Campaign Finance Report

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

Filer Identification 20110221 Report Filed By: CANDIDATE COMMITTEE LOBBYIST																			
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		EQU	ALI	TY PA	PAC						·					
Street Address:	1211 CHESTN	UT STR	EET,SUITE	605															
City:	PHILADELPHI/	4			State:					PA			Zip Cod	le: 19	9107				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA' PRIMARY	Y PRE	- 2	2.		30 DAY F PRIMARY			OST- 3.			IENT	Yes	No	~		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA' ELECTION	y pre	Ē- 5	5.	30 DA		Р	OST-	6.		TERMINA REPORT?		Yes	No	\		
report type)	ANNUAL REPORT	7. X	Year 2013					OHECK					PAPER	DISKE	TTE				
Name of Office S	- Sought by Candida	te:						DATE	E O	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code		
								МО		DAY	YE	AR		•					
									11		5	2013	(SEE INSTRUCTIONS FOR CODES)						
	Receipts and	МО	DAY	YEAR	ł			МО		DAY	YE	AR	FO	R OFFI	CE USE	ONLY			
Expenditures	s from:	1	11 26	2	013	T	0		12		31	2013							
A. Amount Bro	ught Forward Fron	n Last R	eport				\$				1,0	50.00	1						
B. Total Monetary Contributions And Receipts (From Schedule I) \$											0.00								
C. Total Funds Available (Sum Of Lines A and B)											1,0	50.00							
D. Total Expenditures (From Schedule III) \$											7	02.50							
E. Ending Cash	Balance (Subtract	Line D	From Line (C)			\$				3	47.50							
F. Value Of In-	Kind Contributions	Receive	ed (From S	chedu	le II)	\$					0.00							
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$					0.00							
				AFF	IDA	VI	ΓSE	CTIO	N										
	s a Committee rep	•	_																
I swear (or affirm) correct and comple) that this report, incl ete.	uding the	attached scl	nedule	s filed	l on p	paper	or by e	lectr	onic m	edium	, are to t	he best o	f my kno	wledge a	and belie	ef , true		
Sworn to and subs	cribed before me this day of	•	20								s	ignature	of Perso	n Submit	ting Rep	ort			
	Signatu	re .					-						Prin	ted Name	•				
My Commission Ex	_								-				Ema	il					
	мо	D/	ΑY	YR			_			Are	ea Cod	e	Daytim	e Teleph	one Nu	mber			
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nitte	e, Ca	andid	ate sh	alls	sign he	ere.								
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and beli	ef this	politi	ical	comm	ittee ha	as no	ot viola	ted an	y provisi	ions of the	e act of J	une 3,19	937 (P.L.	1333,		
Sworn to and subsc	ribed before me this											Si	ignature o	of Candid	ate				
	day of —— ————						-						Printe	d Name					
	Signature						-												
My Commission Exp	ires												Ema	il					
	МО	D/	AY	YR	1		•			Area	Code		Da	aytime T	elephon	e Numbe	er		

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
EQUALITY PA PAC	From:	11/26/201	<u>3</u> To:	12/31/2013
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

Name of Filing Committee or Candidate				Reporting Period						
From: To:					:					
	I		DATE			AMOUNT				
ommittee		МО	DAY	YEAR						
					\$	0.00				
State	Zip Code (Plus 4)									
	ommittee	ommittee	ommittee MO	DATE MO DAY	From: To DATE MO DAY YEAR	From: To: DATE Ommittee MO DAY YEAR \$				

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 Ca	Committee of Candidate			oorting P):			
					DATE	-		AMOUNT
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			
			Fron	n:		To) :	
				D	ATE		ı	AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupa	tion			
Employer Mailing Address/Principal Pla Business	ce of	City			State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Scho	edule I, Detailed Su	ımmary 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	ing Perio	od				
			From:			To:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	1		
Mailing Address							\$		0.00
City	State	Zip Code (Plus 4)						
Receipt Description	·	·		•			•		
Enter Grand Total of Part E	on Schedule I. Detailer	l Summary Page.	Section	4.				PAGE TO	ΓAL
- Communication of the Ex	Januara 1/ Betained	. Jaai y 1 ago,	Dection	••			\$		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	
EQUALITY PA PAC	From:	<u>11/26/2013</u> To:	12/31/2013
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

F			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 Candidat	e				Re	porting P	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor	•		•			Occupa	tion			
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, i	In-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or C	andidate		Reporti	ng Period				
EQUALITY PA PAC			From	11/2	5/2013	То:	12/31/2013	
				DATE			AMOUNT	
To Whom Paid FINE PRINT COMMERCIAL PRII	NTERS, INC.		МО	DAY	YEAR			
Mailing Address 287 CHEST	NUT STREET		5	1	2013	\$	102.50	
City MEADVILLE State Zip Code (Plus 4) PA 16335				Description of Expenditure LANGLEY FOR COUNCIL CAMPAIGN CONTRIBUT				
	LANGL	EY FOR CO	UNCIL C	AMPAIGN	CONTRIBUTION			
To Whom Paid FRIENDS OF LORI SCHRIEBER				DAY	YEAR			
Mailing Address 2479 LAFA	YETTE AVENUE		8	28	2013	\$	100.00	
City ROSLYN	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	19001	CAMPA	AIGN CONT	RIBUTIO	N		
To Whom Paid FRIENDS OF ROB TEPLITZ			МО	DAY	YEAR			
Mailing Address P.O. BOX 6	0007		9	18	2013	\$	500.00	
City HARRISBURG	City HARRISBURG State Zip Code (Plus 4)) Description of Expenditure				
	PA 17106				RIBUTIO			
	•	1					PAGE TOTAL	
Enter Grand Total of Expend	ditures on Page 1, Re	port Cover Page, Item [).					

702.50