

# 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> 8400088                                  |                          | <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> VOLUNTEERS FOR ARGALL |                          |                          |                         |                                    |   |  |                        |                              |  |                            |                    |   |      |    |     |     |    |
| <b>Street Address:</b> P.O. BOX 241   |                          |                          |                         |                                    |   |  |                        |                              |  |                            |                    |   |      |    |     |     |    |
| <b>City:</b> TAMAQUA  |                          |                          |                         |                                    | <b>State:</b> PA  |  | <b>Zip Code:</b> 18252 |                              |  |                            |                    |   |      |    |     |     |    |
| <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. X   | AMENDMENT REPORT?      | Yes                          | No <input checked="" type="checkbox"/> |                            |                    |   |      |    |     |     |    |
|   | 6TH TUESDAY PRE-ELECTION | 4.                       | 2ND FRIDAY PRE-ELECTION | 5.                                 | 30 DAY POST-ELECTION  | 6.   | TERMINATION REPORT?    | Yes                          | No <input checked="" type="checkbox"/> |                            |                    |   |      |    |     |     |    |
|   | ANNUAL REPORT            | 7.                       | Year 2025               | <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> |   |      |    |     |     |    |
| SENATOR IN THE GENERAL ASSEMBLY   |                          |                          |                         |                                    | <table border="1"> <tr> <th>MO</th> <th>DAY</th> <th>YEAR</th> </tr> <tr> <td>11</td> <td>4</td> <td>2025</td> </tr> </table> |  |                        | MO                           | DAY                                    | YEAR                       | 11                 | 4 | 2025 | 29 | STS | REP | 54 |
| MO  | DAY                      | YEAR                     |                         |                                    |   |  |                        |                              |  |                            |                    |   |      |    |     |     |    |
| 11  | 4                        | 2025                     |                         |                                    |   |  |                        |                              |  |                            |                    |   |      |    |     |     |    |
|   |                          |                          |                         |                                    |   |  |                        | (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> |                    |   |      |    |     |     |    |
|   |                          | 5                        | 6                       | 2025                               |   |  | 6                      | 9                            | 2025                                   |                            |                    |   |      |    |     |     |    |
| <b>A. Amount Brought Forward From Last Report</b>                             |                          |                          |                         |                                    | \$  |  | 408,815.81             |                              |  |                            |                    |   |      |    |     |     |    |
| <b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>         |                          |                          |                         |                                    | \$  |  | 55,210.00              |                              |  |                            |                    |   |      |    |     |     |    |
| <b>C. Total Funds Available (Sum Of Lines A and B)</b>                        |                          |                          |                         |                                    | \$  |  | 464,025.81             |                              |  |                            |                    |   |      |    |     |     |    |
| <b>D. Total Expenditures (From Schedule III)</b>                              |                          |                          |                         |                                    | \$  |  | 8,309.11               |                              |  |                            |                    |   |      |    |     |     |    |
| <b>E. Ending Cash Balance (Subtract Line D From Line C)</b>                   |                          |                          |                         |                                    | \$  |  | 455,716.70             |                              |  |                            |                    |   |      |    |     |     |    |
| <b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>          |                          |                          |                         |                                    | \$  |  | 0.00                   |                              |  |                            |                    |   |      |    |     |     |    |
| <b>G. Unpaid Debts And Obligations (From Schedule IV)</b>                     |                          |                          |                         |                                    | \$  |  | 0.00                   |                              |  |                            |                    |   |      |    |     |     |    |

## AFFIDAVIT SECTION

### PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

### Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
**Detailed Summary Page**

|  |   |
|--|---|
| <b>Name of Filing Committee or Candidate</b> | <b>Reporting Period</b>                   |
| VOLUNTEERS FOR ARGALL                        | From: <u>5/6/2025</u> To: <u>6/9/2025</u> |

|  |           |
|--|-----------|
| <b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b> |           |
| <b>TOTAL for the Reporting Period (1)</b>                                      | \$ 560.00 |

|  |             |
|--|-------------|
| <b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b> |             |
| <b>Contributions Received From Political Committees (Part A)</b>                 | \$ 0.00     |
| <b>All Other Contributions (Part B)</b>  | \$ 2,850.00 |
| <b>TOTAL for the Reporting Period (2)</b>  | \$ 2,850.00 |

|   |              |
|---|--------------|
| <b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b> |              |
| <b>Contributions Received From Political Committees (Part C)</b>        | \$ 19,000.00 |
| <b>All Other Contributions (Part D)</b>                                 | \$ 32,800.00 |
| <b>TOTAL for the Reporting Period (3)</b>                               | \$ 51,800.00 |

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

|   |              |
|---|--------------|
| <b>Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)</b> | \$ 55,210.00 |
|---|--------------|



# 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>VOLUNTEERS FOR ARGALL |                    |                                   |  | <b>Reporting Period</b><br>From: <u>5/6/2025</u> To: <u>6/9/2025</u> |            |               |           |
|   |                    |                                   |  | <b>DATE</b>  |            | <b>AMOUNT</b> |           |
| <b>Full Name of Contributor</b><br>BARBARA KOCH HILL                  |                    |                                   |  | <b>MO</b>  | <b>DAY</b> | <b>YEAR</b>   | \$ 100.00 |
| <b>Mailing Address</b> 15 KETTLE ROAD                                 |                    |                                   |  | 5  | 31         | 2025          |           |
| <b>City</b> TAMAQUA   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18252 |  |  |            |               |           |
| <b>Full Name of Contributor</b><br>MARTHA M HARTMAN                   |                    |                                   |  | <b>MO</b>  | <b>DAY</b> | <b>YEAR</b>   | \$ 100.00 |
| <b>Mailing Address</b> 8800 WALTHER BLVD APT 4117                     |                    |                                   |  | 6  | 1          | 2025          |           |
| <b>City</b> PARKVILLE   | <b>State</b><br>MD | <b>Zip Code (Plus 4)</b><br>21234 |  |  |            |               |           |
| <b>Full Name of Contributor</b><br>MICHAEL GAIZICK                    |                    |                                   |  | <b>MO</b>  | <b>DAY</b> | <b>YEAR</b>   | \$ 200.00 |
| <b>Mailing Address</b> PO BOX 60                                      |                    |                                   |  | 5  | 31         | 2025          |           |
| <b>City</b> SHEPPTON  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18248 |  |  |            |               |           |
| <b>Full Name of Contributor</b><br>MICHAEL FROMM                      |                    |                                   |  | <b>MO</b>  | <b>DAY</b> | <b>YEAR</b>   | \$ 250.00 |
| <b>Mailing Address</b> 2101 CENTRE AVE                                |                    |                                   |  | 6  | 4          | 2025          |           |
| <b>City</b> READING   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19605 |  |  |            |               |           |
| <b>Full Name of Contributor</b><br>PAUL FOGAL                         |                    |                                   |  | <b>MO</b>  | <b>DAY</b> | <b>YEAR</b>   | \$ 100.00 |
| <b>Mailing Address</b> 237 BEAR CREEK LAKE DRIVE                      |                    |                                   |  | 6  | 3          | 2025          |           |
| <b>City</b> JIM THORPE  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18229 |  |  |            |               |           |
| <b>Full Name of Contributor</b><br>JASON BRENNER                      |                    |                                   |  | <b>MO</b>  | <b>DAY</b> | <b>YEAR</b>   | \$ 100.00 |
| <b>Mailing Address</b> 1186 ROCK GLEN ROAD                            |                    |                                   |  | 5  | 31         | 2025          |           |
| <b>City</b> SUGAR LOAF  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18249 |  |  |            |               |           |

