR		
VOLUNTEERS FOR ARGALL					2711		\$	295.94
Mailing Address PO BOX 24	1			9	10	2004		
City TAMAQUA	State	Zip Code	e (Plus 4)					
	PA	18252						
Full Name of Contributing Com	mittee			МО	DAY	YEAR		
VOLUNTEERS FOR ARGALL							<b>\$</b>	299.30
Mailing Address PO BOX 24	1			8	4	2004		
<b>City</b> TAMAQUA	State	Zip Code	e (Plus 4)					
	PA	18252						
Full Name of Contributing Com	mittee			мо	DAY	YEAR		
VOLUNTEERS FOR ARGALL							\$	388.20
Mailing Address PO BOX 24	1			7	12	2004		
City TAMAQUA	State	Zip Code	e (Plus 4)					
	PA	18252						
Full Name of Contributing Com	mittee			мо	DAY	YEAR		
VOLUNTEERS FOR ARGALL					2711		\$	200.25
Mailing Address PO BOX 24	1			9	29	2004		
City TAMAQUA	State	Zip Code	e (Plus 4)					
	PA	18252						
								PAGE TOTAL
Enter Grand Total of Part C	on Schedule I, Detailed	d Summary Pa	ige, Sectio	n 3.				
	, ,	. ,	<b>5</b> ,	-			\$	1,183.69

## 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			Rep	orting Pe	riod			
			Fror	n:		To	<b>:</b>	
				D	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							1	
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupa	tion			
Employer Mailing Address/Principal Pla	ce of Business	City		•	State		Zip C	ode (Plus 4)
Enter Grand Total of Part C on Scho	dule I, Detailed S	Summary Page,	, Sectio	on 3.		:	\$	PAGE TOTAL 0.00

## 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	ting Peri	od			
			From:			To:		
				C	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address	_						$\neg$	
City	State	Zip Code (	Plus 4)					
Receipt Description	•	•		•	•	•	•	
			<b>.</b> .:	_				PAGE TOTAL
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:	To:	10/18/2004
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	<b>\$</b>	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)	<b>\$</b>	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,		\$	0.00

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

ame of Filing Committee or Candidate  Report  From:	Reportin	g Period					
			From:			To:	
		-		DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>7</b> \$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:	•	-	•	•		•	
Enter Grand Total of Part F on S	chedule II, In-Ki	nd Contributions Detai	led Sum	mary Pag	ge,		PAGE TOTAL
Section 2.						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate				Rep	orting	Period				
				Fro	m:		To:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address				-					\$	0.00
City	State	;	Zip Code(Plus 4)							
Employer of Contributor					Occup	ation				
Employer Mailing Address/Principal Plac	e of Business	City	′	State	e Zip	Code(Plus 4)	Descr	ript	ion of Contribution	on
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	ontributions De	etaile	ed				PAGE TOT	ΓAL
Summary Page, Section 3.	<b></b>									0.00

## STATEMENT OF EXPENDITURES

Name of Filing Committee or Co	andidate		Reporti	ng Period			
ARGALL, DAVID G.			From			То:	10/18/2004
				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
DAVID ARGALL			110				
Mailing Address 106 LAKE D	DR		7	12	2004	\$	388.20
City NESQUEHONING	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	18240	MILEAG	GE-TRAVEL	EXPENSI	ES	
To Whom Paid DAVID ARGALL			МО	DAY	YEAR		
Mailing Address 106 LAKE DR				4	2004	\$	299.30
City NESQUEHONING	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	18240	MILEAG	GE-DINNER	N CAMP	-VOLS.	
To Whom Paid			мо	DAY	YEAR		
DAVID ARGALL			1.10		I EAL		
Mailing Address 106 LAKE D	PR		9	10	2004	\$	295.94
City NESQUEHONING	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	18240	TRAVEL	EXPENDIT	TURES		
To Whom Paid			МО	DAY	YEAR		
DAVID ARGALL						4	
Mailing Address 106 LAKE D	PR		9	29	2004	\$	200.25
City NESQUEHONING	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	ı						

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

1,183.69