

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 :		2002073		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: GERGELY, MARC COM TO ELECT												
Street Address: 1985 LINCOLN WAY STE 23-314												
City: WHITE OAK						State: PA		Zip Code: 15131				
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	<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. X	Year 2004		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
REPRESENTATIVE IN THE GENERAL ASSEMBLY						MO	DAY	YEAR	STH	DEM	02	
						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						\$		3,681.50				
B. Total Monetary Contributions And Receipts (From Schedule I)						\$		0.00				
C. Total Funds Available (Sum Of Lines A and B)						\$		3,681.50				
D. Total Expenditures (From Schedule III)						\$		1,248.85				
E. Ending Cash Balance (Subtract Line D From Line C)						\$		2,432.65				
F. Value Of In-Kind Contributions Received (From Schedule II)						\$		0.00				
G. Unpaid Debts And Obligations (From Schedule IV)						\$		21,050.00				

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
GERGELY, MARC COM TO ELECT	From: To: <u>12/31/2004</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)	\$ 0.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 0.00

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.)	\$ 0.00
---	---------

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)					

PAGE TOTAL	
\$	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	Reporting Period	
	From:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					

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

PAGE TOTAL
\$ 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: To:

				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
Mailing Address							\$ 0.00
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.

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
	<div style="display: flex; justify-content: space-between;"> From: To: </div>

				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	
GERGELY, MARC COM TO ELECT		From:	To: <u>12/31/2004</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:
---------------------------------------	--

			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

5/4/2024 7:46:33 PM

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
GERGELY, MARC COM TO ELECT	From To: <u>12/31/2004</u>

DATE				AMOUNT		
To Whom Paid WHITE OAK FLORIST			MO	DAY	YEAR	\$ 129.47
Mailing Address 1422 LINCOLN WAY			11	23	2004	
City WHITE OAK	State PA	Zip Code (Plus 4) 15131	Description of Expenditure CONSTITUENT FUNERAL ARRANGEMENTS			
To Whom Paid WEST MIFFLIN NEW DEMOCRATS			MO	DAY	YEAR	\$ 100.00
Mailing Address 105 5TH AVENUE			12	8	2004	
City WEST MIFFLIN	State PA	Zip Code (Plus 4) 15122	Description of Expenditure DONATION			
To Whom Paid UNITED STATES POSTAL SERVICE			MO	DAY	YEAR	\$ 192.40
Mailing Address OAK PARK MALL			12	22	2004	
City WHITE OAK	State PA	Zip Code (Plus 4) 15131	Description of Expenditure POSTAGE			
To Whom Paid REHORD PRINTING CO.			MO	DAY	YEAR	\$ 645.54
Mailing Address 15 ANTHRA PLAZA CENTER			12	22	2004	
City SHAMOKIN	State PA	Zip Code (Plus 4) 17872	Description of Expenditure CHRISTMAS CARDS			
To Whom Paid STRATIGOS BANQUET CENTRE			MO	DAY	YEAR	\$ 177.44
Mailing Address 131 COLONIAL MANOR DRIVE			12	23	2004	
City NORTH HUNTINGDON	State PA	Zip Code (Plus 4) 15642	Description of Expenditure CONSTITUENT/HOLIDAY APPRECIATION LUNCHEON			

To Whom Paid NATIONAL CITY BANK			MO	DAY	YEAR	
Mailing Address OLYMPIA SHOPPING CENTER			12	31	2004	
City MCKEESPORT	State PA	Zip Code (Plus 4) 15132	Description of Expenditure BANK FEES NOV/DEC			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 1,248.85

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			Reporting Period		
GERGELY, MARC COM TO ELECT			From:		To: 12/31/2004
					Outstanding Balance of Debt
DATE					
Name of Creditor			MO	DAY	YEAR
CITY FINANCE					
Mailing Address 330 SIXTH AVE			3	23	2002
					\$ 1,050.00
City MCKEESPORT	State PA	Zip Code (Plus 4) 15132	Description of Debt CAMPAIGN LOAN FR. 3/2005 AND 8/2003		
					Outstanding Balance of Debt
DATE					
Name of Creditor			MO	DAY	YEAR
COMMITTEE TO ELECT MIKE VEON					
Mailing Address 1421 5TH AVENUE			5	26	2004
					\$ 20,000.00
City BEAVER FALLS	State PA	Zip Code (Plus 4) 15010	Description of Debt LOAN		
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.					PAGE TOTAL
					\$ 21,050.00