Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification 8100237 Repo							CANDI	COMMIT			ITTEE / LOBBYIST		BYIST				
Name of Filing C	ommittee, Candi	late or L	obbyist:	•	Pen	nsyl	vania	Apartme	ent Ass	ociat	ion						
Street Address:	One Bala Pla	za,Suite	515														
City:	Bala Cynwyd							State:	PA			Zip Cod	ie: 19	9004			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	-	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No		/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	<u>-</u>	5.	30 DA ELECT		POST-	6. X		TERMINA REPORT		Yes	No	•	/
report type)	ANNUAL REPORT	7.	Year 2013					NG METHO				PAPER OI			DISKE	TTE	
Name of Office S	- Sought by Candida	ite:			-			DATE 0	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Coun	
								МО	DAY	YE	AR		15555				
								11		5	2013	(SEE INSTRUCTIONS FOR COD				ODES)	1
	Receipts and	МО	DAY	YEAR	2			МО	DAY	YI	AR	FO	R OFFI	CE USE	ONLY		
Expenditures	irom:		10 22	2	013	T	0	11	:	25	2013						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			36,5	590.00						
B. Total Moneta	ary Contributions	And Rec	eipts (From	Sche	dule	e I)	\$				0.00						
C. Total Funds Available (Sum Of Lines A and B) \$ 36,590.00																	
D. Total Expenditures (From Schedule III) \$ 3,253.00							253.00										
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)			\$			33,3	37.00						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Scl	hedu	le II	I)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)	١			\$				0.00			•			
				AFF	ID/	AVI	ΓSE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign h	ere. 1	If th	nis is	a Can	ndidate re	eport, o	andi	date sig	ın here.					
I swear (or affirm) correct and comple	that this report, inc ete.	luding the	e attached sche	edules	s file	ed on p	paper o	or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , tru	ıe
Sworn to and subs	cribed before me the day of	s	20							S	ignature	of Perso	n Submit	ting Rep	oort		
	Signate	ıre					-					Prin	ted Nam	e			-
My Commission Ex	cpires						_					Ema	il				
	МО	D	AY	YR					Arc	ea Coc	le	Daytim	e Telepi	none Nu	mber		
Part II- If this is	a report of a can	didate's	authorized C	Comn	nitte	ee, Ca	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and belief	f this	poli	itical	commi	ittee has n	ot viola	ted an	y provisi	ions of th	e act of J	une 3,1	937 (P.L.	. 1333	3,
Sworn to and subsc	ribed before me this day of		20								Si	ignature o	of Candid	ate			-
							-					Printe	d Name				-
My Commission Exp	Signature						-					Ema	il				-
,z																	_
	МО	D	AY	YR					Area	Code		Daytime Telephone Number					

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period						
Pennsylvania Apartment Association	From:	10/22/201	<u>l3</u> To:	11/25/2013				
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

	this Part to itemize onl with an aggregate valu	-			-				
Name of Filing Comm	nittee or Candidate		Reporting Period						
		From: T			То	:			
		L			DATE			AMOUNT	
Full Name of Contribut	ing Committee			мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4))						
	•	•				-		DAGE TOTAL	

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 Cand	idate		Rep	Reporting Period				
				From: To			0:	
					DATE		АМ	OUNT
Full Name of Contributor				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.

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			Rep	orting Pe	riod			
			Fror	m:		То	:	
				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	s 4)					
Employer Name		•		Occupat	tion		•	
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	e (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary Page,	Section	on 3.			PA	GE TOTAL
		, 131,				4	•	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 Co	andidate		Report	ting Perio	bd			
			From:			То:		
				D	ATE		AN	10UNT
Full Name				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	•						
Enter Grand Total of Part E or	Schedule T Detaile	d Summary Page	Section	4			PA	GE TOTAL
Lines Grana Fotal of Fair 2 of	r benedule 1/ betanet	z Sammary r age,	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 Pe	riod	
Pennsylvania Apartment Association	From:	10/22/2013 To :	11/25/2013
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	rt 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						\$	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:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus	4)					
Employer of Contributor					Occupa	ation			
Employer Mailing Address/Principal Plad Business	ce of	City	Sta	ite	Zip 4)	Code(Plus	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			
Pennsylvania Apartment Asso	ciation		From	10/2	2/2013	То:	11/25/2013
				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
Friends of Senator John Blake							
Mailing Address 321 Spruce	Street ; Suite 604		11	13	2013	\$	500.00
City Scranton	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	18503	fundrai	ser			
To Whom Paid Committee to Elect Rick Mirabi	to		МО	DAY	YEAR		
Mailing Address 17 Center F	Place		11	20	\$	250.00	
City Williamsport State Zip Code (Plus 4)			Descrip	tion of Exp	enditure	•	
PA 17701				ser			
To Whom Paid Committee to Elect Mario Scav	ello		МО	DAY	YEAR		
Mailing Address 430 Frankli	n Church Rd		11	20	2013	\$	500.00
City Dillsburg	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
J	PA	17019	fundraiser				
To Whom Paid Friends of Darrell Clarke			мо	DAY	YEAR		
Mailing Address P.O.B. 6009	93		11	22	2013	\$	1,000.00
City Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	oenditure		
·	PA	19102	fundrai	ser			
To Whom Paid Green for Philadelphia			МО	DAY	YEAR		
Mailing Address P.O.B. 5824	ailing Address P.O.B. 58247			21	2013	\$	1,000.00
City Philadelphia	State	Zip Code (Plus 4)	Descrip	otion of Exp	enditure	•	
	PA	19102	fundrai				

								PAGE 12	
To Whom P Citizens Ba				мо	DAY	YEAR			
Mailing Add	ress P.O.B. 7000)		11	21	2013	\$	3.00	
City Prov	vidence	State	Zip Code (Plus 4)	Description of Expenditure					
	RI 02940 checking account service of					charge			
								PAGE TOTAL	
Enter Gran	nd Total of Expend	litures on Page 1, Re	port Cover Page, Item D	•			\$	3,253.00	