

# Campaign Finance Report

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

|   |                          |           |                         |                          |                                    |                         |                     |  |                                     |                    |                                     |                    |
|---|--------------------------|-----------|-------------------------|--------------------------|------------------------------------|-------------------------|---------------------|--|-------------------------------------|--------------------|-------------------------------------|--------------------|
| <b>Filer Identification Number :</b>  |                          | 2004127   |                         | <b>Report Filed By :</b> |                                    | <b>CANDIDATE</b>        |                     | <b>COMMITTEE</b> <input checked="" type="checkbox"/> |                                     | <b>LOBBYIST</b>    |                                     |                    |
| <b>Name of Filing Committee, Candidate or Lobbyist:</b> QUIGLEY, TOM COM TO ELECT |                          |           |                         |                          |                                    |                         |                     |  |                                     |                    |                                     |                    |
| <b>Street Address:</b> 560 PINE ST  |                          |           |                         |                          |                                    |                         |                     |  |                                     |                    |                                     |                    |
| <b>City:</b> ROYERSFORD   |                          |           |                         |                          |                                    | <b>State:</b> PA        |                     |  | <b>Zip Code:</b> 19468-2017         |                    |                                     |                    |
| <b>TYPE OF REPORT</b><br><br>(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                 |                                     |                    |
|   | 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 2005               |                          | <b>FILING METHOD ( ) CHECK ONE</b> |                         | <b>PAPER</b>        | <input checked="" type="checkbox"/>                  | <b>DISKETTE</b>                     |                    |                                     |                    |
| <b>Name of Office Sought by Candidate:</b>  |                          |           |                         |                          |                                    | <b>DATE OF ELECTION</b> |                     |  | <b>District Number</b>              | <b>Office Code</b> | <b>Party Code</b>                   | <b>County Code</b> |
| REPRESENTATIVE IN THE GENERAL ASSEMBLY  |                          |           |                         |                          |                                    | <b>MO</b>               | <b>DAY</b>          | <b>YEAR</b>  | STH                                 | REP                | 46                                  |                    |
|   |                          |           |                         |                          |                                    | 11                      | 8                   | 2005   | (SEE INSTRUCTIONS FOR CODES)        |                    |                                     |                    |
| <b>Summary of Receipts and Expenditures from:</b>                                 |                          | <b>MO</b> | <b>DAY</b>              | <b>YEAR</b>              | <b>TO</b>                          | <b>MO</b>               | <b>DAY</b>          | <b>YEAR</b>  | <b>FOR OFFICE USE ONLY</b>          |                    |                                     |                    |
|   |                          | 1         | 1                       | 1                        |                                    | 12                      | 31                  | 2005   |                                     |                    |                                     |                    |
| <b>A. Amount Brought Forward From Last Report</b>                                 |                          |           |                         |                          |                                    | \$ (47.33)              |                     |  |                                     |                    |                                     |                    |
| <b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>             |                          |           |                         |                          |                                    | \$ 18,491.81            |                     |  |                                     |                    |                                     |                    |
| <b>C. Total Funds Available (Sum Of Lines A and B)</b>                            |                          |           |                         |                          |                                    | \$ 18,444.48            |                     |  |                                     |                    |                                     |                    |
| <b>D. Total Expenditures (From Schedule III)</b>                                  |                          |           |                         |                          |                                    | \$ 12,702.40            |                     |  |                                     |                    |                                     |                    |
| <b>E. Ending Cash Balance (Subtract Line D From Line C)</b>                       |                          |           |                         |                          |                                    | \$ 5,742.08             |                     |  |                                     |                    |                                     |                    |
| <b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>              |                          |           |                         |                          |                                    | \$ 0.00                 |                     |  |                                     |                    |                                     |                    |
| <b>G. Unpaid Debts And Obligations (From Schedule IV)</b>                         |                          |           |                         |                          |                                    | \$ 10,250.00            |                     |  |                                     |                    |                                     |                    |

## 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

Printed Name

My Commission Expires

Email

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

|  |   |
|--|---|
| <b>Name of Filing Committee or Candidate</b> | <b>Reporting Period</b>                   |
| QUIGLEY, TOM COM TO ELECT                    | <b>From:</b> <b>To:</b> <u>12/31/2005</u> |

|  |           |
|--|-----------|
| <b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b> |           |
| <b>TOTAL for the Reporting Period (1)</b>                                      | \$ 425.00 |

|  |             |
|--|-------------|
| <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>                 | \$ 3,550.00 |
| <b>All Other Contributions (Part B)</b>  | \$ 4,675.00 |
| <b>TOTAL for the Reporting Period (2)</b>  | \$ 8,225.00 |

|   |             |
|---|-------------|
| <b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b> |             |
| <b>Contributions Received From Political Committees (Part C)</b>        | \$ 2,400.00 |
| <b>All Other Contributions (Part D)</b>                                 | \$ 1,900.00 |
| <b>TOTAL for the Reporting Period (3)</b>                               | \$ 4,300.00 |

|  |             |
|--|-------------|
| <b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b> |             |
| <b>TOTAL for the Reporting Period (4)</b>  | \$ 5,541.81 |

|   |              |
|---|--------------|
| <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> | \$ 18,491.81 |
|---|--------------|

**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.**

|  |  |  |  |                         |  |                              |  |
|--|--|--|--|-------------------------|--|------------------------------|--|
| <b>Name of Filing Committee or Candidate</b> |  |  |  | <b>Reporting Period</b> |  |                              |  |
| QUIGLEY, TOM COM TO ELECT                    |  |  |  | <b>From:</b>            |  | <b>To:</b> <u>12/31/2005</u> |  |
|  |  |  |  | <b>DATE</b>             |  | <b>AMOUNT</b>                |  |

  

|  |              |                          |           |            |             |           |
|--|--------------|--------------------------|-----------|------------|-------------|-----------|
| <b>Full Name of Contributing Committee</b> |              |                          | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 100.00 |
| ROB WONDERLING FOR STATE SENATE            |              |                          | 9         | 30         | 2005        |           |
| <b>Mailing Address</b>                     | PO BOX 397   |                          |           |            |             |           |
| <b>City</b>                                | <b>State</b> | <b>Zip Code (Plus 4)</b> |           |            |             |           |
| LEDERACH                                   | PA           | 19450                    |           |            |             |           |

