Campaign Finance Report

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

Filer Identificat Number :	ion 2014	C1092			Report Filed B		CANDI	DATE	✓	co	OMMITTEE		LOBE	BYIST			
Name of Filing (Committee, Candida	ate or Lo	obbyist:		ART HA	rwoc)D										
Street Address:																	
City:							State:				Zip Cod	e: 19	095				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-		30 DA PRIMA		POST- 3.		AMENDMENT REPORT?		Yes	No	\checkmark			
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE		30 DA ELECT		POST- 6.		- 6. T				TION	Yes	No	\checkmark
report type)	ANNUAL REPORT	7.	Year 2014				FILING METHOD I () CHECK ONE			PAPER		\checkmark	DISKE	TTE			
Name of Office S	Sought by Candidat	te:								District Number	Office Code	Par	ty Code	County Code			
SENATOR IN T	HE GENERAL ASSE	-MBLY					мо	DAY	YEA	R	4	STS	DEM	1			
SERVICICIA							11		4	2014		(SEE INS	TRUCTIO	ONS FOR	CODES)		
	Receipts and	мо	DAY	YEAR			мо	DAY	YE/	R	FOI	ROFFIC	E USE	ONLY			
Expenditures	s from:		4 1	20	014 T	0	5		5	2014							
A. Amount Bro	A. Amount Brought Forward From Last Report \$ 0.0							0.00									
B. Total Monetary Contributions And Receipts (From Schedule 1									11,64	7.52							
C. Total Funds Available (Sum Of Lines A and B)									11,64	7.52							
D. Total Expen	ditures (From Sche	edule II	I)			\$			11,64	7.52							
E. Ending Cash	Balance (Subtract	t Line D	From Line	C)		\$				0.00	_						
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedul	le II)	\$				0.00							
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	')		\$				0.00							
				AFF	IDAVI	Γ SE	CTION										
	s a Committee repo	•	-					• •		-	-						
I swear (or affirm correct and compl) that this report, incl ete.	uding the	e attached sc	hedules	filed on	paper	or by elect	ronic m	edium, a	are to	the best of	my know	/ledge a	and beli	ef , true		
Sworn to and subs	scribed before me this day of	•	20						Sig	Inatur	e of Person	Submitt	ing Rep	ort			
	Signatu	re				-					Printe	ed Name					
My Commission E	xpires					_					Email						
	мо	D/	AY	YR				Ar	ea Code		Daytime	e Telepho	one Nu	mber			
	a report of a cand) that to the best of m ed.				•					provis	ions of the	act of Ju	ine 3,19	937 (P.L	. 1333,		
Sworn to and subso	cribed before me this									s	ignature of	Candida	te				
	day of					-		Printed Name									
	Signature					-											
My Commission Exp	pires										Email						
MO DAY YR Are						Area	Code		Da	ytime Te	lephon	e Numb	er				

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** ART HAYWOOD From: <u>4/1/2014</u> **To:** <u>5/5/2014</u> 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 222.00 All Other Contributions (Part B) \$ **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 11,425.52 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 11,425.52 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 11,647.52 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

PAGE 3

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 Candidat	e		Reporting Period					
	Fro			From: To:				
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
							Γ	PAGE TOTAL

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

0.00

\$

PART B 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 Candidat	9		Rep	orting Po	eriod				
ART HAYWOOD From: 4/1/2014						2 <u>014</u> To	o: <u>5/5/2014</u>		
					DATE			AMOUNT	
Full Name of Contributor ART HAYWOOD				мо	DAY	YEAR			
Mailing Address 443 RICES MILL							\$	222.00	
City WYNCOTE	State	Zip Code (Plus 4)		2	8	2014			
	PA	19095							
								PAGE TOTAL	
Enter Grand Total of Part A on S	chedule I, Detail	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 Cand	lidate		Reporting Period					
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Commit	ttee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C on	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	0.00

PART D 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	lame of Filing Committee or Candidate			Repo	Reporting Period				
ART HAYWOOD				Fron	n:	<u>4/1/2</u>	<u>014</u> To	5/5/2014	
					DA	ATE		AMOUNT	
Full Name of Contributor ART HAYWOOD					мо	DAY	YEAR		
Mailing 443 RICES MILL								\$ 800.00	
City WYNCOTE	State PA	Zip Code (Plus 4) 19095			1	22	2014		
Employer Name HAYWOOD LLC	HATWOOD LLC				Occupat	t ion	AWYER		
Employer Mailing Address/Principal Plac Business	e of		City		I	State		Zip Code (Plus 4)	
21 S. 12TH11TH FLOOR PHIL.				РА					
Full Name of Contributor ART HAYWOOD			мо	DAY	YEAR				
Mailing 443 RICES MILL								\$ 2,000.00	
City WYNCOTE	State PA	Zip 190	Code (Plus)95	4)	1	28	2014		
Employer Name SAME	I I				Occupation LAWYER				
Employer Mailing Address/Principal Plac Business	e of		City		1	State		Zip Code (Plus 4)	
SAME									
Full Name of Contributor ART HAYWOOD					мо	DAY	YEAR		
Mailing 443 RICES MILL								\$ 1,500.00	
City WYNCOTE	State PA	Zip 190	Code (Plus)95	4)	1	28	2014		
Employer Name SAME			Occupat	ion L	AWYER				
Employer Mailing Address/Principal Plac Business	e of		City			State		Zip Code (Plus 4)	
SAME									