|  |          |                         |    |     |      |           |
|--|----------|-------------------------|----|-----|------|-----------|
| Full Name of Contributor<br>JAMES VOZAR        |          |                         | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address 1265 MILLER ROAD               |          |                         | 6  | 2   | 2025 |           |
| City WIND GAP                                  | State PA | Zip Code (Plus 4) 18091 |    |     |      |           |
| Full Name of Contributor<br>JAMES THOMAS       |          |                         | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address 10 NORTHGATE ST                |          |                         | 5  | 27  | 2025 |           |
| City DALLAS                                    | State PA | Zip Code (Plus 4) 18612 |    |     |      |           |
| Full Name of Contributor<br>KEN TEMBORSKI      |          |                         | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address PO BOX 894                     |          |                         | 5  | 27  | 2025 |           |
| City CONYNGHAM                                 | State PA | Zip Code (Plus 4) 18219 |    |     |      |           |
| Full Name of Contributor<br>LOUIS SPORTELLI    |          |                         | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address 125 DELAWARE AVE               |          |                         | 6  | 1   | 2025 |           |
| City PALMBERTON                                | State PA | Zip Code (Plus 4) 18071 |    |     |      |           |
| Full Name of Contributor<br>JO ANNA J. SHOVLIN |          |                         | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address 18 E PLAYERS WAY               |          |                         | 5  | 27  | 2025 |           |
| City HAZLETON                                  | State PA | Zip Code (Plus 4) 18202 |    |     |      |           |
| Full Name of Contributor<br>DONALD REINHARD    |          |                         | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address 75 HARVARD AVE.                |          |                         | 6  | 1   | 2025 |           |
| City PALMERTON                                 | State PA | Zip Code (Plus 4) 18071 |    |     |      |           |
| Full Name of Contributor<br>WALLACE PUTKOWSKI  |          |                         | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address 544 SENECA ROAD                |          |                         | 6  | 3   | 2025 |           |
| City LEHIGHTON                                 | State PA | Zip Code (Plus 4) 18235 |    |     |      |           |
| Full Name of Contributor<br>JOHN MCGEE         |          |                         | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address PO BOX 3298                    |          |                         | 5  | 31  | 2025 |           |
| City SCRANTON                                  | State PA | Zip Code (Plus 4) 18505 |    |     |      |           |
| Full Name of Contributor<br>KEITH MCCALL       |          |                         | MO | DAY | YEAR | \$ 250.00 |
| Mailing Address 800 E WHITE BEAR DR            |          |                         | 6  | 4   | 2025 |           |
| City SUMMIT HILL                               | State PA | Zip Code (Plus 4) 18250 |    |     |      |           |

| Full Name of Contributor |             |       |                   | MO | DAY | YEAR | \$ 250.00 |
|--------------------------|-------------|-------|-------------------|----|-----|------|-----------|
| NICK IGDALSKY            |             |       |                   |    |     |      |           |
| Mailing Address          |             |       |                   | 6  | 5   | 2025 |           |
| 123 SKY HIGH DRIVE       |             |       |                   |    |     |      |           |
| City                     | STROUDSBURG | State | Zip Code (Plus 4) |    |     |      |           |
|                          |             | PA    | 18360             |    |     |      |           |

| Full Name of Contributor   |                |       |                   | MO | DAY | YEAR | \$ 250.00 |
|----------------------------|----------------|-------|-------------------|----|-----|------|-----------|
| GEORGE HUTTER              |                |       |                   |    |     |      |           |
| Mailing Address PO BOX 172 |                |       |                   | 6  | 4   | 2025 |           |
| City                       | BEAR CREEK TWP | State | Zip Code (Plus 4) |    |     |      |           |
|                            |                | PA    | 18602             |    |     |      |           |

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

|                   |
|-------------------|
| <b>PAGE TOTAL</b> |
| \$ 2,850.00       |

# 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><br><br>VOLUNTEERS FOR ARGALL | <b>Reporting Period</b><br><br><b>From:</b> <u>5/6/2025</u> <b>To:</b> <u>6/9/2025</u> |
|---|--|

|   |          |                         |  | DATE | AMOUNT |      |             |
|---|----------|-------------------------|--|------|--------|------|-------------|
| Full Name of Contributing Committee<br>BETTER PENNSYLVANIA PAC                      |          |                         |  | MO   | DAY    | YEAR | \$ 1,500.00 |
| Mailing Address 121 STATE STREET  |          |                         |  | 6    | 4      | 2025 |             |
| City HARRISBURG   | State PA | Zip Code (Plus 4) 17101 |  |      |        |      |             |
| Full Name of Contributing Committee<br>CIVIL SOLUTIONS PAC                          |          |                         |  | MO   | DAY    | YEAR | \$ 5,000.00 |
| Mailing Address PO BOX 61411  |          |                         |  | 5    | 24     | 2025 |             |
| City HARRISBURG   | State PA | Zip Code (Plus 4) 17106 |  |      |        |      |             |
| Full Name of Contributing Committee<br>COMMONWEALTH CHILDRENS CHOICE FUND           |          |                         |  | MO   | DAY    | YEAR | \$ 1,000.00 |
| Mailing Address 420 N THIRD ST  |          |                         |  | 6    | 4      | 2025 |             |
| City HARRISBURG   | State PA | Zip Code (Plus 4) 17101 |  |      |        |      |             |
| Full Name of Contributing Committee<br>ESSENTIAL UTILITIES INC PAC-AQUA AMERICA PAC |          |                         |  | MO   | DAY    | YEAR | \$ 500.00   |
| Mailing Address 762 W LANCASTER AVE   |          |                         |  | 5    | 28     | 2025 |             |
| City BRYN MAWR  | State PA | Zip Code (Plus 4) 19010 |  |      |        |      |             |
| Full Name of Contributing Committee<br>J M ULIANA & ASSOCIATES, LLC                 |          |                         |  | MO   | DAY    | YEAR | \$ 500.00   |
| Mailing Address 2571 BAGLYOS CIRCLE B   |          |                         |  | 6    | 1      | 2025 |             |
| City BETHLEHEM  | State PA | Zip Code (Plus 4) 18020 |  |      |        |      |             |
| Full Name of Contributing Committee<br>MID ATLANTIC LABORERS PAC                    |          |                         |  | MO   | DAY    | YEAR | \$ 1,500.00 |
| Mailing Address 11951 FREEDOM DRIVE SUITE 310                                       |          |                         |  | 5    | 25     | 2025 |             |
| City RESTON   | State VA | Zip Code (Plus 4) 20190 |  |      |        |      |             |