  

|  |              |                          |           |            |             |           |
|--|--------------|--------------------------|-----------|------------|-------------|-----------|
| <b>Full Name of Contributing Committee</b> |              |                          | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 100.00 |
| CITIZENS FOR DONNELLY                      |              |                          | 9         | 30         | 2005        |           |
| <b>Mailing Address</b>                     |              |                          |           |            |             |           |
| PO BOX 367                                 |              |                          |           |            |             |           |
| <b>City</b>                                | <b>State</b> | <b>Zip Code (Plus 4)</b> |           |            |             |           |
| HORSHAM                                    | PA           | 19044                    |           |            |             |           |

  

|  |              |                          |           |            |             |           |
|--|--------------|--------------------------|-----------|------------|-------------|-----------|
| <b>Full Name of Contributing Committee</b> |              |                          | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 200.00 |
| EXELON PAC                                 |              |                          | 10        | 21         | 2005        |           |
| <b>Mailing Address</b>                     |              |                          |           |            |             |           |
| PO BOX 80573                               |              |                          |           |            |             |           |
| <b>City</b>                                | <b>State</b> | <b>Zip Code (Plus 4)</b> |           |            |             |           |
| CHICAGO                                    | IL           | 60680                    |           |            |             |           |

  

|  |              |                          |           |            |             |           |
|--|--------------|--------------------------|-----------|------------|-------------|-----------|
| <b>Full Name of Contributing Committee</b> |              |                          | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 150.00 |
| KLETT ROONEY LIEBER & SCHORLING PAC        |              |                          | 5         | 31         | 2005        |           |
| <b>Mailing Address</b>                     |              |                          |           |            |             |           |
| ONE OXFORD CENTRE 40TH FLOOR               |              |                          |           |            |             |           |
| <b>City</b>                                | <b>State</b> | <b>Zip Code (Plus 4)</b> |           |            |             |           |
| PITTSBURGH                                 | PA           | 15219                    |           |            |             |           |

  

|  |              |                          |           |            |             |           |
|--|--------------|--------------------------|-----------|------------|-------------|-----------|
| <b>Full Name of Contributing Committee</b> |              |                          | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 150.00 |
| UPSPAC                                     |              |                          | 5         | 31         | 2005        |           |
| <b>Mailing Address</b>                     |              |                          |           |            |             |           |
| 55 GLENLAKE                                |              |                          |           |            |             |           |
| <b>City</b>                                | <b>State</b> | <b>Zip Code (Plus 4)</b> |           |            |             |           |
| ALTANTA                                    | GA           | 30328                    |           |            |             |           |

|   |          |                         |    |     |      |           |
|---|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributing Committee<br>DUANE MORRIS LLP GOVERNMENT COMMITTEE STATE & LOCAL FUND |          |                         | MO | DAY | YEAR | \$ 150.00 |
| Mailing Address 4200 ONE LIBERTY PLACE  |          |                         | 4  | 21  | 2005 |           |
| City PHILADELPHIA   | State PA | Zip Code (Plus 4) 19103 |    |     |      |           |
| Full Name of Contributing Committee<br>WINE & SPIRITS BROKERS ASSOC. OF PA                      |          |                         | MO | DAY | YEAR | \$ 150.00 |
| Mailing Address PO BOX 60993  |          |                         | 4  | 22  | 2005 |           |
| City KING OF PRUSSIA  | State PA | Zip Code (Plus 4) 19406 |    |     |      |           |
| Full Name of Contributing Committee<br>H-TECH PAC   |          |                         | MO | DAY | YEAR | \$ 150.00 |
| Mailing Address THE BELLEVUE, SUITE 850   |          |                         | 4  | 22  | 2005 |           |
| City PHILADELPHIA   | State PA | Zip Code (Plus 4) 19102 |    |     |      |           |
| Full Name of Contributing Committee<br>HIGHMARK HEALTH PAC                                      |          |                         | MO | DAY | YEAR | \$ 150.00 |
| Mailing Address 1800 CENTER ST.   |          |                         | 4  | 15  | 2005 |           |
| City CAMP HILL  | State PA | Zip Code (Plus 4) 17089 |    |     |      |           |
| Full Name of Contributing Committee<br>AGENT PAC  |          |                         | MO | DAY | YEAR | \$ 150.00 |
| Mailing Address PO BOX 2023   |          |                         | 4  | 15  | 2005 |           |
| City MECHANICSBURG  | State PA | Zip Code (Plus 4) 17055 |    |     |      |           |
| Full Name of Contributing Committee<br>BIKE PAC   |          |                         | MO | DAY | YEAR | \$ 150.00 |
| Mailing Address PO BOX 564  |          |                         | 4  | 15  | 2005 |           |
| City MECHANICSBURG  | State PA | Zip Code (Plus 4) 17055 |    |     |      |           |

|   |          |                         |    |     |      |           |
|---|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributing Committee<br>PPL PEOPLE FOR GOOD GOVT STATE ACCOUNT |          |                         | MO | DAY | YEAR | \$ 150.00 |
| Mailing Address TWO NORTH NINTH STREET  |          |                         | 4  | 15  | 2005 |           |
| City ALLENTOWN  | State PA | Zip Code (Plus 4) 18101 |    |     |      |           |

|   |          |                         |    |     |      |           |
|---|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributing Committee<br>PPL PEOPLE FOR GOOD GOVT STATE ACCOUNT |          |                         | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address TWO NORTH NINTH STREET  |          |                         | 10 | 21  | 2005 |           |
| City ALLENTOWN  | State PA | Zip Code (Plus 4) 18101 |    |     |      |           |

|   |          |                         |    |     |      |           |
|---|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributing Committee<br>CERTIFIED PUBLIC ACCOUNTANTS PAC |          |                         | MO | DAY | YEAR | \$ 150.00 |
| Mailing Address 100 PINE STREET SUITE 275                               |          |                         | 4  | 15  | 2005 |           |
| City HARRISBURG   | State PA | Zip Code (Plus 4) 17101 |    |     |      |           |

|  |          |                         |    |     |      |           |
|--|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributing Committee<br>PENNSYLVANIA BANKERS PUBLIC AFFAIRS COMMITTEE |          |                         | MO | DAY | YEAR | \$ 150.00 |
| Mailing Address PO BOX 345   |          |                         | 4  | 15  | 2005 |           |
| City HARRISBURG  | State PA | Zip Code (Plus 4) 17108 |    |     |      |           |

