

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 : 8400088		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: VOLUNTEERS FOR ARGALL											
Street Address: P.O. BOX 241											
City: TAMAQUA				State: PA		Zip Code: 18252					
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 2020	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
SENATOR IN THE GENERAL ASSEMBLY					MO	DAY	YEAR	29	STS	REP	54
					11	3	2020	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		5	19	2020		6	22	2020			
A. Amount Brought Forward From Last Report					\$		644,213.69				
B. Total Monetary Contributions And Receipts (From Schedule I)					\$		42,000.00				
C. Total Funds Available (Sum Of Lines A and B)					\$		686,213.69				
D. Total Expenditures (From Schedule III)					\$		68,652.11				
E. Ending Cash Balance (Subtract Line D From Line C)					\$		617,561.58				
F. Value Of In-Kind Contributions Received (From Schedule II)					\$		0.00				
G. Unpaid Debts And Obligations (From Schedule IV)					\$		75,000.00				

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
VOLUNTEERS FOR ARGALL	From: <u>5/19/2020</u> To: <u>6/22/2020</u>

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)	\$ 2,000.00
All Other Contributions (Part D)	\$ 40,000.00
TOTAL for the Reporting Period (3)	\$ 42,000.00

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.)	\$ 42,000.00
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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 VOLUNTEERS FOR ARGALL	Reporting Period From: <u>5/19/2020</u> To: <u>6/22/2020</u>
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				DATE			AMOUNT	
Full Name of Contributing Committee OPERATORS FOR SKILL PAC				MO	DAY	YEAR	\$	1,000.00
Mailing Address PO BOX 343				6	20	2020		
City HARRISBURG	State PA	Zip Code (Plus 4) 17108						
Full Name of Contributing Committee CHESAPEAKE ENERGY CORPORATION FEDERAL PAC				MO	DAY	YEAR	\$	1,000.00
Mailing Address PO BOX 18496				6	20	2020		
City OKLAHOMA	State OK	Zip Code (Plus 4) 73154						

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

PAGE TOTAL
\$ 2,000.00

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 VOLUNTEERS FOR ARGALL	Reporting Period From: <u>5/19/2020</u> To: <u>6/22/2020</u>
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				DATE			AMOUNT
Full Name of Contributor SCOTT KROH				MO	DAY	YEAR	\$ 20,000.00
Mailing Address 809 WELDON STREET				6	20	2020	
City LATROBE	State PA	Zip Code (Plus 4) 15650					
Employer Name ROBINDALE ENERGY				Occupation CEO			
Employer Mailing Address/Principal Place of Business 11 LLOYD AVESUITE 200			City LATROBE		State PA	Zip Code (Plus 4) 15650	
Full Name of Contributor JUDSON KROH				MO	DAY	YEAR	\$ 20,000.00
Mailing Address 80 WATERFRONT DRIVE				6	20	2020	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15222					
Employer Name ROBINDALE ENERGY				Occupation CHIEF FINANCIAL OFFICER			
Employer Mailing Address/Principal Place of Business 11 LLOYD AVE			City LATROBE		State PA	Zip Code (Plus 4) 15650	

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

PAGE TOTAL
\$ 40,000.00

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	
VOLUNTEERS FOR ARGALL		From: <u>5/19/2020</u> To: <u>6/22/2020</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	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
VOLUNTEERS FOR ARGALL	From <u>5/19/2020</u> To: <u>6/22/2020</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
COMMITTEE TO ELECT DAN LAUGHLIN				
Mailing Address 4619 AUTUMN WOOD TRAIL	5	20	2020	\$ 10,000.00
City ERIE	State PA	Zip Code (Plus 4) 16506	Description of Expenditure CONTRIBUTION	
To Whom Paid	MO	DAY	YEAR	
FRIENDS OF DEVLIN ROBINSON				
Mailing Address PO BOX 792	5	20	2020	\$ 5,000.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure CONTRIBUTION	
To Whom Paid	MO	DAY	YEAR	
THE BARTLETT GROUP				
Mailing Address 3690 VARTAN WAY SUITE B	5	25	2020	\$ 7,270.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17110	Description of Expenditure RESEARCH	
To Whom Paid	MO	DAY	YEAR	
VERIZON				
Mailing Address P.O. BOX 28000	6	4	2020	\$ 218.68
City LEHIGH VALLEY	State PA	Zip Code (Plus 4) 18002	Description of Expenditure CELL PHONES	
To Whom Paid	MO	DAY	YEAR	
DAVID ARGALL				
Mailing Address 106 LAKE DRIVE	6	8	2020	\$ 813.92
City NESQUEHONING	State PA	Zip Code (Plus 4) 18240	Description of Expenditure MILEAGE REIMBURSEMENT	
To Whom Paid	MO	DAY	YEAR	
COMMITTEE TO ELECT DOUG MASTRIANO				
Mailing Address 280 MT UNION ROAD	6	8	2020	\$ 5,000.00
City FAYETTESVILLE	State PA	Zip Code (Plus 4) 17222	Description of Expenditure CONTRIBUTION	

