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	80496	5				port ed B		CAN	DII	DATE	√	СО	MMITTEE		LOBI	BYIST			
Name of Filing C	ommitte	e, Candida	ate or Lo	obbyist:		ARC	GALL	, DAV	ID G.											
Street Address:																				
City:									State:	:				Zip Code	9:					
TYPE OF REPORT	6TH TUES		1.	2ND FRIDA PRIMARY	Y PRE	-	2.	30 DA		Р	OST-	3.		AMENDME REPORT?	NT	Yes	No	~		
(place X to the right of	6TH TUES		4.	2ND FRIDA ELECTION	Y PRE	≣-	5.	30 DA		Р	OST-	6.		TERMINAT REPORT?	TION	Yes	No			
report type)	ANNUAL	. REPORT	7. X	Year 2008					IG MET					PAPER	PAPER DISKETT					
Name of Office S	ought by	Candidat	e:	•					DATE	0	F ELE	CTI	ON	District Number	District Office Party Code C					
DEDDEOENTATT		OENED		EMBIN.					МО		DAY	Y	/EAR	124	STH	REP		54		
REPRESENTATI	VE IN IF	IE GENER	AL ASS	EMBLY						11		4	2008		(SEE INS	TRUCTI	ONS FOR C	CODES)		
Summary of		s and	МО	DAY	YEAR	ł			МО		DAY	١	/EAR	FOR	OFFIC	E USE	ONLY			
Expenditures	from:			1 1	2	008	T	0		12	(3)	31	2008							
A. Amount Bro	ught Forv	ward From	ı Last R	eport				\$					0.00							
B. Total Moneta	ary Contr	ibutions A	and Rec	eipts (From	Sche	dule	e I)	\$					312.32							
C. Total Funds	Available	(Sum Of	Lines A	and B)				\$					312.32							
D. Total Expend	ditures (I	From Sche	dule II	I)				\$					312.32							
E. Ending Cash	Balance	(Subtract	Line D	From Line (C)			\$					0.00							
F. Value Of In-	Kind Con	tributions	Receiv	ed (From S	chedu	le I	I)	\$					0.00							
G. Unpaid Debt	s And Ob	ligations	(From S	Schedule IV)			\$					0.00		,					
					AFF	ID	AVI	T SE	CTIO	Ν										
PART I - If this is	s a Comm	nittee repo	ort, trea	surer sign	here.	If th	nis is	a Car	didate	e re	port, c	and	lidate sig	ın here.						
I swear (or affirm) correct and comple		report, incl	uding the	attached scl	hedule	s file	ed on	paper	or by el	ectr	onic me	ediui	n, are to t	he best of	my knov	vledge	and belie	ef , true		
Sworn to and subs	cribed bef	ore me this		20									Signature	of Person	Submitt	ing Rep	ort			
	_	Signatur	e					- -						Printe	ed Name					
My Commission Ex	pires							_		-				Email						
		мо	D	AY	YR						Are	ea Co	ode	Daytime	Teleph	one Nu	mber			
Part II- If this is	a report	of a cand	idate's	authorized	Comn	nitte	ee, C	andid	ate sh	all s	sign he	ere.								
I swear (or affirm) No 320) as amende		e best of m	y knowle	edge and beli	ef this	poli	itical	comm	ittee ha	s no	ot violat	ted a	iny provisi	ons of the act of June 3,1937 (P.L. 1333,						
Sworn to and subsc		re me this											Si	ignature of	Candida	ite				
	day of —							_						Printed	Name					
	;	Signature						-												
My Commission Exp	ires													Email						
	_	МО	D	AY	YR	1		-			Area	Code	•	Day	time Te	elephon	e Numbe	er		

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	Period		
ARGALL, DAVID G.	<u>8</u> To:	12/31/2008		
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)			\$	312.32
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting) Period	(3)	\$	312.32
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	J 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			\$	312.32

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 Candidat	Reporting						
		'	From:		То	:	
		·		DATE			AMOUNT
Full Name of Contributing Committee			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.