|  |          |                         |    |     |      |           |
|--|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributing Committee<br>PSEA PACE   |          |                         | MO | DAY | YEAR | \$ 150.00 |
| Mailing Address 400 NORTH THIRD STREET PO BOX 1724 |          |                         | 4  | 15  | 2005 |           |
| City HARRISBURG                                    | State PA | Zip Code (Plus 4) 17105 |    |     |      |           |

|  |          |                         |    |     |      |           |
|--|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributing Committee<br>CHAMBER PAC |          |                         | MO | DAY | YEAR | \$ 150.00 |
| Mailing Address 417 WALNUT STREET                  |          |                         | 4  | 15  | 2005 |           |
| City HARRISBURG                                    | State PA | Zip Code (Plus 4) 17101 |    |     |      |           |

|   |          |                         |    |     |      |           |
|---|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributing Committee<br>FIRST ENERGY PAC             |          |                         | MO | DAY | YEAR | \$ 150.00 |
| Mailing Address 76 S. MAIN STREET                                   |          |                         | 4  | 15  | 2005 |           |
| City AKRON  | State OH | Zip Code (Plus 4) 44308 |    |     |      |           |
| Full Name of Contributing Committee<br>DECHERT LLP                  |          |                         | MO | DAY | YEAR | \$ 150.00 |
| Mailing Address 30 NORTH THIRD STREET                               |          |                         | 4  | 15  | 2005 |           |
| City HARRISBURG   | State PA | Zip Code (Plus 4) 17101 |    |     |      |           |
| Full Name of Contributing Committee<br>DECHERT LLP                  |          |                         | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address 30 NORTH THIRD STREET                               |          |                         | 9  | 30  | 2005 |           |
| City HARRISBURG   | State PA | Zip Code (Plus 4) 17101 |    |     |      |           |
| Full Name of Contributing Committee<br>PENNSYLVANIA RJR NABISCO PAC |          |                         | MO | DAY | YEAR | \$ 150.00 |
| Mailing Address 486 THOMAS JONES WAY SUITE 200                      |          |                         | 4  | 15  | 2005 |           |
| City EXTON  | State PA | Zip Code (Plus 4) 19341 |    |     |      |           |
| Full Name of Contributing Committee<br>VALUE DRUG PAC               |          |                         | MO | DAY | YEAR | \$ 150.00 |
| Mailing Address PO BOX 2448   |          |                         | 4  | 15  | 2005 |           |
| City ALTOONA  | State PA | Zip Code (Plus 4) 16603 |    |     |      |           |
| Full Name of Contributing Committee<br>PA MEDICAL PAC               |          |                         | MO | DAY | YEAR | \$ 150.00 |
| Mailing Address PO BOX 8820   |          |                         | 4  | 15  | 2005 |           |
| City HARRISBURG   | State PA | Zip Code (Plus 4) 17105 |    |     |      |           |

| Full Name of Contributing Committee |       |                   |  | MO | DAY | YEAR | \$ 250.00 |
|-------------------------------------|-------|-------------------|--|----|-----|------|-----------|
| PA CABLE PAC                        |       |                   |  |    |     |      |           |
| Mailing Address                     |       |                   |  | 1  | 11  | 2005 |           |
| 127 STATE STREET                    |       |                   |  |    |     |      |           |
| City                                | State | Zip Code (Plus 4) |  |    |     |      |           |
| HARRISBURG                          | PA    | 17101             |  |    |     |      |           |

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

|                   |
|-------------------|
| <b>PAGE TOTAL</b> |
| \$ 3,550.00       |

**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)**

|   |  |
|---|--|
| <b>Name of Filing Committee or Candidate</b><br>QUIGLEY, TOM COM TO ELECT | <b>Reporting Period</b><br><b>From:</b> <b>To:</b> <u>12/31/2005</u> |
|---|--|

|             |               |
|-------------|---------------|
| <b>DATE</b> | <b>AMOUNT</b> |
|-------------|---------------|

|  |                    |                                   |  |           |            |             |           |
|--|--------------------|-----------------------------------|--|-----------|------------|-------------|-----------|
| <b>Full Name of Contributor</b><br>SUZANNE M. SUZENSKI |                    |                                   |  | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 150.00 |
| <b>Mailing Address</b> 2193 ST. PETERS ROAD            |                    |                                   |  | 4         | 15         | 2005        |           |
| <b>City</b> POTTSTOWN                                  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19465 |  |           |            |             |           |

|                          |  |       |  |                   |     |      |    |        |
|--------------------------|--|-------|--|-------------------|-----|------|----|--------|
| Full Name of Contributor |  |       |  | MO                | DAY | YEAR | \$ | 100.00 |
| EDWARD A. SKYPALA        |  |       |  |                   |     |      |    |        |
| Mailing Address          |  |       |  | 9                 | 9   | 2005 |    |        |
| 224 KING ST.             |  |       |  |                   |     |      |    |        |
| City                     |  | State |  | Zip Code (Plus 4) |     |      |    |        |
| POTTSTOWN                |  | PA    |  | 19464             |     |      |    |        |

|                             |  |              |                   |       |     |      |           |
|-----------------------------|--|--------------|-------------------|-------|-----|------|-----------|
| Full Name of Contributor    |  |              |                   | MO    | DAY | YEAR | \$ 200.00 |
| ROBERT L. & DIANE L. BRANDT |  |              |                   |       |     |      |           |
| Mailing Address             |  |              |                   | 9     | 9   | 2005 |           |
| PO BOX 26865                |  | State        | Zip Code (Plus 4) |       |     |      |           |
| City                        |  | COLLEGEVILLE | PA                | 19426 |     |      |           |

|                          |  |      |          |    |     |      |       |        |
|--------------------------|--|------|----------|----|-----|------|-------|--------|
| Full Name of Contributor |  |      |          | MO | DAY | YEAR | \$    | 150.00 |
| ROBERT J. KERNS          |  |      |          |    |     |      |       |        |
| Mailing Address          |  |      |          | 9  | 9   | 2005 |       |        |
| 425 W. MAIN ST.          |  | City | LANSDALE |    |     |      | State | PA     |