|  |                    |                                   |           |            |             |             |
|--|--------------------|-----------------------------------|-----------|------------|-------------|-------------|
| <b>Full Name of Contributing Committee</b><br>MN8 ENERGY LLC PAC                 |                    |                                   | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 1,000.00 |
| <b>Mailing Address</b> 1155 AVENUE OF THE AMERICAS FLOOR 27                      |                    |                                   | 6         | 6          | 2025        |             |
| <b>City</b> NEW YORK   | <b>State</b><br>NY | <b>Zip Code (Plus 4)</b><br>10036 |           |            |             |             |
| <b>Full Name of Contributing Committee</b><br>PA HORSEBREADERS ASSOC PAC         |                    |                                   | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 1,000.00 |
| <b>Mailing Address</b> 701 E BALTIMORE PIKE SUITE E                              |                    |                                   | 6         | 3          | 2025        |             |
| <b>City</b> KENNETT SQUARE   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19348 |           |            |             |             |
| <b>Full Name of Contributing Committee</b><br>PAFWD PAC                          |                    |                                   | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 1,000.00 |
| <b>Mailing Address</b> 1201A NORTH CHURCH ST                                     |                    |                                   | 6         | 2          | 2025        |             |
| <b>City</b> HAZLETON   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18202 |           |            |             |             |
| <b>Full Name of Contributing Committee</b><br>PPL PEOPLE FOR GOOD GOVERNMENT PAC |                    |                                   | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 2,500.00 |
| <b>Mailing Address</b> 2 NORTH 9TH STREET  |                    |                                   | 6         | 4          | 2025        |             |
| <b>City</b> ALLENTOWN  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18101 |           |            |             |             |
| <b>Full Name of Contributing Committee</b><br>PSCOA                              |                    |                                   | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 2,500.00 |
| <b>Mailing Address</b> 2421 N FRONT ST   |                    |                                   | 5         | 31         | 2025        |             |
| <b>City</b> HARRISBURG   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>17110 |           |            |             |             |
| <b>Full Name of Contributing Committee</b><br>UNITE AMERICA                      |                    |                                   | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 1,000.00 |
| <b>Mailing Address</b> 6000 E EVANS AVE SUITE 1-121                              |                    |                                   | 5         | 25         | 2025        |             |
| <b>City</b> DENVER   | <b>State</b><br>CO | <b>Zip Code (Plus 4)</b><br>80222 |           |            |             |             |

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

|                   |
|-------------------|
| <b>PAGE TOTAL</b> |
| \$ 19,000.00      |



**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>VOLUNTEERS FOR ARGALL | <b>Reporting Period</b><br><br><b>From:</b> <u>5/6/2025</u> <b>To:</b> <u>6/9/2025</u> |
|---|--|

|   |                    |                                   |                  | DATE                             | AMOUNT                   |             |             |
|---|--------------------|-----------------------------------|------------------|----------------------------------|--------------------------|-------------|-------------|
| <b>Full Name of Contributor</b><br>LORI VAN HOEKELEN        |                    |                                   |                  | <b>MO</b>                        | <b>DAY</b>               | <b>YEAR</b> | \$ 500.00   |
| <b>Mailing Address</b> 34 N GRECO DR                        |                    |                                   |                  | 5                                | 23                       | 2025        |             |
| <b>City</b> DRUMS   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18222 |                  |                                  |                          |             |             |
| <b>Employer Name</b> VAN HOEKELEN GREENHOUSE                |                    |                                   |                  | <b>Occupation</b> OWNER          |                          |             |             |
| <b>Employer Mailing Address/Principal Place of Business</b> |                    |                                   | <b>City</b>      | <b>State</b>                     | <b>Zip Code (Plus 4)</b> |             |             |
|   |                    |                                   | MCADOO           | PA                               | 18237                    |             |             |
| <b>Full Name of Contributor</b><br>FRANK SOURBEER           |                    |                                   |                  | <b>MO</b>                        | <b>DAY</b>               | <b>YEAR</b> | \$ 1,000.00 |
| <b>Mailing Address</b> 409 DEVON RD                         |                    |                                   |                  | 5                                | 31                       | 2025        |             |
| <b>City</b> CAMP HILL                                       | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>17011 |                  |                                  |                          |             |             |
| <b>Employer Name</b> WILSBACH DISTRIBUTORS                  |                    |                                   |                  | <b>Occupation</b> PRESIDENT      |                          |             |             |
| <b>Employer Mailing Address/Principal Place of Business</b> |                    |                                   | <b>City</b>      | <b>State</b>                     | <b>Zip Code (Plus 4)</b> |             |             |
| 1977 OBERLIN RD   |                    |                                   | HARRISBURG       | PA                               | 17111                    |             |             |
| <b>Full Name of Contributor</b><br>LAWRENCE SIMON           |                    |                                   |                  | <b>MO</b>                        | <b>DAY</b>               | <b>YEAR</b> | \$ 1,000.00 |
| <b>Mailing Address</b> P.O. BOX 160                         |                    |                                   |                  | 6                                | 4                        | 2025        |             |
| <b>City</b> SHAWNEE ON DEL.                                 | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18356 |                  |                                  |                          |             |             |
| <b>Employer Name</b> LTS BUILDERS                           |                    |                                   |                  | <b>Occupation</b> OWNER          |                          |             |             |
| <b>Employer Mailing Address/Principal Place of Business</b> |                    |                                   | <b>City</b>      | <b>State</b>                     | <b>Zip Code (Plus 4)</b> |             |             |
| 805 SEVEN BRIDGE RD   |                    |                                   | EAST STROUDSBURG | PA                               | 18301                    |             |             |
| <b>Full Name of Contributor</b><br>SEAN SHAMANY             |                    |                                   |                  | <b>MO</b>                        | <b>DAY</b>               | <b>YEAR</b> | \$ 500.00   |
| <b>Mailing Address</b> 17 W PLAYERS WAY                     |                    |                                   |                  | 5                                | 31                       | 2025        |             |
| <b>City</b> HAZLETON  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18202 |                  |                                  |                          |             |             |
| <b>Employer Name</b> NORTHEAST REVENUE SERVICES             |                    |                                   |                  | <b>Occupation</b> OFFICE MANAGER |                          |             |             |
| <b>Employer Mailing Address/Principal Place of Business</b> |                    |                                   | <b>City</b>      | <b>State</b>                     | <b>Zip Code (Plus 4)</b> |             |             |
| 15 PUBLIC SQUARE  |                    |                                   | WILKES-BARRE     | PA                               | 18701                    |             |             |

