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 2014	1C1307				port ed B		CAN	IDI	DATE	√	СО	MMITTEE		LOB	BYIST	•	
Name of Filing C	Committee, Candid	late or L	obbyist:		Tho	omas	w w	olf										
Street Address:																		
City:								State	:				Zip Cod	e: 17	7347			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. X	2ND FRIE PRIMARY		-	2.	30 DA		Р	OST-	3.		AMENDME REPORT?	ENT	Yes		lo	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRID		E-	5.	30 DA		Р	OST-	6.		TERMINAT REPORT?	TION	Yes	1 [lo	\
report type)	ANNUAL REPORT	7.	Year 201	.4				CHECK					PAPER		\	DISI	ETTE	
Name of Office S	Sought by Candida	ite:	-					DAT	E OI	F ELE	CTIC	ON	District Number	Office Code	Pai	rty Cod	e Cou	
COVERNOR								МО		DAY	Y	EAR	-1	GOV	DEI	М	67	
GOVERNOR									11		4	2014		(SEE IN	STRUCTI	ONS FO	R CODES	5)
•	Receipts and	МО	DAY	YEAF	₹			МО		DAY	Υ	EAR	FOI	OFFI	CE USE	ONL	1	
Expenditures	s from:		1	1 2	2014	1 T	0		3	;	31	2014						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			(10,0	02,2	250.00)						
B. Total Moneta	ary Contributions	And Rec	eipts (Fro	m Sche	edul	e I)	\$					0.00						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			(10,0	02,2	250.00)						
D. Total Expend	ditures (From Sch	edule II	I)				\$				5,	535.08						
E. Ending Cash	Balance (Subtrac	t Line D	From Lin	e C)			\$			(10,0	07,7	85.08)						
F. Value Of In-	Kind Contribution	s Receiv	ed (From	Schedu	ıle I	Ί)	\$					0.00						
G. Unpaid Debt	ts And Obligations	(From	Schedule	IV)			\$					0.00						
				AFF	-ID	AVI	T SE	CTIO	N									
	s a Committee rep	•	_							•		_						
correct and comple) that this report, inc ete.	luding the	e attached	schedule	s tile	ed on	paper	or by e	lectr	onic m	ediun	n, are to t	he best of	my kno	wledge	and be	elief , ti	rue
Sworn to and subs	cribed before me thi day of	s	20						•		:	Signature	of Person	Submit	ting Re	port		
	Signati	ıre					-		•				Print	ed Name	•			_
My Commission Ex	cpires						_		-				Email					
	МО	D	AY	YR						Are	ea Co	de	Daytime	Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorize	ed Comr	nitte	ee, C	andid	ate sh	all s	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of led.	my knowl	edge and b	elief this	s poli	itical	comm	ittee ha	as no	ot viola	ted a	ny provisi	ions of the	act of J	une 3,1	937 (F	.L. 133	3,
Sworn to and subsc	ribed before me this day of		20									Si	ignature of	Candid	ate			_
							-						Printed	l Name				-
My Commission Exp	Signature						-		-				Email					-
			AV	V						Area	Code		Day	ytime T	elenho	ne Num	her	-
	PIO	D	AY	YF	•					AIEd	Coue		Da	yame I	cichiioi	ie ituli	.DEI	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Detailed Summary 1 ag	_			
Name of Filing Committee or Candidate	Reporting	Period		
Thomas W Wolf	From:	1/1/201	<u>4</u> To:	3/31/2014
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

	art to itemize on an aggregate val	-			•			
Name of Filing Committee or	r Candidate		Re	porting	Period			
			Fr	om:		То	:	
					DATE			AMOUNT
Full Name of Contributing Com	nmittee			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.

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 o	r Candidate		Rep Fro	oorting P	eriod	To	o:	
			l		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 Candidate			Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary 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				Occupat	tion			
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Co	de (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			l	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	bd			
			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. Detaile	d Summary Page	Section	4			PAG	E TOTAL
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	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	i	
Thomas W Wolf	From:	<u>1/1/2014</u> To:	<u>3/31/2014</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER 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						\$	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	Candidate		Reportir	ng Period			
Thomas W Wolf			From	<u>1/:</u>	1/2014	То:	3/31/2014
				DATE			AMOUNT
To Whom Paid Tom Wolf for Governor			МО	DAY	YEAR		
Mailing Address PO Box 17	'07		1	30	2014	\$	181.74
City York	State	Zip Code (Plus 4)	Descrip	otion of Exp	enditure	l	
	PA	174051707	In-Kind				
To Whom Paid Tom Wolf for Governor			МО	DAY	YEAR		
Mailing Address PO Box 17	′07		1	30	2014	\$	3,115.75
City York	State	Zip Code (Plus 4)	Descrip	otion of Exp	enditure	<u>I</u>	
	PA	174051707		l Lodging			
To Whom Paid Tom Wolf for Governor			МО	DAY	YEAR		
Mailing Address PO Box 17			1	30	2014	\$	138.42
City York	State	Zip Code (Plus 4)	Descrip	otion of Exp	enditure	<u>I</u>	
	PA	174051707	In-Kind				
To Whom Paid Tom Wolf for Governor			МО	DAY	YEAR		
Mailing Address PO Box 17	′07		2	25	2014	\$	80.15
City York	State	Zip Code (Plus 4)	Descrip	otion of Exp	enditure		
	PA	174051707		l Lodging			
To Whom Paid Tom Wolf for Governor			МО	DAY	YEAR		
Mailing Address PO Box 17			2	25	2014	\$ \$	80.15
			+				
City York	State	Zip Code (Plus 4)	Danauin	otion of Exp			

