

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: committee to elect marc gergely											
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	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6. X	TERMINATION REPORT?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	Year 2005	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	8	2005	(SEE INSTRUCTIONS FOR CODES)				
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		1	1	1	TO	11	28	2005			
A. Amount Brought Forward From Last Report				\$		4,396.21					
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		0.00					
C. Total Funds Available (Sum Of Lines A and B)				\$		4,396.21					
D. Total Expenditures (From Schedule III)				\$		2,750.74					
E. Ending Cash Balance (Subtract Line D From Line C)				\$		1,645.47					
F. Value Of In-Kind Contributions Received (From Schedule II)				\$		0.00					
G. Unpaid Debts And Obligations (From Schedule IV)				\$		20,000.00					

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

My Commission Expires _____

MO DAY YR

Signature of Person Submitting Report

Printed Name

Email

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

My Commission Expires _____

MO DAY YR

Signature of Candidate

Printed Name

Email

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
committee to elect marc gergely	From: To: <u>11/28/2005</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
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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	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 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 Candidate	Reporting Period
	From: _____ To: _____

	DATE	AMOUNT
--	-------------	---------------

Full Name of Contributor	MO	DAY	YEAR	AMOUNT			
Mailing Address				\$ 0.00			
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:30%;">City</td> <td style="width:20%;">State</td> <td style="width:50%;">Zip Code (Plus 4)</td> </tr> </table>	City	State	Zip Code (Plus 4)				
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 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	
Mailing Address				\$ 0.00
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
	From: _____ To: _____

				DATE	AMOUNT
Full Name	MO	DAY	YEAR		
Mailing Address				\$	0.00
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
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	
Mailing Address				\$ 0.00
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: _____
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				DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR		
Mailing Address				\$	0.00
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 committee to elect marc gergely	Reporting Period From _____ To: <u>11/28/2005</u>
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			DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR	
Jamie's Dream Team	10	27	2005	\$ 24.00
Mailing Address 2023 Cypress Drive				
City White Oak	State PA	Zip Code (Plus 4) 15131		Description of Expenditure DONATION
To Whom Paid 20th Century Club of McKeesport	10	27	2005	\$ 30.00
Mailing Address N/A				
City	State PA	Zip Code (Plus 4)		Description of Expenditure donation
To Whom Paid Bob Casey for Senate	10	27	2005	\$ 250.00
Mailing Address 1700 Grant Building				
City Pittsburgh	State PA	Zip Code (Plus 4) 15219		Description of Expenditure donation
To Whom Paid Steel Valley Printers	11	2	2005	\$ 1,740.56
Mailing Address 107 East Eighth Avenue				
City Homestead	State PA	Zip Code (Plus 4) 15120		Description of Expenditure election mailers for Matthew Gergely-donation
To Whom Paid West Mifflin Democrats	11	2	2005	\$ 150.00
Mailing Address 309 Elm St				
City West Mifflin	State PA	Zip Code (Plus 4) 15122		Description of Expenditure donation

To Whom Paid White Oak Lions			MO	DAY	YEAR	
Mailing Address 248 Mary Ellen Drive			11	4	2005	
City North Versailles	State PA	Zip Code (Plus 4) 15137	Description of Expenditure donation and pancake breakfast tickets			
To Whom Paid McKeesport Lady Tigers			MO	DAY	YEAR	
Mailing Address 1960 Eden Park Blvd			11	7	2005	
City McKeesport	State PA	Zip Code (Plus 4) 15132	Description of Expenditure DONATION			
To Whom Paid Ameriquick Signs			MO	DAY	YEAR	
Mailing Address 14800 Route 30			11	16	2005	
City North Huntingdon	State PA	Zip Code (Plus 4) 15642	Description of Expenditure banner for truck-McK Salute to Santa parade			
To Whom Paid Ameraquick Signs			MO	DAY	YEAR	
Mailing Address 14800 Route 30			11	18	2005	
City North Huntingdon	State PA	Zip Code (Plus 4) 15642	Description of Expenditure banner for truck for McK Salute to Santa parade			
To Whom Paid West Mifflin Youth Football			MO	DAY	YEAR	
Mailing Address N/A			11	18	2005	
City	State PA	Zip Code (Plus 4)	Description of Expenditure donation			
To Whom Paid United States Post Office			MO	DAY	YEAR	
Mailing Address Oak Park Mall			11	23	2005	
City White Oak	State PA	Zip Code (Plus 4) 15131	Description of Expenditure postage for fundraiser mailer			

To Whom Paid National City Bank			MO	DAY	YEAR	
Mailing Address Olympia SHopping Center			10	31	2005	\$ 3.00
City McKeesport	State PA	Zip Code (Plus 4) 15132	Description of Expenditure return check fee			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 2,750.74

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 committee to elect marc gergely		Reporting Period From: _____ To: <u>11/28/2005</u>		
				Outstanding Balance of Debt
				DATE
Name of Creditor Committee to Elect Mike Veon		MO	DAY	YEAR
Mailing Address 1421 Fifth 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 \$ 20,000.00