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	C1092				port ed B		CANE	DIDATE	,	/ co	OMMITTEE		LOBI	BYIST	
Name of Filing C	committee	e, Candida	ate or Lo	obbyist:				YWOC)D								
Street Address:																	
									61-1				7101	10	005		
City:	_			_					State:				Zip Code	: 19	095		
TYPE OF REPORT	6TH TUES PRE-PRIM		1.	2ND FRIDA PRIMARY	Y PRE	-	2. X	30 DA PRIMA		POST-	3		AMENDME REPORT?	NT	Yes	No	*
(place X to the right of	6TH TUES PRE-ELEC		4.	2ND FRIDA ELECTION	y pri	E-	5.	30 DA		POST-	6		TERMINAT REPORT?	ΓΙΟΝ	Yes	No	>
report type)	ANNUAL	REPORT	7.	Year 2014					IG METI				PAPER		✓	DISKE	TTE
Name of Office C	Sauraha hu	Candida		<u> </u>					DATE	OF ELI	ECT	ION	District	Office	Par	ty Code	County
Name of Office S	ougnt by	Candidat	ie:						МО	DAY		YEAR	Number 4	Code STS	DEN	1	Code
SENATOR IN TH	HE GENE	RAL ASSE	MBLY						1	1	4	2014		(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of	Receipts	s and	МО	DAY	YEAR	₹			МО	DAY		YEAR	FOF	OFFIC			,
Expenditures				4 1	2	014	Т	0		5	5	2014					
A. Amount Bro	ught Forv	ward Fron	1 Last R	eport			1	\$				0.00					
B. Total Monet	ary Contr	ibutions A	And Rec	eipts (From	Sche	dule	e I)	\$			1	.1,647.52					
C. Total Funds	Available	(Sum Of	Lines A	and B)				\$			1	.1,647.52					
D. Total Expend	ditures (F	From Sche	edule II	I)				\$			1	1,647.52					
E. Ending Cash	Balance	(Subtract	Line D	From Line	C)			\$				0.00					
F. Value Of In-	Kind Con	tributions	Receive	ed (From S	chedu	le I	I)	\$				0.00					
G. Unpaid Debt	s And Ob	ligations	(From S	Schedule IV	')			\$				0.00		,			
					AFF	-ID	AVI	T SE	CTION	l							
PART I - If this is	s a Comm	ittee repo	ort, trea	surer sign	here.	If th	nis is	a Car	ndidate	report,	caı	ndidate si	gn here.				
I swear (or affirm) correct and comple		report, incl	uding the	attached sc	hedule	s file	ed on	paper	or by ele	ctronic r	nedi	ium, are to	the best of	my know	/ledge	and beli	ef , true
Sworn to and subs	cribed befo	ore me this		20								Signatur	e of Person	Submitt	ing Rep	ort	
	_			_				- -					Printe	ed Name			
My Commission Ex	cpires	Signatur	re										Email				
		мо	D	AY	YR			_		A	rea	Code	Daytime	Telepho	one Nu	mber	
Part II- If this is	a report	of a cand	lidate's	authorized	Comr	nitte	ee, C	andid	ate sha	ll sign l	here	е.					
I swear (or affirm) No 320) as amende		e best of m	ny knowle	edge and beli	ef this	s poli	itical	comm	ittee has	not viol	ated	d any provis	ions of the	act of Ju	ine 3,1	937 (P.L	. 1333,
Sworn to and subsc	ribed befo	re me this										S	ignature of	Candida	te		
	day of			_ 20				_									
		Ci===+-						_					Printed	Name			
My Commission Exp		Signature											Email				
	_	мо	D	AY	YR	₹		-		Area	a Co	de	Day	time Te	lephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	Period		
ART HAYWOOD	From:	4/1/201	<u>4</u> To:	<u>5/5/2014</u>
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)			\$	222.00
TOTAL for the Reporting	Period	(2)	\$	222.00
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)			\$	11,425.52
TOTAL for the Reporting	Period	(3)	\$	11,425.52
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			\$	11,647.52

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candida	te	F	Reporting	Period			
		F	From:		То	!	
		•		DATE			AMOUNT
Full Name of Contributing Committee			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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 or Candidate

ART HAYWOOD

Reporting Period

From: 4/1/2014 To: 5/5/2014

DATE AMOUNT

Full N	ame of Contributor			мо	DAY	YEAR	
ART F	IAYWOOD			140	DAI	ILAK	
Mailin	g Address						\$ 222.00
City	WYNCOTE	State	Zip Code (Plus 4)	2	8	2014	
		PA	19095				