|   |                    |                                   |                       |                             |                    |             |                                   |
|---|--------------------|-----------------------------------|-----------------------|-----------------------------|--------------------|-------------|-----------------------------------|
| <b>Full Name of Contributor</b><br>PAUL SELLEW  |                    |                                   |                       | <b>MO</b>                   | <b>DAY</b>         | <b>YEAR</b> | <b>\$</b> 1,000.00                |
| <b>Mailing Address</b> 84 SHADY BROOK LANE  |                    |                                   |                       | 5                           | 31                 | 2025        |                                   |
| <b>City</b> CARLISLE  | <b>State</b><br>MA | <b>Zip Code (Plus 4)</b><br>01741 |                       |                             |                    |             |                                   |
| <b>Employer Name</b> LITTLE LEAF FARMS  |                    |                                   |                       | <b>Occupation</b> PRESIDENT |                    |             |                                   |
| <b>Employer Mailing Address/Principal Place of Business</b><br>MCADOO INDUSTRIAL PARK |                    |                                   | <b>City</b><br>MCADOO |                             | <b>State</b><br>PA |             | <b>Zip Code (Plus 4)</b><br>18237 |

  

|   |                    |                                   |             |                           |              |             |                          |
|---|--------------------|-----------------------------------|-------------|---------------------------|--------------|-------------|--------------------------|
| <b>Full Name of Contributor</b><br>LINDA SCHIAVO            |                    |                                   |             | <b>MO</b>                 | <b>DAY</b>   | <b>YEAR</b> | <b>\$</b> 1,000.00       |
| <b>Mailing Address</b> 137 COUNTRY CLUB LANE                |                    |                                   |             | 5                         | 27           | 2025        |                          |
| <b>City</b> SUGARLOAF                                       | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18249 |             |                           |              |             |                          |
| <b>Employer Name</b>  |                    |                                   |             | <b>Occupation</b> RETIRED |              |             |                          |
| <b>Employer Mailing Address/Principal Place of Business</b> |                    |                                   | <b>City</b> |                           | <b>State</b> |             | <b>Zip Code (Plus 4)</b> |

  

|  |                    |                                   |                         |                         |                    |             |                                   |
|--|--------------------|-----------------------------------|-------------------------|-------------------------|--------------------|-------------|-----------------------------------|
| <b>Full Name of Contributor</b><br>LEONARD ROSSI                           |                    |                                   |                         | <b>MO</b>               | <b>DAY</b>         | <b>YEAR</b> | <b>\$</b> 1,000.00                |
| <b>Mailing Address</b> 5 SYDNEY WAY  |                    |                                   |                         | 5                       | 23                 | 2025        |                                   |
| <b>City</b> SUGARLOAF  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18249 |                         |                         |                    |             |                                   |
| <b>Employer Name</b> ROSSI COAL CO   |                    |                                   |                         | <b>Occupation</b> OWNER |                    |             |                                   |
| <b>Employer Mailing Address/Principal Place of Business</b><br>9 W 15TH ST |                    |                                   | <b>City</b><br>HAZLETON |                         | <b>State</b><br>PA |             | <b>Zip Code (Plus 4)</b><br>18201 |

  

|   |                    |                                   |             |                                 |              |             |                          |
|---|--------------------|-----------------------------------|-------------|---------------------------------|--------------|-------------|--------------------------|
| <b>Full Name of Contributor</b><br>ANTHONY PRUDENTI         |                    |                                   |             | <b>MO</b>                       | <b>DAY</b>   | <b>YEAR</b> | <b>\$</b> 500.00         |
| <b>Mailing Address</b> 545 MCINTOSH LANE                    |                    |                                   |             | 6                               | 1            | 2025        |                          |
| <b>City</b> ANDREAS   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18211 |             |                                 |              |             |                          |
| <b>Employer Name</b>  |                    |                                   |             | <b>Occupation</b> SELF EMPLOYED |              |             |                          |
| <b>Employer Mailing Address/Principal Place of Business</b> |                    |                                   | <b>City</b> |                                 | <b>State</b> |             | <b>Zip Code (Plus 4)</b> |

  

|   |                    |                                   |                           |   |                    |             |                                   |
|---|--------------------|-----------------------------------|---------------------------|---|--------------------|-------------|-----------------------------------|
| <b>Full Name of Contributor</b><br>PATRICIA A. O'CONNOR                   |                    |                                   |                           | <b>MO</b>                                 | <b>DAY</b>         | <b>YEAR</b> | <b>\$</b> 2,500.00                |
| <b>Mailing Address</b> 608 W. OAK STREET PO BOX 201                       |                    |                                   |                           | 5   | 31                 | 2025        |                                   |
| <b>City</b> FRACKVILLE  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>17931 |                           |   |                    |             |                                   |
| <b>Employer Name</b> PAR-KING, INC.                                       |                    |                                   |                           | <b>Occupation</b> CHIEF OPERATING OFFICER |                    |             |                                   |
| <b>Employer Mailing Address/Principal Place of Business</b><br>PO BOX 210 |                    |                                   | <b>City</b><br>FRACKVILLE |   | <b>State</b><br>PA |             | <b>Zip Code (Plus 4)</b><br>17931 |

