#### **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 8100	237			Rep File			CA	NDI	DATE		COM	MITTEE	<b>Y</b>	LOE	PET	31	
Name of Filing C	ommittee, Candid	ate or L	obbyist:		Apar	rtme	ent As	ssocia	ation	of Pe	nnsy	/Ivania						
Street Address:	One Bala Plaz	a,Suite	515															
City:	Bala Cynwyd							State	e:	PA			<b>Zip Code:</b> 19004					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2	2.	30 DA		F	POST-	3. <b>X</b>		AMENDN REPORT		Yes		No	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	<u>-</u> 5	5.	30 DA		F	POST-	6.		TERMINATION REPORT?		Yes		No	<b>\</b>
report type)	ANNUAL REPORT	7.	<b>Year</b> 2013					NG ME					PAPER		$  \checkmark  $	DI	SKET	ΓΕ
Name of Office S	ought by Candida	te:						DAT	ΈO	F ELE	CTI	ON	District Number	Office Code	Pa	rty C	ode C	ounty ode
								МО		DAY	Y	EAR			·		·	
				_					11		5	2013		(SEE IN	STRUCT	IONS	FOR CO	DES)
Summary of Expenditures	Receipts and	МО	DAY	YEAR		_	_	МО		DAY	Y	EAR	FC	R OFFI	CE US	E ON	ILY	
expenditures	irom:		5 7	2	013	Т	0		6		10	2013						
A. Amount Bro	ught Forward Fror	n Last R	eport				\$					246.00						
B. Total Moneta	ary Contributions	And Rec	eipts (Fron	n Sche	dule	I)	\$					425.00						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$				48,	671.00						
D. Total Expend	ditures (From Sch	edule II	I)				\$				1,	803.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)			\$				46,	868.00						
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedu	le II	)	\$					0.00	-					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	/)			\$					0.00						
				AFF	IDA	\VI	T SE	CTIC	NC									
	s a Committee rep	-	_									_		f my kno	wledge	e and	belief	, true
correct and comple	ete. cribed before me this	_																
	day of		20				_					Signature	of Perso	n Submit	ting Re	eport		
	Signatu	re					_						Prin	ted Name	е			
My Commission Ex	· —						_					_	Ema					
	МО		AY	YR		-					ea Co	de	Daytin	ie Teleph	none N	umbe	er	
	a report of a cand that to the best of n					•				_		ny provis	ions of th	e act of 1	una 3 ·	1027	/D I 1	222
No 320) as amende	ed.	ily Kilowi	suge and ben	ici tilis	pone	icai	Commi	ittee ii	143 11		teu a	ny provis	10113 01 111	e act of 3	une 5,	1337	(1.1.	
SWOFN TO AND SUBSC	ribed before me this day of		20									S	ignature (	of Candid	ate			
							-						Printe	d Name				_
My Commission Exp	Signature ires						_						Ema	il				-
	МО	D.	AY	YR			-			Area	Code	1	D	aytime T	elepho	ne N	umber	-

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

-				
Name of Filing Committee or Candidate	Reporting	g Period		
Apartment Association of Pennsylvania	From:	<u>5/7/201</u>	<u>3</u> To:	6/10/2013
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	) Period	(1)	\$	50.00
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)			\$	375.00
TOTAL for the Reporting	Period	(2)	\$	375.00
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			\$	425.00

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	this Part to itemize on with an aggregate va	-		-			
Name of Filing Comm	nittee or Candidate		Reporting	Period			
			From:		То	:	
		1		DATE			AMOUNT
Full Name of Contribut	ing Committee		МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
	ļ.	·			-1		PAGE TOTAL

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

**PAGE TOTAL**\$ 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 Candidate				Reporting Period					
Apartment Association of Pennsylvan	ia		Froi	m:	<u>5/7/2</u>	2013 <b>T</b> o	6/10/2013		
					DATE		AMOUNT		
Full Name of Contributor Stephanie L Hihn				МО	DAY	YEAR			
Mailing Address 238 Stonegate Circ	le North						<b>\$</b> 100.00		
<b>City</b> Chambersberg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17201		6	10	2013			
Full Name of Contributor Shelley R. Goolman				МО	DAY	YEAR			
Mailing Address 239 Highland Rd	I			6	10	2013	\$ 75.00		
<b>City</b> Hershey	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17033		J	10	2013			
Full Name of Contributor Steven M. Williams				МО	DAY	YEAR			
Mailing Address 5123 S. Deerfield A				6	10	2013	\$ 100.00		
<b>City</b> Mechanicsburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17054		O .	10	2013			
Full Name of Contributor Patricia K. Egenrieder				МО	DAY	YEAR			
Mailing Address 107 Collins Road							\$ 100.00		
<b>City</b> Bainbridge	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17502		6	10	2013			
							PAGE TOTAL		

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

5/18/2024 9:42:30 PM

375.00

#### **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	•			Rep	orting Pe	riod			
				Fror	n:		To	):	
					D	ATE		Α	MOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus	4)					
Employer Name	•	•			Occupa	tion		•	
Employer Mailing Address/Principal Pla Business	ce of		City			State		Zip Coo	de (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Deta	iled Sumr	mary Page,	Section	on 3.			\$	PAGE TOTAL 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	Candidate		Report	ting Perio	od			
			From:			To:		
				D	ATE		AM	OUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	•	•		•	•			
Enter Grand Total of Part E o	on Schedule I. Detailer	d Summary Page	Section	4			PA	GE TOTAL
	,,,	. Junimary 1 ago,	5000.011				\$	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 Per	iod	
Apartment Association of Pennsylvania	From:	<u>5/7/2013</u> <b>To:</b>	6/10/2013
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER 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 Candidat	:e		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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate					Reporting	Period				
					From:			То:		
						DAT	E			AMOUNT
Full Name of Contributor					мо	DAY	,	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(Plus	4)						
Employer of Contributor					Оссир	ation				
Employer Mailing Address/Principal Plad Business	ce of	City	Sta	ite	Zi 4)	p Code(Pl )	us	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, I	n-Kind	Contributions	Deta	ailed					PAGE TOTAL
Summary Page, Section 3.										0.00

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or	Candidate		Reporti	ng Period			
Apartment Association of Pe	ennsylvania		From	<u>5/</u>	7/2013	То:	6/10/2013
				DATE			AMOUNT
<b>To Whom Paid</b> Benninghoff for Representat	ive Committee		мо	DAY	YEAR		
Mailing Address 704 W. L	amb St		6	6	2013	\$	500.00
City Belefont State Zip Code (Plus 4) PA 16823				otion of Exp ution	penditure		
<b>To Whom Paid</b> Friends of Dominic Pileggi	МО	DAY	YEAR				
Mailing Address 323 W. F	ailing Address 323 W. Front Street				2013	\$	1,000.00
<b>City</b> Media	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19063	<b>Descrip</b> contrib	otion of Exp ution	penditure		
<b>To Whom Paid</b> Grell for House	·		МО	DAY	YEAR		
Mailing Address pob 217			6	6	2013	\$	300.00
City Camp Hill	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17001	<b>Descrip</b> contrib	otion of Exp ution	penditure		
<b>To Whom Paid</b> Citizens Bank			МО	DAY	YEAR		
Mailing Address POB 655	0		6	6	2013	\$	3.00
City Providence State Zip Code (Plus 4) RI 02940				otion of Exp ng account			
							PAGE TOTAL
Enter Grand Total of Expe	enditures on Page 1, Re	port Cover Page, Item D	).			<b>\$</b>	1,803.00