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 :	ion 2000		Report Filed E		CANDI	DATE		СОММ	1ITTEE	✓	LOBE	BYIST			
Name of Filing C	Committee, Candid	ate or Lo	obbyist:	A	FT PA	СОМ	SUPT								
Street Address:	Street Address: C/O TREAS: JACK STEINBERG,1816 CHESTNUT ST														
City:	PHILADELPHI	A					State:	PA			Zip Co	de: 19	103-0	000	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	30 D/ PRIM		POST-			AMENDMENT REPORT?		Yes	No	\checkmark		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.					AY F TION	POST-	6.		TERMIN/ REPORT		Yes	No	\checkmark
report type)	ANNUAL REPORT	7.	Year 2012				NG METHO				PAPER		\checkmark	DISKE	TTE
Name of Office S	L Sought by Candida	te:					DATE O	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code
							мо	DAY	YE	AR					
							11		6	2012		(SEE INS	TRUCTIO	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR			мо	DAY	YE	AR	FC	OR OFFIC	E USE	ONLY	
Expenditures	s from:		9 18	20	12 T	0	10	2	22	2012					
A. Amount Bro	ught Forward Froi	m Last R	eport			\$			10,2	32.24					
B. Total Monet	ary Contributions	And Rec	eipts (From	n Sched	ule I)	\$	\$ 1,804.00								
C. Total Funds	Available (Sum Of	f Lines A	and B)			\$			12,0	36.24					
D. Total Expen	ditures (From Sch	edule II	[)			\$				0.00					
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)		\$			12,0	36.24	-				
F. Value Of In-	Kind Contribution	s Receive	ed (From S	chedule	e II)	\$				0.00	-				
G. Unpaid Debt	ts And Obligations	(From S	chedule IV	')		\$				0.00					
				AFFI	DAVI	T SE	CTION								
	s a Committee rep		-					• •		-	•				
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	attached sc	hedules	filed on	paper	or by elect	ronic me	edium,	are to t	the best o	f my knov	vledge	and beli	ef , true
Sworn to and subs	cribed before me this day of	S	20						Si	ignature	e of Perso	n Submitt	ing Rep	ort	
	Signatu	ire				_					Prin	ted Name			
My Commission Ex	xpires					_					Ema	il			
	МО	DA	AY	YR				Are	ea Cod	e	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a can	didate's	authorized	Commi	ittee, C	andid	ate shall	sign he	ere.						
No 320) as amend		ny knowle	edge and beli	ef this p	olitical	comm	iittee has n	ot violat	ed any	y provis	ions of th	e act of Ju	ine 3,19	937 (P.L	. 1333,
Sworn to and subso	ribed before me this day of		20							S	ignature (of Candida	ite		
						_					Printe	ed Name			
My Commission Exp	Signature					-					Ema	il			
	мо	D/	AY	YR		-		Area	Code		D	aytime Te	elephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** AFT PA COM SUPT From: <u>9/18/2012</u> To: 10/22/2012 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor \$ 1,504.00 **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 300.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 300.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 0.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 1,804.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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.

PART A

Name of Filing Committee or Candidate					Reporting Period						
Fro						:					
					DATE			AMOUNT			
Full Name of Contributing Committee				мо	DAY	YEAR					
Mailing Address							\$	0.00			
City State Zip Code (Plus 4)											
							Γ	PAGE TOTAL			

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

0.00

\$

PAGE 3

PART B ALL OTHER CONTRIBUTIONS \$50.01 TO \$250.00 Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period. (Exclude contributions from political committees reported in Part A)											
Name of Filing Committee or Candidate Reporting Period											
AFT PA COM SUPT			Fro	m:	<u>9/18/</u>	2012 To):	<u>10/22/2012</u>			
					DATE			AMOUNT			
Full Name of Contributor ELSA M E RAPP				мо	DAY	YEAR					
Mailing Address City	State	Zip Code (Plus 4)		9	19	2012	\$	100.00			
Full Name of Contributor LIBBY SCHWARTZ				мо	DAY	YEAR					
Mailing Address City	State	Zip Code (Plus 4)		10	3	2012	\$	100.00			
Full Name of Contributor KATHLEEN WEBB				мо	DAY	YEAR					
Mailing Address City	State	Zip Code (Plus 4)		10	3	2012	\$	100.00			
·····								PAGE TOTAL			
Enter Grand Total of Part A on S	Schedule I, Detail	ed Summary Pag	je, S	ection 2			\$	300.00			

PART C Contributions Received From Political Committees

OVER \$250.00

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

Name of Filing Committee or Candidate			Reporting Period						
			From:			То:			
				DA	TE		А	MOUNT	
Full Name of Contributing Commit	ttee			мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
						ſ		PAGE TOTAL	
Enter Grand Total of Part C on	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	0.00	

PART D ALL OTHER CONTRIBUTIONS

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of

over \$250.00 in the reporting period.

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

Name of Filing Committee or Candidate	Reporting Period	
	From:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupation				
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

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			Report	ing Perio	od				
From					m: To:				
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$		0.00
City	State	Zip Code (Plus 4)						
Receipt Description	•						-		
Enter Grand Total of Part E on Schedu	ule T. Detailed Summ	nary Page	Section	4				PAGE TO	ſAL
		iiai y i uge,	Section				\$		0.00

SCHEDULE II IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED

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

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period		
AFT PA COM SUPT	From:	<u>9/18/2012</u> то:	<u>10/22/2012</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate				Reporting Period					
	From:			То:					
				DATE		AMOUN	NT		
Full Name of Contributor			мо	DAY	YEAR				
Mailing Address						\$	0.00		
City	State	Zip Code (Plus 4)							
Description of Contribution:									
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detaile Section 2.				mary Pag	je,	PAGE T	OTAL		
					4	•	0.00		

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						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(P	Plus 4)						
Employer of Contributor					Occupation					
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip 4)	Code(Plus	Descri	otion o	of Contribution
Enter Grand Total of Part G on Sch	edule II, 1	In-Kind	Contributio	ons De	taile	d				PAGE TOTAL

Summary Page, Section 3.

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate						
	From			То:			
		DATE		AMOUNT			
To Whom Paid	мо	DAY	YEAR				
Mailing Address						\$	0.00
City State Zip Code (Plus 4)				otion of Exp	penditure		
Enter Grand Total of Expenditures	an Pago 1. Poport C	over Dage Item F	`				PAGE TOTAL
	on rage 1, Report C	over rage, Item L				\$	0.00