  

|   |                    |                                   |             |                           |              |             |                          |
|---|--------------------|-----------------------------------|-------------|---------------------------|--------------|-------------|--------------------------|
| <b>Full Name of Contributor</b><br>MILDRED I. MILLER        |                    |                                   |             | <b>MO</b>                 | <b>DAY</b>   | <b>YEAR</b> | <b>\$</b> 300.00         |
| <b>Mailing Address</b> 7 ROCKFORD ROAD A25                  |                    |                                   |             | 6                         | 1            | 2025        |                          |
| <b>City</b> WILMINGTON                                      | <b>State</b><br>DE | <b>Zip Code (Plus 4)</b><br>19806 |             |                           |              |             |                          |
| <b>Employer Name</b>  |                    |                                   |             | <b>Occupation</b> RETIRED |              |             |                          |
| <b>Employer Mailing Address/Principal Place of Business</b> |                    |                                   | <b>City</b> |                           | <b>State</b> |             | <b>Zip Code (Plus 4)</b> |

|  |                    |                                   |                             |                             |                    |                                   |                    |
|--|--------------------|-----------------------------------|-----------------------------|-----------------------------|--------------------|-----------------------------------|--------------------|
| <b>Full Name of Contributor</b><br>KIM MERICLE                                     |                    |                                   |                             | <b>MO</b>                   | <b>DAY</b>         | <b>YEAR</b>                       | <b>\$</b> 5,000.00 |
| <b>Mailing Address</b> 1775 SUTTON ROAD  |                    |                                   |                             | 5                           | 23                 | 2025                              |                    |
| <b>City</b> SHAVERTOWN   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18708 |                             |                             |                    |                                   |                    |
| <b>Employer Name</b> MERICLE REAL ESTATE & CONSTRUCTION                            |                    |                                   |                             | <b>Occupation</b> DEVELOPER |                    |                                   |                    |
| <b>Employer Mailing Address/Principal Place of Business</b><br>100 BALTIMORE DRIVE |                    |                                   | <b>City</b><br>WILKES BARRE |                             | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18702 |                    |

  

|   |                    |                                   |                           |                             |                    |                                   |                    |
|---|--------------------|-----------------------------------|---------------------------|-----------------------------|--------------------|-----------------------------------|--------------------|
| <b>Full Name of Contributor</b><br>DAVID G MASSER                         |                    |                                   |                           | <b>MO</b>                   | <b>DAY</b>         | <b>YEAR</b>                       | <b>\$</b> 2,500.00 |
| <b>Mailing Address</b> 65 SPUD LANE PO BOX 210                            |                    |                                   |                           | 5                           | 24                 | 2025                              |                    |
| <b>City</b> SACRAMENTO  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>17968 |                           |                             |                    |                                   |                    |
| <b>Employer Name</b> STERMAN MASSER                                       |                    |                                   |                           | <b>Occupation</b> PRESIDENT |                    |                                   |                    |
| <b>Employer Mailing Address/Principal Place of Business</b><br>PO BOX 210 |                    |                                   | <b>City</b><br>SACRAMENTO |                             | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>17968 |                    |

  

|   |                    |                                   |                         |                         |                    |                                   |                  |
|---|--------------------|-----------------------------------|-------------------------|-------------------------|--------------------|-----------------------------------|------------------|
| <b>Full Name of Contributor</b><br>GEORGE HAYDEN                              |                    |                                   |                         | <b>MO</b>               | <b>DAY</b>         | <b>YEAR</b>                       | <b>\$</b> 500.00 |
| <b>Mailing Address</b> 7 HAWK LANE  |                    |                                   |                         | 6                       | 4                  | 2025                              |                  |
| <b>City</b> MOUNTAIN TOP  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18707 |                         |                         |                    |                                   |                  |
| <b>Employer Name</b> HAYDEN POWER GROUP                                       |                    |                                   |                         | <b>Occupation</b> OWNER |                    |                                   |                  |
| <b>Employer Mailing Address/Principal Place of Business</b><br>235 E MAPLE ST |                    |                                   | <b>City</b><br>HAZLETON |                         | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18201 |                  |

  

|   |                    |                                   |                          |                                      |                    |                                   |                    |
|---|--------------------|-----------------------------------|--------------------------|--------------------------------------|--------------------|-----------------------------------|--------------------|
| <b>Full Name of Contributor</b><br>NATHANIEL GUEST                                |                    |                                   |                          | <b>MO</b>                            | <b>DAY</b>         | <b>YEAR</b>                       | <b>\$</b> 1,000.00 |
| <b>Mailing Address</b> 1682 FARMINGTON AVE  |                    |                                   |                          | 6                                    | 4                  | 2025                              |                    |
| <b>City</b> POTTSTOWN   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19464 |                          |                                      |                    |                                   |                    |
| <b>Employer Name</b> COLEBROOKDALE RAILROAD PRESERVATION TRUST                    |                    |                                   |                          | <b>Occupation</b> EXECUTIVE DIRECTOR |                    |                                   |                    |
| <b>Employer Mailing Address/Principal Place of Business</b><br>64 S WASHINGTON ST |                    |                                   | <b>City</b><br>BOYERTOWN |                                      | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19512 |                    |

  

|  |                    |                                   |                             |                         |                    |                                   |                    |
|--|--------------------|-----------------------------------|-----------------------------|-------------------------|--------------------|-----------------------------------|--------------------|
| <b>Full Name of Contributor</b><br>WILLIAM GINDLESPERGER                     |                    |                                   |                             | <b>MO</b>               | <b>DAY</b>         | <b>YEAR</b>                       | <b>\$</b> 1,000.00 |
| <b>Mailing Address</b> 165 HIGHFIELD LANE NORTH                              |                    |                                   |                             | 6                       | 5                  | 2025                              |                    |
| <b>City</b> CHAMBERSBURG   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>17201 |                             |                         |                    |                                   |                    |
| <b>Employer Name</b> ELYNXX SOLUTIONS  |                    |                                   |                             | <b>Occupation</b> OWNER |                    |                                   |                    |
| <b>Employer Mailing Address/Principal Place of Business</b><br>166 S MAIN ST |                    |                                   | <b>City</b><br>CHAMBERSBURG |                         | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>17201 |                    |