|                               |  |      |            |    |     |      |       |        |
|-------------------------------|--|------|------------|----|-----|------|-------|--------|
| Full Name of Contributor      |  |      |            | MO | DAY | YEAR | \$    | 150.00 |
| CHARLES P. AND ADELE L. LEBOW |  |      |            |    |     |      |       |        |
| Mailing Address               |  |      |            | 9  | 9   | 2005 |       |        |
| 620 PINE ST.                  |  | City | ROYERSFORD |    |     |      | State | PA     |



|  |          |                         |    |     |      |           |
|--|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor<br>JOSEPH ST. PEDRO |          |                         | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address 103 HEFFNER ROAD             |          |                         | 9  | 9   | 2005 |           |
| City LIMERICK                                | State PA | Zip Code (Plus 4) 19468 |    |     |      |           |

|   |          |                         |    |     |      |           |
|---|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor<br>WILLIAM G. & SUZANNE C. FERRIER |          |                         | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address 116 HEFFNER RD.                             |          |                         | 9  | 9   | 2005 |           |
| City LIMERICK   | State PA | Zip Code (Plus 4) 19468 |    |     |      |           |

|  |          |                         |    |     |      |           |
|--|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor<br>MATTHEW I. HAMMOND |          |                         | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address 2500 E. HIGH ST., SUITE 650    |          |                         | 9  | 9   | 2005 |           |
| City POTTSTOWN                                 | State PA | Zip Code (Plus 4) 19464 |    |     |      |           |

|  |          |                         |    |     |      |           |
|--|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor<br>R. JAMES OEHLERT |          |                         | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address 268 STEINMETZ ROAD           |          |                         | 9  | 9   | 2005 |           |
| City SCHWENKSVILLE                           | State PA | Zip Code (Plus 4) 19473 |    |     |      |           |

|  |          |                         |    |     |      |           |
|--|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor<br>DAVID F. KANE        |          |                         | MO | DAY | YEAR | \$ 150.00 |
| Mailing Address 130 W. MAIN ST. PMB 413 STE. 144 |          |                         | 9  | 9   | 2005 |           |
| City TRAPPE                                      | State PA | Zip Code (Plus 4) 19426 |    |     |      |           |

|   |          |                         |    |     |      |           |
|---|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor<br>DAVID A & RENEE CHESLER |          |                         | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address 80 LONG MEADOW ROAD                 |          |                         | 9  | 9   | 2005 |           |
| City ROYERSFORD                                     | State PA | Zip Code (Plus 4) 19468 |    |     |      |           |

|  |          |                         |    |     |      |           |
|--|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor<br>JASON GRIGGS |          |                         | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address PO BOX 587               |          |                         | 9  | 9   | 2005 |           |
| City ROYERSFORD                          | State PA | Zip Code (Plus 4) 19468 |    |     |      |           |

|   |          |                         |    |     |      |           |
|---|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor<br>JACOB E. DAILEY |          |                         | MO | DAY | YEAR | \$ 150.00 |
| Mailing Address BOX 589                     |          |                         | 9  | 9   | 2005 |           |
| City HARRISBURG                             | State PA | Zip Code (Plus 4) 17108 |    |     |      |           |

|  |          |                         |    |     |      |           |
|--|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor<br>PATRICIA H. LEPETY |          |                         | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address 53 WALKER RD.                  |          |                         | 9  | 9   | 2005 |           |
| City LIMERICK                                  | State PA | Zip Code (Plus 4) 19468 |    |     |      |           |

|   |          |                         |    |     |      |           |
|---|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor<br>ELMER W. HEINEL |          |                         | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address 1588 MORGAN LANE            |          |                         | 9  | 9   | 2005 |           |
| City WAYNE                                  | State PA | Zip Code (Plus 4) 19087 |    |     |      |           |

|   |          |                         |    |     |      |           |
|---|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor<br>SCOTT D. & S. MARIA PARIS |          |                         | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address 17 TWIGLIGHT LANE                     |          |                         | 9  | 9   | 2005 |           |
| City COLLEGEVILLE                                     | State PA | Zip Code (Plus 4) 19426 |    |     |      |           |

|   |          |                         |    |     |      |           |
|---|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor<br>JOSEPH M. LINDA PETROWSKI |          |                         | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address 3461 PRUSSHILL RD.                    |          |                         | 9  | 9   | 2005 |           |
| City POTTSTOWN  | State PA | Zip Code (Plus 4) 19464 |    |     |      |           |

|   |          |                         |    |     |      |           |
|---|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor<br>JOSEPH M. LINDA PETROWSKI |          |                         | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address 3461 PRUSSHILL RD.                    |          |                         | 9  | 30  | 2005 |           |
| City POTTSTOWN  | State PA | Zip Code (Plus 4) 19464 |    |     |      |           |

|   |          |                         |    |     |      |           |
|---|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor<br>ROBERT S. & BENITA M. GRILL |          |                         | MO | DAY | YEAR | \$ 150.00 |
| Mailing Address 20 SARA LANE                            |          |                         | 9  | 30  | 2005 |           |
| City LIMERICK   | State PA | Zip Code (Plus 4) 19468 |    |     |      |           |

|  |          |                         |    |     |      |           |
|--|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor<br>BARBARA J. & RICHARD W. CZOP |          |                         | MO | DAY | YEAR | \$ 150.00 |
| Mailing Address 724 BLACK ROCK ROAD                      |          |                         | 9  | 30  | 2005 |           |
| City COLLEGEVILLE  | State PA | Zip Code (Plus 4) 19426 |    |     |      |           |

|   |          |                         |    |     |      |           |
|---|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor<br>RICHARD D. & MEGAN M. LEWIS |          |                         | MO | DAY | YEAR | \$ 200.00 |
| Mailing Address 1176 MARCUS DRIVE                       |          |                         | 9  | 30  | 2005 |           |
| City POTTSTOWN  | State PA | Zip Code (Plus 4) 19465 |    |     |      |           |

|  |          |                         |    |     |      |           |
|--|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor<br>THOMAS & DIANE DIBELLO |          |                         | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address 33 FIELDSTONE LANE                 |          |                         | 9  | 30  | 2005 |           |
| City ROYERSFORD                                    | State PA | Zip Code (Plus 4) 19468 |    |     |      |           |

