

# 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 :				40281		Report Filed By :		CANDIDATE		✓		COMMITTEE		LOBBYIST							
Name of Filing Committee, Candidate or Lobbyist: ARGALL, DAVID G.																					
Street Address:																					
City:								State:				Zip Code:									
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.		AMENDMENT REPORT?		Yes		No		✓	
		6TH TUESDAY PRE-ELECTION		4.		2ND FRIDAY PRE-ELECTION		5.		30 DAY POST-ELECTION		6.		TERMINATION REPORT?		Yes		✓		No	
		ANNUAL REPORT		7. X		Year 2004				FILING METHOD ( ) CHECK ONE				PAPER		✓		DISKETTE			
Name of Office Sought by Candidate:  REPRESENTATIVE IN THE GENERAL ASSEMBLY								DATE OF ELECTION				District Number		Office Code		Party Code		County Code			
								MO		DAY		YEAR		124		STH		REP		54	
								11		2		2004				(SEE INSTRUCTIONS FOR CODES)					
Summary of Receipts and Expenditures from:				MO		DAY		YEAR		TO		MO		DAY		YEAR		FOR OFFICE USE ONLY			
				1		1		1				12		31		2004					
A. Amount Brought Forward From Last Report								\$								0.00					
B. Total Monetary Contributions And Receipts (From Schedule I)								\$								716.30					
C. Total Funds Available (Sum Of Lines A and B)								\$								716.30					
D. Total Expenditures (From Schedule III)								\$								716.30					
E. Ending Cash Balance (Subtract Line D From Line C)								\$								0.00					
F. Value Of In-Kind Contributions Received (From Schedule II)								\$								0.00					
G. Unpaid Debts And Obligations (From Schedule IV)								\$								0.00					

## 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**

**Signature**

### My Commission Expires

MO DAY YR

Printed Name \_\_\_\_\_

Email

Area Code	Daytime Telephone Number
214	950-1234
214	950-1235
214	950-1236
214	950-1237
214	950-1238
214	950-1239
214	950-1240
214	950-1241
214	950-1242
214	950-1243
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214	950-1292
214	950-1293
214	950-1294
214	950-1295
214	950-1296
214	950-1297
214	950-1298
214	950-1299

**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**

## My Commission Expires

MO DAY YR

Area Code	Daytime Telephone Number
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**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
**Detailed Summary Page**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
ARGALL, DAVID G.	From: To: <u>12/31/2004</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 0.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 0.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 716.30
<b>All Other Contributions (Part D)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 716.30

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>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.)</b>	\$ 716.30
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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.**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
ARGALL, DAVID G.	<b>From:</b> <b>To:</b> <u>12/31/2004</u>

				DATE		AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 194.63
VOLUNTEERS FOR ARGALL				12	28	2004	
Mailing Address P O BOX 241							
City TAMAQUA		State PA	Zip Code (Plus 4) 18252				
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 229.22
VOLUNTEERS FOR ARGALL				12	11	2004	
Mailing Address P O BOX 241							
City TAMAQUA		State PA	Zip Code (Plus 4) 18252				
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 292.45
VOLUNTEERS FOR ARGALL				11	30	2004	
Mailing Address P O BOX 241							
City TAMAQUA		State PA	Zip Code (Plus 4) 18252				

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

<b>PAGE TOTAL</b>	
\$	716.30

**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.)**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
	<b>From:</b> <b>To:</b>

			DATE			AMOUNT	
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					
Employer Name			Occupation				
Employer Mailing Address/Principal Place of Business		City		State		Zip Code (Plus 4)	

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

<b>PAGE TOTAL</b>	
\$	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.**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>  <b>From:</b> <b>To:</b>
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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.**

<b>PAGE TOTAL</b>	
\$	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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
ARGALL, DAVID G.		<b>From:</b>	<b>To:</b> <u>12/31/2004</u>
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period		(1)	\$ 0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period		(2)	\$ 0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
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: <span style="float: right;">To:</span>
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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.						<b>PAGE TOTAL</b>  \$ 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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
ARGALL, DAVID G.	From To: <u>12/31/2004</u>

DATE				AMOUNT
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
DAVID G ARGALL				
<b>Mailing Address</b> 106 LAKE DR	11	30	2004	\$ 292.45
<b>City</b> NESQUEHONING	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18240	<b>Description of Expenditure</b> DINNER WITH CAMPAIGN VOL.	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
DAVID G ARGALL				
<b>Mailing Address</b> 106 LAKE DR	12	11	2004	\$ 229.22
<b>City</b> NESQUEHANING	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18240	<b>Description of Expenditure</b> DINNER WITH CAMPAIGN VOLS.	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
DAVID G ARGALL				
<b>Mailing Address</b> 106 LAKE DR	12	28	2004	\$ 194.63
<b>City</b> NESQUEHONING	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18240	<b>Description of Expenditure</b> MAILEAGE REIMBURSEMENT	
<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>				<b>PAGE TOTAL</b> \$ 716.30