  

|   |                    |                                   |                          |                           |                    |                                   |                    |
|---|--------------------|-----------------------------------|--------------------------|---------------------------|--------------------|-----------------------------------|--------------------|
| <b>Full Name of Contributor</b><br>YOSEF FRANKEL                              |                    |                                   |                          | <b>MO</b>                 | <b>DAY</b>         | <b>YEAR</b>                       | <b>\$</b> 2,500.00 |
| <b>Mailing Address</b> 63 CANARY DRIVE  |                    |                                   |                          | 6                         | 3                  | 2025                              |                    |
| <b>City</b> LAKEWOOD  | <b>State</b><br>NJ | <b>Zip Code (Plus 4)</b><br>08701 |                          |                           |                    |                                   |                    |
| <b>Employer Name</b> JEWEL HEALTHCARE & REHAB CENTER                          |                    |                                   |                          | <b>Occupation</b> PARTNER |                    |                                   |                    |
| <b>Employer Mailing Address/Principal Place of Business</b><br>535 N 17TH ST. |                    |                                   | <b>City</b><br>ALLENTOWN |                           | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18104 |                    |

|   |                    |                                   |                          |                         |                    |             |                                   |
|---|--------------------|-----------------------------------|--------------------------|-------------------------|--------------------|-------------|-----------------------------------|
| <b>Full Name of Contributor</b><br>PETER EISENHAUER                             |                    |                                   |                          | <b>MO</b>               | <b>DAY</b>         | <b>YEAR</b> | \$ 1,000.00                       |
| <b>Mailing Address</b> 170 STEEPLE DRIVE  |                    |                                   |                          | 6                       | 4                  | 2025        |                                   |
| <b>City</b> ROBESONIA   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19551 |                          |                         |                    |             |                                   |
| <b>Employer Name</b> EISENHAUER'S TIOGA COUNTY HD                               |                    |                                   |                          | <b>Occupation</b> OWNER |                    |             |                                   |
| <b>Employer Mailing Address/Principal Place of Business</b><br>2911 S. MAIN ST. |                    |                                   | <b>City</b><br>MANSFIELD |                         | <b>State</b><br>PA |             | <b>Zip Code (Plus 4)</b><br>16933 |

  

|   |                    |                                   |                           |                         |                    |             |                                   |
|---|--------------------|-----------------------------------|---------------------------|-------------------------|--------------------|-------------|-----------------------------------|
| <b>Full Name of Contributor</b><br>LOUIS DENAPLES, SR                               |                    |                                   |                           | <b>MO</b>               | <b>DAY</b>         | <b>YEAR</b> | \$ 5,000.00                       |
| <b>Mailing Address</b> 400 MILL ST  |                    |                                   |                           | 5                       | 23                 | 2025        |                                   |
| <b>City</b> DUNMORE   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18512 |                           |                         |                    |             |                                   |
| <b>Employer Name</b> COMMONWEALTH ENVIRONMENTAL SYSTEM                              |                    |                                   |                           | <b>Occupation</b> OWNER |                    |             |                                   |
| <b>Employer Mailing Address/Principal Place of Business</b><br>99 COMMONWEALTH ROAD |                    |                                   | <b>City</b><br>POTTSVILLE |                         | <b>State</b><br>PA |             | <b>Zip Code (Plus 4)</b><br>17901 |

  

|   |                    |                                   |                         |                         |                    |             |                                   |
|---|--------------------|-----------------------------------|-------------------------|-------------------------|--------------------|-------------|-----------------------------------|
| <b>Full Name of Contributor</b><br>NEAL DEANGELO, JR.                           |                    |                                   |                         | <b>MO</b>               | <b>DAY</b>         | <b>YEAR</b> | \$ 2,500.00                       |
| <b>Mailing Address</b> 100 N CONAHAN DR   |                    |                                   |                         | 5                       | 31                 | 2025        |                                   |
| <b>City</b> HAZLETON  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18201 |                         |                         |                    |             |                                   |
| <b>Employer Name</b> DBI SERVICES   |                    |                                   |                         | <b>Occupation</b> OWNER |                    |             |                                   |
| <b>Employer Mailing Address/Principal Place of Business</b><br>100 N CONAHAN DR |                    |                                   | <b>City</b><br>HAZLETON |                         | <b>State</b><br>PA |             | <b>Zip Code (Plus 4)</b><br>18201 |

  

|   |                    |                                   |                          |                             |                    |             |                                   |
|---|--------------------|-----------------------------------|--------------------------|-----------------------------|--------------------|-------------|-----------------------------------|
| <b>Full Name of Contributor</b><br>JAY COOPERMAN                          |                    |                                   |                          | <b>MO</b>                   | <b>DAY</b>         | <b>YEAR</b> | \$ 1,000.00                       |
| <b>Mailing Address</b> PO BOX 204   |                    |                                   |                          | 5                           | 31                 | 2025        |                                   |
| <b>City</b> PALMERTON   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18071 |                          |                             |                    |             |                                   |
| <b>Employer Name</b> DYNAMIC CAPITAL PROPERTIES                           |                    |                                   |                          | <b>Occupation</b> DEVELOPER |                    |             |                                   |
| <b>Employer Mailing Address/Principal Place of Business</b><br>PO BOX 204 |                    |                                   | <b>City</b><br>PALMERTON |                             | <b>State</b><br>PA |             | <b>Zip Code (Plus 4)</b><br>18071 |

  

|   |                    |                                   |                            |                             |                    |             |                                   |
|---|--------------------|-----------------------------------|----------------------------|-----------------------------|--------------------|-------------|-----------------------------------|
| <b>Full Name of Contributor</b><br>JOSEPH J. BENNETT                          |                    |                                   |                            | <b>MO</b>                   | <b>DAY</b>         | <b>YEAR</b> | \$ 500.00                         |
| <b>Mailing Address</b> 28 CLIFFTOP ROAD                                       |                    |                                   |                            | 6                           | 1                  | 2025        |                                   |
| <b>City</b> NORTHAMPTON   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18067 |                            |                             |                    |             |                                   |
| <b>Employer Name</b> BENNETT FAMILY DEALERSHIPS                               |                    |                                   |                            | <b>Occupation</b> DEVELOPER |                    |             |                                   |
| <b>Employer Mailing Address/Principal Place of Business</b><br>28 CLIFFTOP RD |                    |                                   | <b>City</b><br>NORTHAMPTON |                             | <b>State</b><br>PA |             | <b>Zip Code (Plus 4)</b><br>18067 |

  

|  |                    |                                   |                       |                         |                    |             |                                   |
|--|--------------------|-----------------------------------|-----------------------|-------------------------|--------------------|-------------|-----------------------------------|
| <b>Full Name of Contributor</b><br>ART BARNES                              |                    |                                   |                       | <b>MO</b>               | <b>DAY</b>         | <b>YEAR</b> | \$ 1,000.00                       |
| <b>Mailing Address</b> 115 SCULPS ROAD                                     |                    |                                   |                       | 5                       | 31                 | 2025        |                                   |
| <b>City</b> AUBURN   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19722 |                       |                         |                    |             |                                   |
| <b>Employer Name</b> AB NOVELTIES  |                    |                                   |                       | <b>Occupation</b> OWNER |                    |             |                                   |
| <b>Employer Mailing Address/Principal Place of Business</b><br>SCULPS HILL |                    |                                   | <b>City</b><br>AUBURN |                         | <b>State</b><br>PA |             | <b>Zip Code (Plus 4)</b><br>17922 |