|  |          |                         |    |     |      |           |
|--|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor<br>DON R. MADISON |          |                         | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address 316 GUMBES RD.             |          |                         | 9  | 30  | 2005 |           |
| City COLLEGEVILLE                          | State PA | Zip Code (Plus 4) 19426 |    |     |      |           |

|   |          |                            |  |    |     |      |           |
|---|----------|----------------------------|--|----|-----|------|-----------|
| Full Name of Contributor<br>JOHN S. KATHLEEN M. GRISPON |          |                            |  | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address 325 N. 7TH AVE.                         |          |                            |  | 9  | 30  | 2005 |           |
| City ROYERSFORD   | State PA | Zip Code (Plus 4)<br>19468 |  |    |     |      |           |

|   |          |                            |  |    |     |      |           |
|---|----------|----------------------------|--|----|-----|------|-----------|
| Full Name of Contributor<br>ANTHONY DOUGHERTY |          |                            |  | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address 727 QUEEN ST.                 |          |                            |  | 9  | 30  | 2005 |           |
| City COLLEGEVILLE                             | State PA | Zip Code (Plus 4)<br>19426 |  |    |     |      |           |

|   |          |                            |  |    |     |      |           |
|---|----------|----------------------------|--|----|-----|------|-----------|
| Full Name of Contributor<br>MICHAEL BRENNAN |          |                            |  | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address 5 MALSBY ROAD               |          |                            |  | 9  | 30  | 2005 |           |
| City ROYERSFORD                             | State PA | Zip Code (Plus 4)<br>19468 |  |    |     |      |           |

|  |          |                            |  |    |     |      |           |
|--|----------|----------------------------|--|----|-----|------|-----------|
| Full Name of Contributor<br>MEGHAN A. & MICHAEL CAGLIOLA |          |                            |  | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address 644 CROSSHILL RD.                        |          |                            |  | 9  | 30  | 2005 |           |
| City ROYERSFORD  | State PA | Zip Code (Plus 4)<br>19468 |  |    |     |      |           |

|  |          |                            |  |    |     |      |           |
|--|----------|----------------------------|--|----|-----|------|-----------|
| Full Name of Contributor<br>THOMAS & PATRICIA WEIKEL |          |                            |  | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address 371 WALNUT ST.                       |          |                            |  | 9  | 30  | 2005 |           |
| City ROYERSFORD                                      | State PA | Zip Code (Plus 4)<br>19468 |  |    |     |      |           |

|   |          |                            |  |    |     |      |           |
|---|----------|----------------------------|--|----|-----|------|-----------|
| Full Name of Contributor<br>ROBERT C. CAROL T. ROBINSON |          |                            |  | MO | DAY | YEAR | \$ 150.00 |
| Mailing Address 190 SUNSET RD.                          |          |                            |  | 9  | 30  | 2005 |           |
| City SCHWENKSVILLE                                      | State PA | Zip Code (Plus 4)<br>19473 |  |    |     |      |           |

|   |          |                         |    |     |      |           |
|---|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor<br>ALBERT Y. & DEBRA K. HERR |          |                         | MO | DAY | YEAR | \$ 150.00 |
| Mailing Address 560 NEIFER RD.                        |          |                         | 9  | 30  | 2005 |           |
| City SCHWENKSVILLE                                    | State PA | Zip Code (Plus 4) 19473 |    |     |      |           |

|  |          |                         |    |     |      |           |
|--|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor<br>PAUL R. & MARY E. CHRISMAN |          |                         | MO | DAY | YEAR | \$ 150.00 |
| Mailing Address 750 MAIN ST.                           |          |                         | 9  | 30  | 2005 |           |
| City ROYERSFORD  | State PA | Zip Code (Plus 4) 19468 |    |     |      |           |

|  |          |                         |    |     |      |           |
|--|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor<br>D. ELAINE & JEREMIAH DEWAN |          |                         | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address 110 PRESIDENTIAL DRIVE                 |          |                         | 9  | 30  | 2005 |           |
| City LIMERICK  | State PA | Zip Code (Plus 4) 19468 |    |     |      |           |

|  |          |                         |    |     |      |           |
|--|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor<br>DAVID L. & BARBRA J. URNER |          |                         | MO | DAY | YEAR | \$ 150.00 |
| Mailing Address 826 CHURCH ST.                         |          |                         | 9  | 30  | 2005 |           |
| City ROYERSFORD  | State PA | Zip Code (Plus 4) 19468 |    |     |      |           |

|   |          |                         |    |     |      |           |
|---|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor<br>CATHY CALHOUN |          |                         | MO | DAY | YEAR | \$ 150.00 |
| Mailing Address 55 N. MAIN ST.            |          |                         | 9  | 30  | 2005 |           |
| City SPRING MOUNT                         | State PA | Zip Code (Plus 4) 19475 |    |     |      |           |

|   |          |                         |    |     |      |           |
|---|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor<br>RUTH D. HOFFMAN |          |                         | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address 458 SWAMP PIKE              |          |                         | 9  | 30  | 2005 |           |
| City SCHWENKSVILLE                          | State PA | Zip Code (Plus 4) 19473 |    |     |      |           |

|   |                    |                                   |           |            |             |          |
|---|--------------------|-----------------------------------|-----------|------------|-------------|----------|
| <b>Full Name of Contributor</b><br>MELANIE & ERIC BLAKEMORE |                    |                                   | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 75.00 |
| <b>Mailing Address</b> 15 PINETOWN RD.                      |                    |                                   | 10        | 21         | 2005        |          |
| <b>City</b> AUDUBON   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19403 |           |            |             |          |

  

|  |                    |                                   |           |            |             |           |
|--|--------------------|-----------------------------------|-----------|------------|-------------|-----------|
| <b>Full Name of Contributor</b><br>JOSEPH I. PRICE |                    |                                   | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 100.00 |
| <b>Mailing Address</b> 721 DRESHER RD.             |                    |                                   | 10        | 21         | 2005        |           |
| <b>City</b> HORSHAM                                | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19044 |           |            |             |           |

