Campaign Finance Report

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

	ion 2024	c0523	Filer Identification2024c0523ReportCANDIDATE							\checkmark	co	OMMITTE	E	LOB	BYIST	E	
Number : Name of Filing (Committee, Candid	ate or Lo	obbvist:		Filed BARGE	-											
					DAROI												
Street Address:																	
City:							St	ate:				Zip Cod	l e: 16	648			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. X	2ND FRIDA PRIMARY	Y PRE	- 2.		DAY IMAR		POST-	3.		AMENDMENT REPORT?		Yes	No	C	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	≣- 5.		DAY ECTIO		POST-	6.		TERMINA REPORT?		Yes	No	C	\checkmark
report type)	ANNUAL REPORT	7.	Year 2024					METHO ECK O						\checkmark	DISKI	ETTE	
Name of Office S	Sought by Candidat	te:					D	ATE O	FELE	СТІС	DN	District Number	Office Code	Par	ty Code	Cour	
							м	0	DAY	Y	EAR	80	STH	REF		07	
REPRESENTAT	IVE IN THE GENER	AL ASS	EMBLY					11		5	2024		(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of	Receipts and	мо	DAY	YEAR	2		м	0	DAY	Y	EAR	FO	R OFFIC	E USE	ONLY		
Expenditures	s from:		1 1	2	024	то		3		4	2024						
A. Amount Bro	ought Forward Fron	n Last R	eport				\$				0.00						
B. Total Monet	ary Contributions	And Rec	eipts (Fron	1 Sche	dule I))	\$				0.00						
C. Total Funds Available (Sum Of Lines A and B) \$ 0.00																	
D. Total Expen	ditures (From Sche	edule II	I)				\$				0.00						
E. Ending Cash	Balance (Subtract	t Line D	From Line	C)			\$				0.00						
F. Value Of In-	Kind Contributions	Receive	ed (From S	chedu	le II)		\$				0.00						
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	()			\$				0.00						
				AFF	IDAV	'IT S	SECT	TION									
PART I - If this i	s a Committee repo	ort, trea	surer sign	here.	If this	is a C	Candi	date re	eport, o	andi	date si	gn here.					
I swear (or affirm correct and compl) that this report, incl ete.	uding the	e attached sc	hedule	s filed o	n pap	er or l	by elect	ronic m	edium	, are to	the best of	f my know	vledge	and bel	ief , tr	ue
Sworn to and subs	scribed before me this day of	5	20							:	Signatur	e of Persor	n Submitt	ing Rep	oort		-
						_						Print	ed Name				-
My Commission E	Signatu xpires	re										Emai					-
	мо	D	AY	YR					Ar	ea Co	de		e Telepho	one Nu	mber		-
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nittee,	Cand	didate	e shall	sign h	ere.							Ē
I swear (or affirm) No 320) as amend) that to the best of n ed.	ny knowle	edge and beli	ef this	politica	al con	nmitte	e has n	ot viola	ted a	ny provis	ions of the	e act of Ju	ine 3,1	937 (P.I	L. 133	з,
Sworn to and subso	cribed before me this										s	ignature o	f Candida	ite			-
	day of 											Printe	d Name				_
	Signature																
My Commission Exp	-											Emai	I				
	мо	D/	AY	YR	2	_			Area	Code		Da	iytime Te	elephor	e Numi	ber	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** BARGER, SCOTT D From: <u>1/1/2024</u> **To:** <u>3/4/2024</u> 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 0.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4	4)							
								PAGE TOTAL		
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.								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			0:				
					DATE			AMOUNT		
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address	_	_					\$	0.00		
City	State	Zip Code (Plus 4)							
								PAGE TOTAL		
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2. \$ 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						
				То:					
				DA	TE			AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR		0.00	
Mailing Address							- \$	0.00	
City	State	Zip Cod	e (Plus 4)						
					PAGE TOTAL				
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section							\$	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					m: To:					
				DATE AMOUNT						
Full Name of Contributor				DAY	YEAR	\$	0.00			
State	Zip Code (Plu	s 4)								
•			Occupation							
ce of Business	City			State		Zip Code	(Plus 4)			
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section							GE TOTAL 0.00			
	State ce of Business	State Zip Code (Plus ce of Business City	State Zip Code (Plus 4) ce of Business City	From: DA DA From: DA MO State Zip Code (Plus 4) Coccupat ce of Business City	From: DATE DATE DATE State Zip Code (Plus 4) City Occupation Ce of Business City State	From: To DATE MO DAY YEAR State Zip Code (Plus 4) Image: Comparison of the second	From: To: DATE AM MO DAY YEAR \$ State Zip Code (Plus 4) Occupation ce of Business City State Zip Code			

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:						
				D	ATE			AMOUNT		
Full Name				мо	DAY	YEAR	\$		0.00	
Mailing Address										
City	State	Zip Code (Plus 4)							
Receipt Description	·	•					•			
		_						PAGE TO	TAL	
Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section							\$		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		
BARGER, SCOTT D	From:	<u>1/1/2024</u> То:	<u>3/4/2024</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	ſF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (3)	\$	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, I		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate R			Reporting Period						
	From:			То:					
	DATE			AMOUNT					
Full Name of Contributor				DAY	YEAR				
Mailing Address		_				7 \$		0.00	
City	State	Zip Code (Plus 4)							
Description of Contribution:			1						
Enter Grand Total of Part F on Sched Section 2.	iled Sum	mary Pag	je,		PAGE TOTA	AL.			
						\$		0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate				Reporting Period						
				From:						
					DATE		AMOUNT			
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address			-				\$ 0.00			
City	State	Zip Code(Plus 4)								
Employer of Contributor				Occupa	ation					
Employer Mailing Address/Principal Plac	State	e Zip	Code(Plus 4)	Descri	ption 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			Reporti	ng Period				
	From			То:				
		DATE		AMOUNT				
To Whom Paid	мо	DAY	YEAR					
Mailing Address						\$	0.00	
City	Zip Code (Plus 4)) Description of Expenditure						
Enter Grand Total of Exponditures	`				PAGE TOTAL			
	Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.					\$	0.00	

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