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

| PAGE TOTAL |           |
|------------|-----------|
| \$         | 32,800.00 |

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   | \$ 0.00 |
| Mailing Address     |  |       |                   |      |    |     |        |         |
| City                |  | State | Zip Code (Plus 4) |      |    |     |        |         |
| Receipt Description |  |       |                   |      |    |     |        |         |

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

|            |
|------------|
| PAGE TOTAL |
| \$ 0.00    |

## SCHEDULE II

**IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED**

**USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS  
DURING THE REPORTING PERIOD.**

**Detailed Summary Page**

|  |  |   |      |
|--|--|---|------|
| <b>Name of Filing Committee or Candidate</b>   |  | <b>Reporting Period</b>                   |      |
| VOLUNTEERS FOR ARGALL  |  | From: <u>5/6/2025</u> To: <u>6/9/2025</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<br><br>From: <span style="float: right;">To:</span> |
|---------------------------------------|--|

|   |       |                   | DATE |     |      | AMOUNT                           |
|---|-------|-------------------|------|-----|------|----------------------------------|
| Full Name of Contributor  |       |                   | MO   | DAY | YEAR | \$ 0.00                          |
| Mailing Address   |       |                   |      |     |      |                                  |
| City  | State | Zip Code (Plus 4) |      |     |      |                                  |
| Description of Contribution:  |       |                   |      |     |      |                                  |
| Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2. |       |                   |      |     |      | <b>PAGE TOTAL</b><br><br>\$ 0.00 |



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

|   |       |                  |       |                  |                             |                    |         |
|---|-------|------------------|-------|------------------|-----------------------------|--------------------|---------|
| Name of Filing Committee or Candidate   |       |                  |       | Reporting Period |                             |                    |         |
|   |       |                  |       | From:            |                             | To:                |         |
|   |       |                  |       | DATE             |                             | AMOUNT             |         |
| Full Name of Contributor  |       |                  |       | MO               | DAY                         | YEAR               | \$ 0.00 |
| Mailing Address   |       |                  |       |                  |                             |                    |         |
| City  | State | Zip Code(Plus 4) |       |                  |                             |                    |         |
| Employer of Contributor   |       |                  |       | Occupation       |                             |                    |         |
| Employer Mailing Address/Principal Place of Business  |       | City             | State | Zip Code(Plus 4) | Description of Contribution |                    |         |
| Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3. |       |                  |       |                  |                             | PAGE TOTAL<br>0.00 |         |

# SCHEDULE III STATEMENT OF EXPENDITURES

|  |  |
|--|--|
| <b>Name of Filing Committee or Candidate</b> | <b>Reporting Period</b>                  |
| VOLUNTEERS FOR ARGALL                        | From <u>5/6/2025</u> To: <u>6/9/2025</u> |

| DATE  |                 |                                |   | AMOUNT      |
|---|-----------------|--------------------------------|---|-------------|
| <b>To Whom Paid</b>                               | <b>MO</b>       | <b>DAY</b>                     | <b>YEAR</b>   |             |
| GALEN GLEN WINERY                                 |                 |                                |   |             |
| <b>Mailing Address</b> WINTER MOUNTAIN DRIVE      | 5               | 9                              | 2025  | \$ 199.90   |
| <b>City</b> ANDREAS                               | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 18211 | <b>Description of Expenditure</b> WINE FOR FUNDRAISER |             |
| <b>To Whom Paid</b>                               | <b>MO</b>       | <b>DAY</b>                     | <b>YEAR</b>   |             |
| STAPLES   |                 |                                |   |             |
| <b>Mailing Address</b> 6104 CRESSONA MALL         | 5               | 9                              | 2025  | \$ 339.54   |
| <b>City</b> POTTSVILLE                            | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 17901 | <b>Description of Expenditure</b> OFFICE SUPPLIES     |             |
| <b>To Whom Paid</b>                               | <b>MO</b>       | <b>DAY</b>                     | <b>YEAR</b>   |             |
| VISA  |                 |                                |   |             |
| <b>Mailing Address</b> P.O. BOX 71083             | 5               | 9                              | 2025  | \$ 354.70   |
| <b>City</b> CHARLOTTE                             | <b>State</b> NC | <b>Zip Code (Plus 4)</b> 28272 | <b>Description of Expenditure</b> CAMPAIGN EXPENSES   |             |
| <b>To Whom Paid</b>                               | <b>MO</b>       | <b>DAY</b>                     | <b>YEAR</b>   |             |
| CHRISTINE VERDIER                                 |                 |                                |   |             |
| <b>Mailing Address</b> 69 SUNNY DR PO BOX 74      | 5               | 25                             | 2025  | \$ 138.60   |
| <b>City</b> MARY D                                | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 17952 | <b>Description of Expenditure</b> MILEAGE             |             |
| <b>To Whom Paid</b>                               | <b>MO</b>       | <b>DAY</b>                     | <b>YEAR</b>   |             |
| COLUMBIA BOOK, INC.                               |                 |                                |   |             |
| <b>Mailing Address</b> 4340 EAST-WEST HIGHWAY     | 5               | 25                             | 2025  | \$ 79.90    |
| <b>City</b> BETHESDA                              | <b>State</b> MD | <b>Zip Code (Plus 4)</b> 20814 | <b>Description of Expenditure</b> BOOKS               |             |
| <b>To Whom Paid</b>                               | <b>MO</b>       | <b>DAY</b>                     | <b>YEAR</b>   |             |
| HISPANIC REPUBLICAN COALITION OF PA               |                 |                                |   |             |
| <b>Mailing Address</b> ED FLOCCO 4029 WOODRUFF RD | 5               | 25                             | 2025  | \$ 5,000.00 |
| <b>City</b> LAFAYETTE HILL                        | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 19444 | <b>Description of Expenditure</b> DONATION            |             |

|   |             |                            |  |     |      |           |
|---|-------------|----------------------------|--|-----|------|-----------|
| To Whom Paid<br>HOUSE REPUBLICAN CAMPAIGN COMMITTEE |             |                            | MO   | DAY | YEAR | \$ 500.00 |
| Mailing Address P.O. BOX 11787                      |             |                            | 5  | 25  | 2025 |           |
| City HARRISBURG                                     | State<br>PA | Zip Code (Plus 4)<br>17108 | Description of Expenditure<br>CONTRIBUTION |     |      |           |