  

|  |                    |                                   |           |            |             |           |
|--|--------------------|-----------------------------------|-----------|------------|-------------|-----------|
| <b>Full Name of Contributor</b><br>MARSHALL GRANOR |                    |                                   | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 100.00 |
| <b>Mailing Address</b> 721 DRESHER RD.             |                    |                                   | 10        | 21         | 2005        |           |
| <b>City</b> HORSHAM                                | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19044 |           |            |             |           |

  

|   |                    |                                   |           |            |             |           |
|---|--------------------|-----------------------------------|-----------|------------|-------------|-----------|
| <b>Full Name of Contributor</b><br>DONNA WILLIAMS |                    |                                   | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 100.00 |
| <b>Mailing Address</b> 212 GRATERSFORD RD.        |                    |                                   | 9         | 30         | 2005        |           |
| <b>City</b> SCHWENKSVILLE                         | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19473 |           |            |             |           |

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

**PAGE TOTAL**

\$ 4,675.00

## 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.**

|  |   |
|--|---|
| <b>Name of Filing Committee or Candidate</b> | <b>Reporting Period</b>                   |
| QUIGLEY, TOM COM TO ELECT                    | <b>From:</b> <b>To:</b> <u>12/31/2005</u> |

|  |          |                         |  | DATE |     | AMOUNT |             |
|--|----------|-------------------------|--|------|-----|--------|-------------|
| Full Name of Contributing Committee<br>EXELON PAC                      |          |                         |  | MO   | DAY | YEAR   | \$ 300.00   |
| Mailing Address PO BOX 805379  |          |                         |  | 4    | 14  | 2005   |             |
| City CHICAGO   | State IL | Zip Code (Plus 4) 60680 |  |      |     |        |             |
| Full Name of Contributing Committee<br>PENNSYLVANIA OPTOMETRIC PAC     |          |                         |  | MO   | DAY | YEAR   | \$ 300.00   |
| Mailing Address PO BOX 3406  |          |                         |  | 4    | 14  | 2005   |             |
| City HARRISBURG  | State PA | Zip Code (Plus 4) 17089 |  |      |     |        |             |
| Full Name of Contributing Committee<br>PECO PAC                        |          |                         |  | MO   | DAY | YEAR   | \$ 300.00   |
| Mailing Address 2301 MARKET ST, S-15-1                                 |          |                         |  | 5    | 31  | 2005   |             |
| City PHILADELPHIA  | State PA | Zip Code (Plus 4) 10989 |  |      |     |        |             |
| Full Name of Contributing Committee<br>STRADLEY RONON STEVENS & YOUNG  |          |                         |  | MO   | DAY | YEAR   | \$ 500.00   |
| Mailing Address GREAT VALLEY CORPORATE CENTER 30 VALLEY STREAM PARKWAY |          |                         |  | 12   | 30  | 2005   |             |
| City MALVERN   | State PA | Zip Code (Plus 4) 19355 |  |      |     |        |             |
| Full Name of Contributing Committee<br>PSC H2O PAC                     |          |                         |  | MO   | DAY | YEAR   | \$ 1,000.00 |
| Mailing Address 762 W. LANCASTER AVENUE                                |          |                         |  | 12   | 30  | 2005   |             |
| City BRYN MAWR   | State PA | Zip Code (Plus 4) 19010 |  |      |     |        |             |

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

**PAGE TOTAL**

\$ 2,400.00



**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.)**

|   |  |
|---|--|
| <b>Name of Filing Committee or Candidate</b><br><br>QUIGLEY, TOM COM TO ELECT | <b>Reporting Period</b><br><br><b>From:</b> <b>To:</b> <u>12/31/2005</u> |
|---|--|

|   |  |  |  | DATE                        |     |                 | AMOUNT                         |
|---|--|--|--|-----------------------------|-----|-----------------|--------------------------------|
| Full Name of Contributor  |  |  |  | MO                          | DAY | YEAR            |                                |
| NORMA LEE & DR. GERALD E. DWORKIN   |  |  |  |                             |     |                 |                                |
| <b>Mailing Address</b> 821 LAFAYETTE RD.<br><div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 30%;"> <b>City</b> BRYN MAWR         </div> <div style="width: 15%;"> <b>State</b> PA         </div> <div style="width: 35%;"> <b>Zip Code (Plus 4)</b> 19010         </div> </div> |  |  |  | 9                           | 30  | 2005            | \$ 500.00                      |
| <b>Employer Name</b> SELF-EMPLOYED  |  |  |  | <b>Occupation</b> PHYSICIAN |     |                 |                                |
| <b>Employer Mailing Address/Principal Place of Business</b><br>821 LAFAYETTE RD.  |  |  |  | <b>City</b> BRYN MAWR       |     | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 19010 |

| Full Name of Contributor   |  |  |  | MO                                 | DAY | YEAR            |                                |
|--|--|--|--|------------------------------------|-----|-----------------|--------------------------------|
| LARRY P. WENSEL  |  |  |  |                                    |     |                 |                                |
| <b>Mailing Address</b> 50 WENSEL CIRCLE<br><div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 30%;"> <b>City</b> SCHWENKSVILLE         </div> <div style="width: 15%;"> <b>State</b> PA         </div> <div style="width: 35%;"> <b>Zip Code (Plus 4)</b> 19473         </div> </div> |  |  |  | 9                                  | 30  | 2005            | \$ 1,000.00                    |
| <b>Employer Name</b> SELF-EMPLOYED   |  |  |  | <b>Occupation</b> LAND DEVELOPMENT |     |                 |                                |
| <b>Employer Mailing Address/Principal Place of Business</b><br>50 WENSEL CIRCLE  |  |  |  | <b>City</b> SCHWENKSVILLE          |     | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 19473 |

| Full Name of Contributor  |  |  |  | MO                | DAY | YEAR         |                          |
|---|--|--|--|-------------------|-----|--------------|--------------------------|
| SANDERS M. ORR  |  |  |  |                   |     |              |                          |
| <b>Mailing Address</b> 1050 IVY LANE<br><div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div style="width: 30%;"> <b>City</b> POTTSTOWN         </div> <div style="width: 15%;"> <b>State</b> PA         </div> <div style="width: 35%;"> <b>Zip Code (Plus 4)</b> 19464         </div> </div> |  |  |  | 7                 | 18  | 2005         | \$ 400.00                |
| <b>Employer Name</b> RETIRED  |  |  |  | <b>Occupation</b> |     |              |                          |
| <b>Employer Mailing Address/Principal Place of Business</b>   |  |  |  | <b>City</b>       |     | <b>State</b> | <b>Zip Code (Plus 4)</b> |