0.00

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 Commit	tee or Candidate	F	Reporting F	Period			
		F	From:		To):	
		-		DATE			AMOUNT
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address						\$	0.00
_	Gt-t-	Zin Code (Blue 4)		1	I		
City	State	Zip Code (Plus 4)					

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						
ARGALL, DAVID G.	ARGALL, DAVID G.			1/	1/2008	То:	12/31/2008	
				DA	TE		AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR		
VOLUNTEERS FOR ARGALL							\$	25.08
Mailing Address PO BOX 241				12	24	2008		
City TAMAQUA	State	Zip Code	e (Plus 4)					
	PA	18252						
Full Name of Contributing Committee				мо	DAY	YEAR		
VOLUNTEERS FOR ARGALL							\$	287.24
Mailing Address PO BOX 241				12	15	2008		
City TAMAQUA	State	Zip Code	e (Plus 4)					
	PA	18252						

 $\label{lem:enter-constraint} \textbf{Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.}$

PAGE TOTAL \$ 312.32

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.)

			Repo	orting Pe	riod			
			Fron	n:		T	0:	
				D	ATE			AMOUNT
				мо	DAY	YEAR	\$	0.00
State	Zi	p Code (Plus	s 4)					
				Occupa	tion			
ce of Business		City			State		Zip	Code (Plus 4)
dule I, Detailed	Sumn	mary Page,	Section	on 3.			\$	PAGE TOTAL 0.00
	State ce of Business	State Zi ce of Business	State Zip Code (Plus ce of Business City	State Zip Code (Plus 4) ce of Business City	From: MO State Zip Code (Plus 4) Occupa	From: DATE MO DAY State Zip Code (Plus 4) Occupation ce of Business City State	State Zip Code (Plus 4) State Zip Code (Plus 4) Occupation ce of Business City State cdule I, Detailed Summary Page, Section 3.	From: To: DATE MO DAY YEAR State Zip Code (Plus 4) Occupation ce of Business City State Zip

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 of	or Candidate		Report	ing Peri	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							\neg	
City	State	Zip Code (I	Plus 4)					
Receipt Description	•	•			1	•	•	
Futor Coand Total of Bank	Cabadula I Detailed	Commence De	Caatle					PAGE TOTAL
Enter Grand Total of Part I	e on Schedule I, Detailed	Summary Page,	Section	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	i	
ARGALL, DAVID G.	From:	<u>1/1/2008</u> To:	12/31/2008
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER 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 Car	Reporting Period							
	From: To:							
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$	C	0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•		•	•		•		
					-			
Enter Grand Total of Part F o	n Schedule II, In-Ki	nd Contributions Detai	led Sum	mary Pa	ge,		PAGE TOTAL	
Section 2.						\$	0	.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate			Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi _l	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

312.32

STATEMENT OF EXPENDITURES

Name of Filing Committee or Car	ididate		Reporting Period							
ARGALL, DAVID G.	ARGALL, DAVID G.					From <u>1/1/2008</u> To: <u>12/</u>				
		I	DATE AMOUN							
To Whom Paid			МО	DAY	YEAR					
DAVID G ARGALL										
Mailing Address 106 LAKE DR				15	2008	\$	287.24			
City NESQUEHONING	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
	PA	18240	MILEAG	SE REIMBU	RSEMENT	-				
To Whom Paid			мо	DAY	YEAR					
DAVID G ARGALL			1410	DAT	ILAK					
Mailing Address 106 LAKE DR			12	24	2008	\$	25.08			
City NESQUEHONING	State	Zip Code (Plus 4)) Description of Expenditure							
	18240	CAMPA	IGN REIMB	URSEME	NT					
Futon Cuand Tatal of Free 4	mant Cavan Daga Thomas					PAGE TOTAL				
Enter Grand Total of Expendi	tures on Page 1, Re	eport Cover Page, Item L	' .			١.				