#### **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 2013	20190			Rep File			CANI	DII	DATE		COMM	1ITTEE	<b>✓</b>	LOBI	BYIS	Т	
Name of Filing C	ommittee, Candi	date or L	obbyist:	<u> </u>	MCCA	ART	ER, S	STEVE	FR]	IENDS	OF							
Street Address:	211 W WAVE	RLY RD																
City:	GLENSIDE							State:		PA			<b>Zip Code:</b> 19038					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	Y PRE-	2		30 DA		POST- 3. <b>X</b>				AMENDM REPORT?	Yes	$\checkmark$	No		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	Y PRE	- 5		30 DA		P	OST-	6.		TERMINA REPORT?	Yes		No	<b>\</b>	
report type)	ANNUAL REPORT	7.	<b>Year</b> 2013					IG MET CHECK		_			PAPER		$\checkmark$	DIS	KETTE	
Name of Office S	ought by Candida	ate:	•					DATE	OI	F ELE	СТІС	N	District Number	Office Code	Par	ty Co	de Cou	
								МО		DAY	YI	AR			DEN	1	46	
								1	11		5	2013		(SEE INS	TRUCTI	ONS FO	OR CODE	S)
Summary of		МО	DAY	YEAR				МО		DAY	YI	EAR	FO	R OFFIC	E USE	ONL	Υ.	
Expenditures	from:		5 7	20	013	T	0		6		LO	2013						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$				41,	174.72						
B. Total Moneta	ary Contributions	And Rec	eipts (From	Sched	dule :	I)	\$					0.00						
C. Total Funds Available (Sum Of Lines A and B)										41,	174.72							
D. Total Expend	ditures (From Sch	edule II	I)				\$				5	528.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line (	C)			\$				40,6	46.72						
F. Value Of In-	Kind Contribution	s Receiv	ed (From So	chedul	e II)	)	\$					0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	)			\$					0.00						
				AFF:	IDA	VI	ΓSE	CTIO	N									
PART I - If this is			_									_		e •	.1		-11-6 4	
correct and comple	that this report, inc ete.	auding the	attached Scr	iedules	riieu	on i	рарег	ог ву ете	ecur	onic me	earum	, are to t	ne best o	г ту кноч	rieage	anu D	eller , t	rue
Sworn to and subs	cribed before me thi day of	is	20						-		S	Signature	of Perso	n Submitt	ing Rep	ort		
	Signati	ıre					-		•				Print	ted Name				
My Commission Ex	pires						_						Emai	I				
	МО	D	AY	YR						Are	a Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized	Comm	ittee	e, Ca	andid	ate sha	all s	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and beli	ef this	politi	cal	comm	ittee has	s no	ot violat	ed an	ıy provisi	ions of the	e act of Ju	ine 3,1	937 (	P.L. 13	33,
Sworn to and subsc	ribed before me this day of	i	20									Si	ignature o	of Candida	te			_
	— ———						-						Printe	d Name				-
	Signature						-		-									_
My Commission Exp	ires												Emai	il				
	МО	D	AY	YR			•			Area	Code		Da	ytime Te	lephor	ie Nu	mber	_

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
MCCARTER, STEVE FRIENDS OF	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	g 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	g 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	g Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g 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

	this Part to itemize onl with an aggregate val								
Name of Filing Comm	nittee or Candidate		Reporting Period						
			Fr	om:		То	:		
		•			DATE			AMOUNT	
Full Name of Contributi	ing Committee			МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus	4)						
	•	•		•	•	•	$\overline{}$	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 Filling Committee of Candidate				Reporting Period From: To:				
					DATE		Al	MOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	١					

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	ne of Filing Committee or Candidate			Rep	orting Pe					
				Fror	n:		To	То:		
					D	ATE			AMOUNT	
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 C	Code (Plus	4)
Enter Grand Total of Part C on Scho	edule I, Detail	led Sumr	mary Page,	Section	on 3.			\$	PAGE TO	<b>TAL</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	Candidate		Repor	ting Perio	od			
			From:			To:		
			•	D	ATE		А	MOUNT
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. Detailed	l Summary Page	Section	4			P/	AGE TOTAL
	Juliana 1/ Butanet	. January rage,		••			\$	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		
MCCARTER, STEVE FRIENDS OF	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	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 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

### STATEMENT OF EXPENDITURES

Name of Filing Committee or C	andidate		Reporti	ng Period				
MCCARTER, STEVE FRIENDS (	OF		From	From <u>5/7/2013</u> To:				
				AMOUNT				
<b>To Whom Paid</b> Vertical Response	мо	DAY	YEAR					
Mailing Address 50 Beale St. 10th Floor				13	2013	\$	28.00	
City San Francisco	State CA	<b>Zip Code (Plus 4)</b> 94105	<b>Description of Expenditure</b> Marketing Program					
<b>To Whom Paid</b> Markosek for State Legislature	Comm		МО	DAY	YEAR			
Mailing Address P.O. Box 193			5	29	2013	\$	500.00	
City Monroeville State Zip Code (Plus 4) PA 15146			<b>Descri</b> Contrib	ption of Exp oution	enditure			
		l					PAGE TOTAL	

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

528.00