PAGE TOTAL \$ 222.00

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

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		P	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.0
Mailing Address							- \$	0.0
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule 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	ne of Filing Committee or Candidate						
ART HAYWOOD			Fro	m:	4/1/2	<u>014</u> To	: <u>5/5/2014</u>
				D/	ATE		AMOUNT
Full Name of Contributor				МО	DAY	YEAR	
ART HAYWOOD				140	DAI	ILAK	\$ 800.00
Mailing Address				1	22	2014	
City WYNCOTE	State	Zip Code	(Plus 4)				
	PA	19095					
Employer Name HAYWOOD LLC				Occupat	ion	LAWYER	
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip Code (Plus 4)
		PHIL			PA		
Full Name of Contributor		-		мо	DAY	YEAR	
ART HAYWOOD				МО	DAT	ILAK	\$ 2,000.00
Mailing Address				1	28	2014	
City WYNCOTE	State	Zip Code	(Plus 4)	_	20		
	PA	19095					
Employer Name SAME				Occupat	ion	LAWYER	
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip Code (Plus 4)
							_
Full Name of Contributor				мо	DAY	YEAR	\$ 1,500.00
ART HAYWOOD							1,300.00
Mailing Address				1	28	2014	
City WYNCOTE	State	Zip Code	(Plus 4)				
	PA I	19095					
Employer Name SAME				Occupat	ion	LAWYER	
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip Code (Plus 4)
				_			
Full Name of Contributor				мо	DAY	YEAR	\$ 3,263.18
ART HAYWOOD							3,203.10
Mailing Address				2	11	2014	
City WYNCOTE	State	Zip Code	(Plus 4)				
	PA I	19095				<u> </u>	<u> </u>
Employer Name SAME				Occupat	ion	LAWYER	
l Encolous a Martino a Address (Potential Dis-					1	ı	
Employer Mailing Address/Principal Plac	e of Business	City		<u> </u>	State		Zip Code (Plus 4)

Full Name of Contributor				544	\		
ART HAYWOOD			МО	DAY	YEAR	\$	3,162.34
Mailing Address			2	17	2014	1	
City WYNCOTE	State	Zip Code (Plus 4)		1/	2014		
	l _{PA}	19095					
Employer Name SAME			Occupa	tion	LAWYER		
Employer Mailing Address/Prin	cipal Place of Business	City		State		Zip Cod	le (Plus 4)
Full Name of Contributor		-	МО	DAY	VEAD		700.00
Full Name of Contributor ART HAYWOOD			МО	DAY	YEAR	\$	700.00
							700.00
ART HAYWOOD	State	Zip Code (Plus 4)	MO 2	DAY 18	YEAR 2014		700.00
ART HAYWOOD Mailing Address	State PA	Zip Code (Plus 4) 19095					700.00
ART HAYWOOD Mailing Address				18			700.00
ART HAYWOOD Mailing Address City WYNCOTE	PA		2	18	2014		700.00 de (Plus 4)

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL \$ 11,425.52

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 Peri	od			
			From:			To:		
		•		C	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	us 4)					
Receipt Description	•	•			•	•	•	
Futor Curred Total of Bout	Fan Cabadula I. Datailad	Summer Base S	! !	4				PAGE TOTAL
Enter Grand Total of Part	E ON Schedule 1, Detalled	Summary Page, Se	ection	4.			\$	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	
ART HAYWOOD	From:	<u>4/1/2014</u> To:	<u>5/5/2014</u>
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 Candid	ate		Reportin	g Period			
			From:			To:	
		-		DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						7 \$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:	•	-	•	•		•	
Enter Grand Total of Part F on S	chedule II, In-Ki	nd Contributions Detai	led Sum	mary Pag	ge,		PAGE TOTAL
Section 2.						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Per	iod		
ART HAYWOOD	From	4/1/2014	То:	5/5/2014

				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
DAVE DINNO			MO	DAI	ILAK		
Mailing Address			1	22	2014	\$	800.00
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
To Whom Paid	<u> </u>		МО	DAY	YEAR		
CHRIS VISCO			MO	DAI	ILAK		
Mailing Address			1	24	2014	\$	2,000.00
City CONSHOHOCKEN	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA	19428	CONSU	LTING			
To Whom Paid			мо	DAY	YEAR		
BRENDA JACKSON			1-10		I Z A II X		
Mailing Address			1	28	2014	\$	1,500.00
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		19119	CONSU	LTING			
To Whom Paid			мо	DAY	YEAR		
RICHARD CREY			PIO		IZAK		
Mailing Address			2	8	2014	\$	222.00
City	State	Zip Code (Plus 4)	Description of Expenditure PHOTO				
To Whom Paid	-	-	МО	DAY	YEAR		
CHRIS VISCO			МО	DAY	TEAK		
Mailing Address			2	11	2014	\$	3,263.18
City CONSHOHOCKEN	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	19428	CONSU	LTING			
To Whom Paid			МО	DAY	YEAR		
BRENDA JACKSON			1410		ILAK		
Mailing Address			2	17	2014	\$	3,162.34
City PHILADELPHIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA	19119	CONSU	LTING			

To Wh	om Paid			МО	DAY	YEAR	
CHELT	ENHAM PRINTING			МО	DAT	TEAR	
Mailing Address			2	18	2014	\$ 700.00	
City	CHELTENHAM	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure	
		PA	19012	PRINTIN	IG		
_							PAGE TOTAL
nter	Grand Total of Expend	ditures on Page 1, Re	port Cover Page, Item D				\$
nter	Grand Total of Expend	ditures on Page 1, Re	port Cover Page, Item D				\$
inter	Grand Total of Expend	ditures on Page 1, Re	port Cover Page, Item D				\$
Enter	Grand Total of Expend	ditures on Page 1, Re	port Cover Page, Item D				\$ 11,647.52
Enter	Grand Total of Expend	ditures on Page 1, Re	port Cover Page, Item D				\$
Enter	Grand Total of Expend	ditures on Page 1, Re	port Cover Page, Item D				\$