174051707

In-Kind Lodging

PΑ

To Whom Paid Tom Wolf for Governor			
Tom World Governor	YEAR		
Mailing Address PO Box 1707 2 25	2014	\$	3.00
City York State PA 2ip Code (Plus 4) Description of Experimental PA 174051707 In-Kind Travel	penditure		
To Whom Paid Tom Wolf for Governor MO DAY	YEAR		
Mailing Address PO Box 1707 2 25	2014	\$	102.65
City York State Zip Code (Plus 4) Description of Experimental PA 174051707 In-Kind Meals	penditure		
To Whom Paid Tom Wolf for Governor MO DAY	YEAR		
Mailing Address PO Box 1707 2 25	2014	\$	171.78
City York State Zip Code (Plus 4) Description of Eyes	enditure		
City York State Zip Code (Plus 4) Description of Experimental Description of Experimental PA 174051707 In-Kind Meals			
PA 174051707 In-Kind Meals	YEAR		
PA 174051707 In-Kind Meals To Whom Paid MO DAY		\$	84.87
To Whom Paid Tom Wolf for Governor PA 174051707 In-Kind Meals MO DAY	YEAR 2014	\$	84.87
To Whom Paid Tom Wolf for Governor Mailing Address PO Box 1707 State PA 174051707 To Whom Paid	YEAR 2014	\$	84.87
To Whom Paid Tom Wolf for Governor Mailing Address PO Box 1707 City York PA To Whom Paid To Whom Paid To Whom Paid To Whom Paid To Whom Paid To Whom Paid To Whom Paid To Whom Paid To Whom Paid To Whom Paid To Whom Paid To Whom Paid To Whom Paid To Whom Paid To Whom Paid To Whom Paid To Whom Paid To Whom Paid To Whom Paid	YEAR 2014 Denditure	\$	84.87 284.79
To Whom Paid Tom Wolf for Governor Mo DAY Mailing Address PO Box 1707 City York To Whom Paid To Whom Paid Tom Wolf for Governor State PA 174051707 To Whom Paid Tom Wolf for Governor Mo DAY Description of Experimental PA 174051707 To Whom Paid Tom Wolf for Governor Mo DAY Mo DAY	YEAR 2014 Penditure YEAR 2014	\$	
To Whom Paid Tom Wolf for Governor Mo DAY Mailing Address PO Box 1707 City York To Whom Paid Tom Wolf for Governor State Zip Code (Plus 4) 174051707 Mo DAY To Whom Paid Tom Wolf for Governor Mo DAY To Whom Paid Tom Wolf for Governor Mo DAY Town Wolf for Governor Town Wolf for Governor Town Wolf for Governor State Zip Code (Plus 4) 174051707 Description of Experiments of Ex	YEAR 2014 Penditure YEAR 2014	\$	
To Whom Paid Tom Wolf for Governor State PA	YEAR 2014 Penditure 2014 Penditure	\$	

							PAGE 13
To Whom Paid Tom Wolf for Governor				DAY	YEAR		
Mailing Address PO Box 1707			3	25	2014	\$	101.64
City York	State PA	Zip Code (Plus 4) 174051707	Description of Expenditure In-Kind Meals				
To Whom Paid Tom Wolf for Governor			МО	DAY	YEAR		
Mailing Address PO Box 1707			3	25	2014	\$	111.87
City York	State PA	Zip Code (Plus 4) 174051707	Description of Expenditure In-Kind Lodging				
To Whom Paid Tom Wolf for Governor			мо	DAY	YEAR		
Mailing Address PO Box 1707			3	25	2014	\$	111.87
City York	State PA	Zip Code (Plus 4) 174051707	Description of Expenditure In-Kind Lodging				
To Whom Paid Tom Wolf for Governor			МО	DAY	YEAR		
Mailing Address PO Box 1707			3	25	2014	\$	111.87
City York	State PA	Zip Code (Plus 4) 174051707	Description of Expenditure In-Kind Lodging				
To Whom Paid Tom Wolf for Governor			МО	DAY	YEAR		
Mailing Address PO Box 1707			3	25	2014	\$	217.36
City York	State PA	Zip Code (Plus 4) 174051707	Description of Expenditure In-Kind Catering				
Enter Grand Total of Expe	enditures on Page 1 Pe	nort Cover Page Item D	_				PAGE TOTAL
Lines Grand Total of Expe	chaitaics on rage 1, Re	port cover rage, item b	•			\$	5,535.08