To Whom Paid COMMITTEE TO ELECT ELDER VOGEL			MO	DAY	YEAR	\$ 5,000.00
Mailing Address 566 GLEN EDEN ROAD			6	8	2020	
City ROCHESTER	State PA	Zip Code (Plus 4) 15074	Description of Expenditure CONTRIBUTION			

To Whom Paid COMMITTEE TO ELECT GENE YAW			MO	DAY	YEAR	\$ 5,000.00
Mailing Address PO BOX 3246			6	8	2020	
City WILLIAMSPORT	State PA	Zip Code (Plus 4) 17701	Description of Expenditure CONTRIBUTION			

To Whom Paid COMMITTEE TO ELECT JOE PITTMAN			MO	DAY	YEAR	\$ 5,000.00
Mailing Address 254 CHESTNUT ST			6	8	2020	
City INDIANA	State PA	Zip Code (Plus 4) 15701	Description of Expenditure CONTRIBUTION			

To Whom Paid COMMITTEE TO ELECT KIM WARD			MO	DAY	YEAR	\$ 5,000.00
Mailing Address 300 OLD AIRPORT ROAD			6	8	2020	
City HEMPFIELD TWP	State PA	Zip Code (Plus 4) 15601	Description of Expenditure CONTRIBUTION			

To Whom Paid COMMITTEE TO ELECT MIKE REGAN			MO	DAY	YEAR	\$ 5,000.00
Mailing Address 35 AFFIRMED DRIVE			6	8	2020	
City DILLSBURG	State PA	Zip Code (Plus 4) 17019	Description of Expenditure CONTRIBUTION			

To Whom Paid COMMITTEE TO ELECT SCOTT HUTCHINSON			MO	DAY	YEAR	\$ 5,000.00
Mailing Address 713 W. FIRST ST.			6	8	2020	
City OIL CITY	State PA	Zip Code (Plus 4) 16301	Description of Expenditure CONTRIBUTION			

To Whom Paid COMMITTEE TO ELECT TIM TWARDZIK			MO	DAY	YEAR	\$ 5,000.00
Mailing Address 200 BUTLER ROAD			6	8	2020	
City FRACKVILLE	State PA	Zip Code (Plus 4) 17931	Description of Expenditure CONTRIBUTION			

To Whom Paid COMMITTEE TO ELECT WAYNE LANGERHOLC			MO	DAY	YEAR	\$ 5,000.00
Mailing Address 413 OLD FARM LANE			6	8	2020	
City JOHNSTOWN	State PA	Zip Code (Plus 4) 15904	Description of Expenditure CONTRIBUTION			

To Whom Paid LEIBY'S RESTAURANT			MO	DAY	YEAR	\$ 31.87
Mailing Address 848 WEST PENN PIKE			6	8	2020	
City TAMAQUA	State PA	Zip Code (Plus 4) 18252	Description of Expenditure PIES FOR EVENT			

To Whom Paid PHILIP MELLEY MEMORIAL LODGE #65			MO	DAY	YEAR	\$ 100.00
Mailing Address PO BOX 300			6	8	2020	
City BETHEL	State PA	Zip Code (Plus 4) 19507	Description of Expenditure AD			

To Whom Paid STAPLES			MO	DAY	YEAR	\$ 144.13
Mailing Address 6104 CRESSONA MALL			6	8	2020	
City POTTSVILLE	State PA	Zip Code (Plus 4) 17901	Description of Expenditure SUPPLIES			

To Whom Paid VISA			MO	DAY	YEAR	\$ 73.51
Mailing Address P.O. BOX 71083			6	8	2020	
City CHARLOTTE	State NC	Zip Code (Plus 4) 28272	Description of Expenditure DINNER WITH DONOR			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 68,652.11

SCHEDULE IV

STATEMENT OF UNPAID DEBTS

**Use this Section to itemize all unpaid debts and obligations
which are outstanding at the end of the reporting period**

Name of Filing Committee or Candidate VOLUNTEERS FOR ARGALL	Reporting Period From: <u>5/19/2020</u> To: <u>6/22/2020</u>
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				DATE			Outstanding Balance of Debt
Name of Creditor				MO	DAY	YEAR	\$ 75,000.00
DAVID & BETH ARGALL							
Mailing Address 106 LAKE DRIVE				5	18	2020	
City	NESQUEHONING		State	Zip Code (Plus 4)		Description of Debt	
			PA	18240		LOAN TO CAMPAIGN	

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.	PAGE TOTAL \$ 75,000.00
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