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

| PAGE TOTAL |          |
|------------|----------|
| \$         | 1,900.00 |

## 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><br><br>QUIGLEY, TOM COM TO ELECT | <b>Reporting Period</b><br><br><b>From:</b> <span style="float: right;"><b>To:</b> <u>12/31/2005</u></span> |
|---|---|

|  |                    |                                   |  | DATE      | AMOUNT     |             |             |
|--|--------------------|-----------------------------------|--|-----------|------------|-------------|-------------|
| <b>Full Name</b><br>MENTZER MEDIA SERVICES               |                    |                                   |  | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 5,298.81 |
| <b>Mailing Address</b> 600 FAIRMONT AVE., SUITE 306      |                    |                                   |  | 6         | 7          | 2005        |             |
| <b>City</b> TOWSON                                       | <b>State</b><br>MD | <b>Zip Code (Plus 4)</b><br>21286 |  |           |            |             |             |
| <b>Receipt Description</b> REFUND FOR MEDIA EXPENDITURES |                    |                                   |  |           |            |             |             |

|  |                    |                                   |  |           |            |             |           |
|--|--------------------|-----------------------------------|--|-----------|------------|-------------|-----------|
| <b>Full Name</b><br>PINCUS MOWDAY MANAGEMENT COMMUNICATIONS  |                    |                                   |  | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 243.00 |
| <b>Mailing Address</b> 586 FRANKLIN WAY                      |                    |                                   |  | 7         | 15         | 2005        |           |
| <b>City</b> WEST CHESTER                                     | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19380 |  |           |            |             |           |
| <b>Receipt Description</b> REFUND FOR TELEPHONE EXPENDITURES |                    |                                   |  |           |            |             |           |

**Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.**

|                   |
|-------------------|
| <b>PAGE TOTAL</b> |
| \$ 5,541.81       |

## 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> |                              |
| QUIGLEY, TOM COM TO ELECT  |  | <b>From:</b>            | <b>To:</b> <u>12/31/2005</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: 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. |       |                   |      |     | <div>PAGE TOTAL</div> <div>\$ 0.00</div> |         |

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

|   |       |                  |       |                  |     |                             |         |
|---|-------|------------------|-------|------------------|-----|-----------------------------|---------|
| Name of Filing Committee or Candidate   |       |                  |       | Reporting Period |     |                             |         |
|   |       |                  |       | From:            |     | To:                         |         |
| <div> <div>DATE</div> <div>AMOUNT</div> </div>  |       |                  |       |                  |     |                             |         |
| 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<br>0.00          |         |

# SCHEDULE III STATEMENT OF EXPENDITURES

|  |   |
|--|---|
| <b>Name of Filing Committee or Candidate</b> | <b>Reporting Period</b>                         |
| QUIGLEY, TOM COM TO ELECT                    | From                      To: <u>12/31/2005</u> |

| DATE                         |          |                         |                            | AMOUNT |      |             |
|------------------------------|----------|-------------------------|----------------------------|--------|------|-------------|
| To Whom Paid<br>HRCC         |          |                         | MO                         | DAY    | YEAR | \$ 1,500.00 |
| Mailing Address PO BOX 11787 |          |                         |                            |        |      |             |
| City HARRISBURG              | State PA | Zip Code (Plus 4) 17108 | Description of Expenditure |        |      |             |
| To Whom Paid<br>HRCC         |          |                         | MO                         | DAY    | YEAR | \$ 95.09    |
| Mailing Address PO BOX 11787 |          |                         |                            |        |      |             |
| City HARRISBURG              | State PA | Zip Code (Plus 4) 17108 | Description of Expenditure |        |      |             |
| To Whom Paid<br>HRCC         |          |                         | MO                         | DAY    | YEAR | \$ 387.50   |
| Mailing Address PO BOX 11787 |          |                         |                            |        |      |             |
| City HARRISBURG              | State PA | Zip Code (Plus 4) 17108 | Description of Expenditure |        |      |             |
| To Whom Paid<br>HRCC         |          |                         | MO                         | DAY    | YEAR | \$ 450.00   |
| Mailing Address PO BOX 11787 |          |                         |                            |        |      |             |
| City HARRISBURG              | State PA | Zip Code (Plus 4) 17108 | Description of Expenditure |        |      |             |
| To Whom Paid<br>HRCC         |          |                         | MO                         | DAY    | YEAR | \$ 5,298.81 |
| Mailing Address PO BOX 11787 |          |                         |                            |        |      |             |
| City HARRISBURG              | State PA | Zip Code (Plus 4) 17108 | Description of Expenditure |        |      |             |

|  |                    |                                   |                                   |            |             |           |
|--|--------------------|-----------------------------------|-----------------------------------|------------|-------------|-----------|
| <b>To Whom Paid</b><br>MCRC                        |                    |                                   | <b>MO</b>                         | <b>DAY</b> | <b>YEAR</b> | \$ 250.00 |
| <b>Mailing Address</b> 115 W. GERMANTOWN SUITE 106 |                    |                                   |                                   |            |             |           |
| <b>City</b> NORRISTOWN                             | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19401 | <b>Description of Expenditure</b> |            |             |           |

  

|  |                    |                                   |                                   |            |             |           |
|--|--------------------|-----------------------------------|-----------------------------------|------------|-------------|-----------|
| <b>To Whom Paid</b><br>MCRC                        |                    |                                   | <b>MO</b>                         | <b>DAY</b> | <b>YEAR</b> | \$ 425.00 |
| <b>Mailing Address</b> 115 W. GERMANTOWN SUITE 106 |                    |                                   |                                   |            |             |           |
| <b>City</b> NORRISTOWN                             | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19401 | <b>Description of Expenditure</b> |            |             |           |

  

|  |                    |                                   |                                   |            |             |           |
|--|--------------------|-----------------------------------|-----------------------------------|------------|-------------|-----------|
| <b>To Whom Paid</b><br>FRIENDS OF MONTGOMERY COUNTRY |                    |                                   | <b>MO</b>                         | <b>DAY</b> | <b>YEAR</b> | \$ 250.00 |
| <b>Mailing Address</b> 1290 WILSON STREET            |                    |                                   |                                   |            |             |           |
| <b>City</b> POTTSTOWN                                | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19464 | <b>Description of Expenditure</b> |            |             |           |

