

Campaign Finance Report

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

Filer Identification Number : 20140013		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: KRAWCHUK '14											
Street Address: 117 WEST AVENUE											
City: ELKINS PARK					State: PA		Zip Code: 19027				
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1. <input checked="" type="checkbox"/>	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2014	FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/>		DISKETTE			
Name of Office Sought by Candidate:					DATE OF ELECTION			District Number	Office Code	Party Code	County Code
					MO	DAY	YEAR	LIB			
					11	4	2014	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		1	1	2014		3	31	2014			
A. Amount Brought Forward From Last Report					\$ 0.00						
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 1,478.09						
C. Total Funds Available (Sum Of Lines A and B)					\$ 1,478.09						
D. Total Expenditures (From Schedule III)					\$ 170.85						
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 1,307.24						
F. Value Of In-Kind Contributions Received (From Schedule II)					\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)					\$ 0.00						

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
KRAWCHUK '14	From: <u>1/1/2014</u> To: <u>3/31/2014</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 418.09

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)	\$ 1,060.00
TOTAL for the Reporting Period (2)	\$ 1,060.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 1,478.09
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

PAGE TOTAL	
\$	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 Candidate KRAWCHUK '14	Reporting Period From: <u>1/1/2014</u> To: <u>3/31/2014</u>
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DATE	AMOUNT
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Full Name of Contributor			MO	DAY	YEAR	\$ 60.00
JARED GOODYEAR						
Mailing Address 235 WINDING WAY						
City	SAYLORSBURG	State	Zip Code (Plus 4)	2	25	2014
		PA	18353			

Full Name of Contributor EDWARD CLIFFORD			MO	DAY	YEAR	\$ 100.00
Mailing Address 23 HAMIL RD			2	25	2014	
City BROOMALL	State PA	Zip Code (Plus 4) 19008				

Full Name of Contributor CHRISTOPHER DREISBACH			MO	DAY	YEAR	\$ 100.00
Mailing Address 4132 MARIETTA AVE			1	19	2014	
City MT. JOY	State PA	Zip Code (Plus 4) 17582				

Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
TIMOTHY CROWLEY							
Mailing Address 3316 CASSIUS ST APT C				3	10	2014	
City	PITTSBURGH	State	Zip Code (Plus 4)				
		PA	15235				

Full Name of Contributor				MO	DAY	YEAR	\$	50.00
WILLIAM SLOANE								
Mailing Address				3	31	2014		
417 W. SOUTH ST								
City		State	Zip Code (Plus 4)					
CARLISLE		PA	17013					

Full Name of Contributor			MO	DAY	YEAR	\$ 250.00
BARRY DIVELY						
Mailing Address			3	31	2014	
22 FIELDSTONE DR						
City	State	Zip Code (Plus 4)				
MECHANICSBURG	PA	17050				

Full Name of Contributor			MO	DAY	YEAR	\$ 50.00
STEVE SCHEETZ						
Mailing Address			3	31	2014	
68 LAVENDER LA						
City	LEVITTOWN	State				
		PA				
		Zip Code (Plus 4)				
		19054				

Full Name of Contributor				MO	DAY	YEAR	\$ 150.00
JOHN GALINAC							
Mailing Address				3	31	2014	
529 N. 2ND ST.							
City	WORMLEYSBURG	State	PA	Zip Code (Plus 4)	17043		

Full Name of Contributor KEN KRAWCHUK			MO	DAY	YEAR	\$ 100.00
Mailing Address 117 WEST AVE			1	2	2014	
City ELKINS PARK	State PA	Zip Code (Plus 4) 19027				

Full Name of Contributor ROSARIO LICCIARDELLO			MO	DAY	YEAR	\$ 100.00
Mailing Address 25 LANCELOT LANE			2	1	2014	
City MOUNT LAUREL	State NJ	Zip Code (Plus 4) 08054				

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

PAGE TOTAL
\$ 1,060.00

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:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					

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

PAGE TOTAL
\$ 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	Reporting Period
	From: To:

				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code (Plus 4)					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 0.00

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	Reporting Period From: To:
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			DATE	AMOUNT
Full Name	MO	DAY	YEAR	
Mailing Address				\$ 0.00
<div style="display: flex; justify-content: space-between;"> City State Zip Code (Plus 4) </div>				
Receipt Description				

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 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	
KRAWCHUK '14		From: <u>1/1/2014</u> To: <u>3/31/2014</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period		(1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period		(2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period		(3)	\$ 0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)			\$ 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: To:

				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.							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:		To:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
KRAWCHUK '14	From <u>1/1/2014</u> To: <u>3/31/2014</u>

DATE				AMOUNT
To Whom Paid CHELTENHAM PRINTING	MO	DAY	YEAR	
Mailing Address 518 RYERS AVENUE BLDG 2	2	20	2014	\$ 118.72
City CHELTENHAM	State PA	Zip Code (Plus 4) 19012	Description of Expenditure DONATION ENVELOPES, BUTTONS	
To Whom Paid TD BANK	MO	DAY	YEAR	
Mailing Address 437 N. SUMNEYTOWN PIKE	2	28	2014	\$ 35.00
City NORTH WALES	State PA	Zip Code (Plus 4) 19454	Description of Expenditure BANK FEE	
To Whom Paid PAYPAL	MO	DAY	YEAR	
Mailing Address 2211 N. FIRST ST.				\$ 17.13
City SAN JOSE	State CA	Zip Code (Plus 4) 95131	Description of Expenditure TRANSACTION FEES	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.				PAGE TOTAL \$ 170.85