|   |             |                            |                                  |     |      |          |
|---|-------------|----------------------------|----------------------------------|-----|------|----------|
| To Whom Paid<br>PSCE-SCHUYLKILL COUNTY 4-H              |             |                            | MO                               | DAY | YEAR | \$ 50.00 |
| Mailing Address GORDON NAGLE TRAIL 1202 AG CENTER DRIVE |             |                            | 5                                | 25  | 2025 |          |
| City POTTSVILLE   | State<br>PA | Zip Code (Plus 4)<br>17901 | Description of Expenditure<br>AD |     |      |          |

|   |             |                            |  |     |      |           |
|---|-------------|----------------------------|--|-----|------|-----------|
| To Whom Paid<br>SENATE REPUBLICAN CAMPAIGN CMTE |             |                            | MO   | DAY | YEAR | \$ 450.00 |
| Mailing Address PO BOX 792                      |             |                            | 5  | 25  | 2025 |           |
| City HARRISBURG                                 | State<br>PA | Zip Code (Plus 4)<br>17108 | Description of Expenditure<br>CONTRIBUTION |     |      |           |

|   |             |                            |                                  |     |      |          |
|---|-------------|----------------------------|----------------------------------|-----|------|----------|
| To Whom Paid<br>ST. JOSEPH PARISH OF THE PANTHER VALLEY |             |                            | MO                               | DAY | YEAR | \$ 45.00 |
| Mailing Address 118 N MARKET ST.                        |             |                            | 5                                | 25  | 2025 |          |
| City SUMMIT HILL  | State<br>PA | Zip Code (Plus 4)<br>18250 | Description of Expenditure<br>AD |     |      |          |

|                          |             |                            |   |     |      |           |
|--------------------------|-------------|----------------------------|---|-----|------|-----------|
| To Whom Paid<br>T-MOBILE |             |                            | MO  | DAY | YEAR | \$ 165.54 |
| Mailing Address          |             |                            | 5   | 25  | 2025 |           |
| City                     | State<br>PA | Zip Code (Plus 4)<br>00000 | Description of Expenditure<br>CELL PHONES |     |      |           |

|  |             |                            |  |     |      |           |
|--|-------------|----------------------------|--|-----|------|-----------|
| To Whom Paid<br>MAYOR CUSAT'S HAZLETON REVITALIZATION FUND |             |                            | MO                                     | DAY | YEAR | \$ 100.00 |
| Mailing Address PO BOX 22                                  |             |                            | 5                                      | 28  | 2025 |           |
| City HAZLETON  | State<br>PA | Zip Code (Plus 4)<br>18201 | Description of Expenditure<br>DONATION |     |      |           |

|                                    |             |                            |   |     |      |           |
|------------------------------------|-------------|----------------------------|---|-----|------|-----------|
| To Whom Paid<br>STAPLES            |             |                            | MO  | DAY | YEAR | \$ 142.58 |
| Mailing Address 6104 CRESSONA MALL |             |                            | 5   | 29  | 2025 |           |
| City POTTSVILLE                    | State<br>PA | Zip Code (Plus 4)<br>17901 | Description of Expenditure<br>OFFICE SUPPLIES |     |      |           |

|                                |             |                            |   |     |      |           |
|--------------------------------|-------------|----------------------------|---|-----|------|-----------|
| To Whom Paid<br>VISA           |             |                            | MO  | DAY | YEAR | \$ 337.97 |
| Mailing Address P.O. BOX 71083 |             |                            | 5   | 29  | 2025 |           |
| City CHARLOTTE                 | State<br>NC | Zip Code (Plus 4)<br>28272 | Description of Expenditure<br>CAMPAIGN EXPENSES |     |      |           |

|                                 |                    |                                   |  |            |             |                  |
|---------------------------------|--------------------|-----------------------------------|--|------------|-------------|------------------|
| <b>To Whom Paid</b><br>T-MOBILE |                    |                                   | <b>MO</b>  | <b>DAY</b> | <b>YEAR</b> | <b>\$</b> 173.08 |
| <b>Mailing Address</b>          |                    |                                   | 6  | 5          | 2025        |                  |
| <b>City</b>                     | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>00000 | <b>Description of Expenditure</b><br>CELL PHONES |            |             |                  |

|                               |                    |                                   |  |            |             |                |
|-------------------------------|--------------------|-----------------------------------|--|------------|-------------|----------------|
| <b>To Whom Paid</b><br>ANEDOT |                    |                                   | <b>MO</b>  | <b>DAY</b> | <b>YEAR</b> | <b>\$</b> 7.30 |
| <b>Mailing Address</b>        |                    |                                   | 6  | 8          | 2025        |                |
| <b>City</b>                   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>00000 | <b>Description of Expenditure</b><br>FEES FOR ONLINE FUNDRAISING |            |             |                |

|   |                    |                                   |   |            |             |                  |
|---|--------------------|-----------------------------------|---|------------|-------------|------------------|
| <b>To Whom Paid</b><br>SCHUYLKILL CHAMBER OF COMMERCE |                    |                                   | <b>MO</b>                                     | <b>DAY</b> | <b>YEAR</b> | <b>\$</b> 200.00 |
| <b>Mailing Address</b> 91 S. PROGRESS AVE.            |                    |                                   | 6   | 9          | 2025        |                  |
| <b>City</b> POTTSVILLE                                | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>17901 | <b>Description of Expenditure</b><br>DONATION |            |             |                  |

|   |                    |                                   |   |            |             |                 |
|---|--------------------|-----------------------------------|---|------------|-------------|-----------------|
| <b>To Whom Paid</b><br>TAMAQUA RESCUE SQUAD |                    |                                   | <b>MO</b>   | <b>DAY</b> | <b>YEAR</b> | <b>\$</b> 25.00 |
| <b>Mailing Address</b> 19 PINE STREET       |                    |                                   | 6   | 9          | 2025        |                 |
| <b>City</b> TAMAQUA                         | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18252 | <b>Description of Expenditure</b><br>GOLF SPONSOR |            |             |                 |

|  |  |  |  |  |  |                    |
|--|--|--|--|--|--|--------------------|
| <b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b> |  |  |  |  |  | <b>PAGE TOTAL</b>  |
|  |  |  |  |  |  | <b>\$</b> 8,309.11 |