  

|   |                    |                                   |                                   |            |             |           |
|---|--------------------|-----------------------------------|-----------------------------------|------------|-------------|-----------|
| <b>To Whom Paid</b><br>WORD-TECH, INC.        |                    |                                   | <b>MO</b>                         | <b>DAY</b> | <b>YEAR</b> | \$ 652.00 |
| <b>Mailing Address</b> 395 CIRCLE OF PROGRESS |                    |                                   |                                   |            |             |           |
| <b>City</b> POTTSTOWN                         | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19464 | <b>Description of Expenditure</b> |            |             |           |

  

|  |                    |                                   |                                   |            |             |             |
|--|--------------------|-----------------------------------|-----------------------------------|------------|-------------|-------------|
| <b>To Whom Paid</b><br>LAKESIDE INN      |                    |                                   | <b>MO</b>                         | <b>DAY</b> | <b>YEAR</b> | \$ 2,950.00 |
| <b>Mailing Address</b> 594 W. RIDGE PIKE |                    |                                   |                                   |            |             |             |
| <b>City</b> LIMERICK                     | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19468 | <b>Description of Expenditure</b> |            |             |             |

  

|                                     |                    |                                   |                                   |            |             |           |
|-------------------------------------|--------------------|-----------------------------------|-----------------------------------|------------|-------------|-----------|
| <b>To Whom Paid</b><br>TOM QUIGLEY  |                    |                                   | <b>MO</b>                         | <b>DAY</b> | <b>YEAR</b> | \$ 444.00 |
| <b>Mailing Address</b> 560 PINE ST. |                    |                                   |                                   |            |             |           |
| <b>City</b> ROYERSFORD              | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19468 | <b>Description of Expenditure</b> |            |             |           |

  

|  |  |  |  |  |  |                   |
|--|--|--|--|--|--|-------------------|
| <b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b> |  |  |  |  |  | <b>PAGE TOTAL</b> |
|  |  |  |  |  |  | \$ 12,702.40      |



# 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**

|   |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|
| <b>Name of Filing Committee or Candidate</b><br>QUIGLEY, TOM COM TO ELECT |  |  |  | <b>Reporting Period</b><br><b>From:</b> <b>To:</b> <u>12/31/2005</u> |  |  |  |
|---|--|--|--|--|--|--|--|

  

|  |                    |  |                                   |  |                                    |  |             |          |
|--|--------------------|--|-----------------------------------|--|------------------------------------|--|-------------|----------|
| <b>DATE</b>                                  |                    |  |                                   |  |                                    | <b>Outstanding<br/>Balance of Debt</b> |             |          |
| <b>Name of Creditor</b><br>THOMAS J. QUIGLEY |                    |  |                                   |  | <b>MO</b>                          | <b>DAY</b>                             | <b>YEAR</b> | \$ 50.00 |
| <b>Mailing Address</b> 560 PINE ST.          |                    |  |                                   |  | 3                                  | 17                                     | 2005        |          |
| <b>City</b> ROYERSFORD                       | <b>State</b><br>PA |  | <b>Zip Code (Plus 4)</b><br>19468 |  | <b>Description of Debt</b><br>LOAN |  |             |          |

  

|  |                    |  |                                   |  |                                    |  |             |             |
|--|--------------------|--|-----------------------------------|--|------------------------------------|--|-------------|-------------|
| <b>DATE</b>                                  |                    |  |                                   |  |                                    | <b>Outstanding<br/>Balance of Debt</b> |             |             |
| <b>Name of Creditor</b><br>THOMAS J. QUIGLEY |                    |  |                                   |  | <b>MO</b>                          | <b>DAY</b>                             | <b>YEAR</b> | \$ 2,000.00 |
| <b>Mailing Address</b> 560 PINE ST.          |                    |  |                                   |  | 3                                  | 19                                     | 2004        |             |
| <b>City</b> ROYERSFORD                       | <b>State</b><br>PA |  | <b>Zip Code (Plus 4)</b><br>19468 |  | <b>Description of Debt</b><br>LOAN |  |             |             |

  

|  |                    |  |                                   |  |                                    |  |             |             |
|--|--------------------|--|-----------------------------------|--|------------------------------------|--|-------------|-------------|
| <b>DATE</b>                                  |                    |  |                                   |  |                                    | <b>Outstanding<br/>Balance of Debt</b> |             |             |
| <b>Name of Creditor</b><br>THOMAS J. QUIGLEY |                    |  |                                   |  | <b>MO</b>                          | <b>DAY</b>                             | <b>YEAR</b> | \$ 4,000.00 |
| <b>Mailing Address</b> 560 PINE ST.          |                    |  |                                   |  | 4                                  | 23                                     | 2004        |             |
| <b>City</b> ROYERSFORD                       | <b>State</b><br>PA |  | <b>Zip Code (Plus 4)</b><br>19468 |  | <b>Description of Debt</b><br>LOAN |  |             |             |

  

|  |                    |  |                                   |  |                                    |  |             |             |
|--|--------------------|--|-----------------------------------|--|------------------------------------|--|-------------|-------------|
| <b>DATE</b>                                  |                    |  |                                   |  |                                    | <b>Outstanding<br/>Balance of Debt</b> |             |             |
| <b>Name of Creditor</b><br>THOMAS J. QUIGLEY |                    |  |                                   |  | <b>MO</b>                          | <b>DAY</b>                             | <b>YEAR</b> | \$ 4,200.00 |
| <b>Mailing Address</b> 560 PINE ST.          |                    |  |                                   |  | 5                                  | 20                                     | 2004        |             |
| <b>City</b> ROYERSFORD                       | <b>State</b><br>PA |  | <b>Zip Code (Plus 4)</b><br>19468 |  | <b>Description of Debt</b><br>LOAN |  |             |             |

  

|  |  |  |  |  |  |  |                                   |
|--|--|--|--|--|--|--|-----------------------------------|
| <b>Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.</b> |  |  |  |  |  |  | <b>PAGE TOTAL</b><br>\$ 10,250.00 |
|--|--|--|--|--|--|--|-----------------------------------|

