### **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 :	<b>on</b> 201	110221				Repo			CA	NDII	DATE		СОМ	COMMITTEE					
Name of Filing C	ommittee, Cand	idate or L	obbyis	it:	E	EQUA	۱LI۲	ΓΥ ΡΑ	PAC										
Street Address:	1211 CHES	TNUT STE	REET,S	UITE	605														
City:	PHILADELPH	IIA							State	e:	PA			<b>Zip Code:</b> 19107					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND F		/ PRE-	2.		30 DA PRIMA		Р	OST-	3.		AMENDM REPORT?		Yes	N	0	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND F		/ PRE-	- 5.		30 DA		Р	OST-	6. <b>X</b>		TERMINA REPORT?		Yes	N	0	<b>\</b>
report type)	ANNUAL REPOR	7.	Year	2012					NG ME					PAPER		<b>\</b>	DISK	ETTE	
Name of Office S	ought by Candid	late:							DAT	ΕO	F ELE	CTI	ON	District Number	Office Code	Pai	ty Cod	Cour	
									МО		DAY	Y	EAR					•	
										11		6	2012		(SEE INS	STRUCTI	ONS FOR	CODES	)
Summary of		МО	DA	Y	YEAR				МО		DAY	Y	EAR	FO	R OFFIC	E USE	ONLY		
Expenditures	from:		10	23	20	)12	T	0		11		26	2012						
A. Amount Bro	ught Forward Fr	om Last F	Report					\$				2,	050.00						
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 0.00																			
C. Total Funds Available (Sum Of Lines A and B) \$ 2,050.00																			
D. Total Expenditures (From Schedule III)					\$				1,	000.00									
E. Ending Cash Balance (Subtract Line D From Line C)						\$				1,	050.00								
F. Value Of In-	Kind Contributio	ns Receiv	ed (Fr	om Sc	hedul	e II)		\$					0.00						
G. Unpaid Debt	s And Obligation	ns (From	Schedu	ıle IV	)			\$					0.00		•				
					AFFI	ΙDΑ	VI٦	ΓSE	CTI	NC									
PART I - If this is				_									_						
I swear (or affirm) correct and comple		ncluding th	e attach	ned sch	edules	filed	on p	paper	or by e	electr	ronic m	ediun	n, are to t	he best of	my knov	vledge	and be	ief , tr	ue
Sworn to and subs	cribed before me to day of	his	20							,			Signature	of Perso	n Submitt	ing Re	oort		_
	Signa	ture	_					-						Print	ted Name				_
My Commission Ex	pires							_		•				Emai	I				
	МО	D	AY		YR						Ar	ea Co	de	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a ca	ndidate's	autho	rized	Comm	ittee	, Ca	ndid	ate sl	halls	sign h	ere.							
I swear (or affirm) No 320) as amende		f my knowl	edge ar	nd belie	ef this p	politio	cal	comm	ittee h	as no	ot viola	ted a	ny provis	ions of the	e act of Ju	ine 3,1	937 (P.	L. 133	3,
Sworn to and subsc		is											s	ignature o	f Candida	ite			_
-	day of		_ 20 _											Printe	d Name				-
	Signatur	e						-							_				_
My Commission Exp	ires													Emai	il				
	МО	D	AY		YR						Area	Code		Da	ytime Te	elephoi	ne Num	ber	_

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
EQUALITY PA PAC	From:	10/23/2012	<u>2</u> To:	11/26/2012
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

Name of Filing Committe	e or Candidate		Reporting				
			From: To				
		L		DATE			AMOUNT
Full Name of Contributing (	Committee		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.

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 Committee or Candid	Name of Filing Committee of Canadate			Reporting Period From: To:					
					DATE		AN	4OUNT	
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address							\$ \$	0.00	
City	State	Zip Code (Plus 4)	1						

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

**PAGE TOTAL \$**0.00

#### **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 Candi	date		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	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	ame of Filing Committee or Candidate		Rep	orting Pe	riod				
			Fror	n:		То	То:		
				D	ATE		АМО	UNT	
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plu	s 4)						
Employer Name				Occupation					
Employer Mailing Address/Principal Plac Business	e of	City		•	State		Zip Code (	Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page	Section	on 3.			PAG	<b>E TOTAL</b> 0.00	

## 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 Car	ndidate		Report	ing Perio	od			
			From:			To:		
				D	ATE		A	MOUNT
Full Name				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	·	·						
Enter Grand Total of Part E on	Schedule T. Detailed	d Summary Page	Section	4			P	AGE TOTAL
	2, <b>200</b> 0000		22300				\$	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 Peri	od	
EQUALITY PA PAC	From:	<u>10/23/2012</u> <b>To:</b>	11/26/2012
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTO	R	
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 Candid	ate		Reporting	g Period			
			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	ле Г		PAGE TOTAL
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	,		PAGE TOTAL
						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate				Re	porting P	Period			
				Fro	om:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occupa	tion			
Employer Mailing Address/Principal Plac Business	ce of Cit	ity	State		Zip 4)	Code(Plus	Descri	ption o	f Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-K	Kind (	Contributions De	etaile	ed				PAGE TOTAL 0.00

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporti	ng Period			
EQUALITY PA PAC	From	10/23	<u>3/2012</u>	То:	11/26/2012
		DATE			AMOUNT
To Whom Paid SANTARSERIO FOR STATE REPRESENTATIVE	мо	DAY	YEAR		

To Whom Paid SANTARSERIO FOR STATE RI	NTARSERIO FOR STATE REPRESENTATIVE						
Mailing Address 16 SOUTH MAIN STREET				26	2012	\$	1,000.00
City YARDLEY	State PA	<b>Zip Code (Plus 4)</b> 19067	1 '	otion of Exp			
Fatou Consul Total of Famou							
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	1,000.00