Campaign Finance Report

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

Filer Identificati Number :	on 2003	194			Rep File	oort		CAN	DIE	DATE		СОММ	1ITTEE	✓	LOBI	BYIST		
Name of Filing C	Committee, Candid	ate or L	obbyist:		PAD	F PA	AC.											
Street Address:	200 N 3RD ST	STE 15	500															
City:	HARRISBURG							State:		PA			Zip Cod	le: 17	7101-1	585		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE- 2. 30 DAY POST- 3. PRIMARY							AMENDM REPORT?		Yes	No		\			
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	y pre	Ē- [5.	30 DA ELECT		P	OST-	6.		TERMINA REPORT?		Yes	No		\
report type)	ANNUAL REPORT	7. X	Year 2007					IG MET CHECK					PAPER		$\overline{}$	DISKE	TTE	
Name of Office S	Sought by Candida	te:	-					DATE	OI	F ELEC	CTIC	N	District Number	Office Code	Par	ty Code	Coun	
								МО		DAY	YI	AR	Number	code			Code	
									11		6	2007		(SEE IN	STRUCTI	ONS FOR	CODES)
	Receipts and	МО	DAY	YEAR	2			МО		DAY	YI	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	from:		1 1	2	007	T	0		12	173	31	2007						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$				10,	729.65						
B. Total Monet	ary Contributions A	And Rec	eipts (From	Sche	dule	I)	\$					0.00						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$				10,	729.65						
D. Total Expen	ditures (From Sch	edule II	I)				\$				5	500.00						
E. Ending Cash	Balance (Subtract	Line D	From Line (C)			\$				10,2	29.65						
F. Value Of In-	Kind Contributions	Receiv	ed (From So	hedu	le II)	\$					0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$					0.00			1			
				AFF	IDA	١٧٧	T SE	CTIO	N									
	s a Committee rep		_									_						
I swear (or affirm) correct and comple) that this report, incl ete.	uding the	e attached sch	nedules	s filed	d on	paper (or by ele	ectr	onic me	edium	, are to t	he best o	f my kno	wledge	and beli	ef , tr	ue
Sworn to and subs	cribed before me this day of	•	20						-		S	ignature	of Perso	n Submit	ting Rep	ort		_
	- Cianatu						- -		-				Prin	ted Name	e			-
My Commission Ex	Signatu opires	ie							-				Ema	il				-
	мо	D	AY	YR			_		-	Are	a Coc	le	Daytim	e Teleph	none Nu	mber		_
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nitte	e, C	andida	ate sha	all s	ign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and beli	ef this	polit	ical	commi	ittee ha	s no	t violat	ed an	y provisi	ions of the	e act of J	une 3,1	937 (P.L	. 1333	3,
Sworn to and subso	ribed before me this											Si	ignature o	of Candid	ate			-
	day of						_						Printe	d Name				-
	Signature						-		_									_
My Commission Exp	-								_				Ema	il				
	МО	D	AY	YR	l		•		,	Area	Code		Da	aytime T	elephon	e Numb	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	J Period		
PADF PAC	From:	1/1/200	<u>7</u> To:	12/31/2007
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	0.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	0.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting) Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee	or Candidate	R	Reporting	Period			
		F	rom:		То	I	
		•		DATE			AMOUNT
Full Name of Contributing Co	ommittee		мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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

ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part A)

Name of Filing Committe	ee or Candidate	F	Reporting I	Period			
		F	From:		To) :	
		•		DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

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

PART C

Contributions Received From Political Committees

OVER \$250.00

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate			Reporting	Period					
			From:			То:			
				DA	TE		P	AMOUNT	
Full Name of Contributing Committee				МО	DAY	YEAR		0	0.00
Mailing Address							+	U	.00
City	State	Zip Code	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on Scheo	dule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.0	00

ALL OTHER CONTRIBUTIONS

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate			Rep	orting Pe	riod			
			Fro	m:		To) :	
				D	ATE		AI	MOUNT
Full Name of Contributor				МО	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Pl	ıs 4)					
Employer Name		•		Occupa	tion			
Employer Mailing Address/Principal Pla	ice of Business	City		•	State		Zip Cod	le (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detailed S	ummary Pag	e, Secti	on 3.			P.	O.00

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		Report	ing Peri	od			
			From:			To:		
		•		E	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	ıs 4)					
Receipt Description	<u>'</u>				•		<u> </u>	
Futor Curred Total of Doub	For Cabadula I Batailad	Summer Base Se		4				PAGE TOTAL
Enter Grand Total of Part	E on Schedule 1, Detailed	Summary Page, Se	ection	4.			\$	0.00

SCHEDULE II

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

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

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period		
PADF PAC	From:	<u>1/1/2007</u> To:	12/31/2007
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Can	lame of Filing Committee or Candidate Rep					Reporting Period					
			From:			To:					
				DATE			AMOUNT				
Full Name of Contributor			МО	DAY	YEAR						
Mailing Address						7 \$	0.0	10			
City	State	Zip Code (Plus 4)									
Description of Contribution:	•		•	•							
Enter Grand Total of Part F or	n Schedule II, In-Ki	nd Contributions Detai	led Sun	ımary Pa	ge,		PAGE TOTAL				
Section 2.						\$	0.0	0			

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Rep	orting	Period				
				Fro	m:		To:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address				-					\$	0.00
City	State	;	Zip Code(Plus 4)							
Employer of Contributor					Occup	ation				
Employer Mailing Address/Principal Plac	e of Business	City	′	State	e Zip	Code(Plus 4)	Descr	ript	ion of Contribution	on
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	ontributions De	etaile	ed				PAGE TOT	ΓAL
Summary Page, Section 3.										0.00

500.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or (lame of Filing Committee or Candidate				Reporting Period				
PADF PAC			From	<u>1/:</u>	1/2007	То:	12/31/2007		
				DATE			AMOUNT		
To Whom Paid			МО	DAY	YEAR				
HUGHES CAMPAIGN COMMIT	TEE		1-10						
Mailing Address			11	29	2007	\$	500.00		
City HARRISBURG	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure	•			
	PA		CONTRI	BUTION					
Enter Grand Total of Expen	nditures on Page 1, Re	port Cover Page, Item D).				PAGE TOTAL		