Full Name of Contributor ART HAYWOOD			мо	DAY	YEAR	
Mailing 443 RICES MILL Address						\$ 3,263.18
City WYNCOTE	State	Zip Code (Plus 4)	2	11	2014	
	PA	19095				
Employer Name SAME			Occupat	t ion	AWYER	
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip Code (Plus 4)
SAME						
Full Name of Contributor			мо	DAY	YEAR	
ART HAYWOOD			MO	DAT	TLAK	
Mailing 443 RICES MILL						\$ 3,162.34
City WYNCOTE	State	Zip Code (Plus 4)	2	17	2014	
	РА	19095				
Employer Name SAME			Occupat	tion	AWYER	
Employer Mailing Address/Principal Plac Business	e of	City		State		Zip Code (Plus 4)
SAME						
Full Name of Contributor				DAY	VEAD	
ART HAYWOOD			мо	DAY	YEAR	
Mailing 443 RICES MILL						\$ 700.00
City WYNCOTE	State	Zip Code (Plus 4)	2	18	2014	
	РА	19095				
Employer Name SAME			Occupat	t ion	AWYER	
Employer Mailing Address/Principal Plac Business	e of	City		State		Zip Code (Plus 4)
SAME						
		. .				PAGE TOTAL
Enter Grand Total of Part C on Sche	duie I, Detailed Su	ımmary Page, Sect	ion 3.			\$ 11,425.52

PART E **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			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$	i	0.00
City	State	Zip Code (Plus 4)						
Receipt Description				I					
Enter Grand Total of Part E c	n Schedule I. Detailer	l Summary Page	Section	4				PAGE TOT	AL
	in Schedule I, Detailet	i Summaly Paye,	Section	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		
ART HAYWOOD	From:	<u>4/1/2014</u> то:	<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	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporting Period					
			From:			То:		
				DATE		АМО	UNT	
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 Schedule II, In-Kind Contributions Deta Section 2.				mary Pag	je,	PAGE	TOTAL	
					4	6	0.00	

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SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate					Re	porting P	Period				
					Fro	om:		То:	То:		
							DATE			AMOUNT	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address									\$	0.00	
City	State		Zip Code(P	lus 4)							
Employer of Contributor						Occupa	tion				
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descri	otion	of Contribution	
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In	n-Kind	Contributio	ons De	etaile	ed				PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	ne of Filing Committee or Candidate			Reporting Period					
ART HAYWOOD			From	<u>4/:</u>	<u>1/2014</u>	То:	<u>5/5/2014</u>		
				DATE			AMOUNT		
To Whom Paid DAVE DINNO			мо	DAY	YEAR				
Mailing Address			1	22	2014	\$	800.00		
City	State	Zip Code (Plus 4)	Description of Expenditure						
To Whom Paid CHRIS VISCO			мо	DAY	YEAR				
Mailing Address 4 E. 1ST AVE SUITE	104		1	24	2014	\$	2,000.00		
CityCONSHOHOCKENStateZip Code (Plus 4)PA19428				Description of Expenditure CONSULTING					
To Whom Paid BRENDA JACKSON			мо	DAY	YEAR				
Mailing Address 7015 BOYER ST			1	28	2014	\$	1,500.00		
City	State	Zip Code (Plus 4) 19119	Descrip CONSU	ition of Exp LTING	penditure	2			
To Whom Paid RICHARD CREY			мо	DAY	YEAR				
Mailing Address			2	8	2014	\$	222.00		
City State Zip Code (Plus 4)			Descrip PHOTO	tion of Exp	benditure	3			
To Whom Paid CHRIS VISCO			мо	DAY	YEAR				
Mailing Address 4 E. 1ST AVE SUITE 104			2	11	2014	\$	3,263.18		
City CONSHOHOCKEN State Zip Code (Plus 4) PA 19428			Descrip CONSU	ition of Exp LTING	penditure	۱ <u>ــــــــــــــــــــــــــــــــــــ</u>			

To Whom Paid BRENDA JACKSON				DAY	YEAR			
Mailing Address 7015 BOYER ST			2	17	2014	\$	3,162.34	
City PHILADELPHIA State Zip Code (Plus 4) PA 19119				Description of Expenditure CONSULTING				
To Whom Paid CHELTENHAM PRINTING			мо	DAY	YEAR			
Mailing Address 518 RYERS AVE	BLD 2		2	18	2014	\$	700.00	
City CHELTENHAM	State PA	Zip Code (Plus 4) 19012	Descrip PRINTI	ition of Exp NG	penditure	I		
Enter Grand Total of Expenditur	es on Page 1 Re	nort Cover Page Item D					PAGE TOTAL	
					\$	11,647.52		