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 :	tion 2014	C1092			Repor Filed		CAND	IDATE	<	CC	OMMITTE	E	LOB	BYIST	
Name of Filing	Committee, Candida	ate or Lo	bbyist:		ART HA	AYWO	OD								-
Street Address:	:														
City:							State:					e: 19	095		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 D. PRIM		POST-	POST- 3. X			ENT	Yes	No	· 🗸
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.					AY TION	POST-	6.		TERMINATION REPORT?		Yes	No	· 🗸
report type)	ANNUAL REPORT	7.	Year 2014				NG METH CHECK O				PAPER		\checkmark	DISKE	TTE
Name of Office	Sought by Candidat	te:					DATE O	OF ELE	СТІО	N	District Number	Office Code	Par	ty Code	County Code
CENATOR IN T							мо	DAY	YE	AR	4	STS	DEN	1	1
SENATOR IN I	THE GENERAL ASSE	IMBLY					11	L	4	2014		(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR	Ł		мо	DAY	YE	AR	FO	R OFFIC	e use	ONLY	
Expenditure	s from:		5 6	2	014 7	Ю	e	5	9	2014					
A. Amount Bro	ought Forward Fron	n Last Re	eport			\$				0.00					
B. Total Mone	tary Contributions /	And Rece	eipts (From	1 Sche	dule I)	\$	5		2,353.22						
C. Total Funds	a Available (Sum Of	Lines A	and B)			\$	5		2,3	53.22					
D. Total Exper	nditures (From Sche	edule III	:)			\$	5		2,3	53.22					
E. Ending Casl	h Balance (Subtract	t Line D I	From Line	C)		\$	5			0.00					
F. Value Of In	-Kind Contributions	Receive	ed (From S	chedu	le II)	\$	5			0.00					
G. Unpaid Deb	ots And Obligations	(From S	chedule IV	')		\$	5			0.00					
				AFF	IDAV	IT SE	CTION								
	is a Committee repo														
correct and comp	n) that this report, incl lete.	uaing the	attached sc	nedule	s filed on	i paper	or by elec	tronic m	eaium,	, are to	the best of	ту кпом	leage	and bei	er, true
Sworn to and sub	scribed before me this day of	5	20					Signature of Person Submitting Report							
	Signatu	re				_					Print	ed Name			
My Commission E	Expires					_					Emai	I			
	МО	DA	Y	YR				Ar	ea Cod	e	Daytime	e Telepho	one Nu	mber	
	s a report of a cand) that to the best of m led.							-		y provis	ions of the	act of Ju	ine 3,1	937 (P.I	1333,
Sworn to and subs					S	ignature o	f Candida	te							
	day of		20								Printee	d Name			
My Commission Ex	Signature					_					Emai	1			
						_									
	МО	MO DAY YR									Da	ytime Te	lephor	e Numb	ber

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** ART HAYWOOD From: <u>5/6/2014</u> **To:** 6/9/2014 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)** 0.00 All Other Contributions (Part B) \$ **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 2,353.22 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 2,353.22 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 \$ 2,353.22 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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 Candidate				Reporting Period						
					From: To:					
		·			DATE			AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4	4)							
								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 Candida	te		Rep	orting P	eriod					
			Fror	From: Te			D:			
					DATE			AMOUNT		
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address	_	_					\$	0.00		
City	State	Zip Code (Plus 4)							
								PAGE TOTAL		
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2. \$ 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		A	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR		0.00	
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
						PAGE TOTAL			
Enter Grand Total of Part C on Sched	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				Rep	eporting Period						
ART HAYWOOD From			From	n:	<u>5/6/2</u>	<u>014</u> То	4 To: <u>6/9/2014</u>				
					DA	ATE			AMOUNT		
Full Name of Contributor					мо	DAY	YEAR		1 461 00		
ART HAYWOOD					MO	DAI		\$	1,461.00		
Mailing Address	-				5	16	2014				
City WYNCOTE	State	Zi	p Code (Plus	4)	5	10					
	_{PA}	19	095								
Employer Name HAYWOOD LLC					Occupat	tion	LAWYEF	ł			
Employer Mailing Address/Principal Pla	ce of Business		City			State		Zip	Code (Plus 4)		
			PHILA			PA		191	107		
Full Name of Contributor					мо	DAY	YEAR				
ART HAYWOOD					MO	DAT	TEAR	\$	892.22		
Mailing Address	_	-			6	6	2014				
City WYNCOTE	State	Zi	p Code (Plus	4)	Ŭ	0					
	PA	19	095								
Employer Name HAYWOOD LLC					Occupat	tion	LAWYEF	ξ			
Employer Mailing Address/Principal Pla	ce of Business		City			State		Zip	Code (Plus 4)		
			PHILA			PA		191	107		
Enter Grand Total of Part C on Sche	dule I, Detailed S	umn	nary Page,	Sectio	on 3.				PAGE TOTAL		
								\$	2,353.22		

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:	From: To:								
				D	ATE			AMOUNT	r	
Full Name				мо	DAY	YEAR	\$		0.00	
Mailing Address										
City	State	Zip Code (Plus 4)							
Receipt Description						1	I			
			- ··					PAGE TO	TAL	
Enter Grand Total of Part E on Sc	nedule I, Detailed	i Summary Page,	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>5/6/2014</u> то:	<u>6/9/2014</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, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate Re			Reporting Period					
	From:			То:				
	DATE			AMOUNT				
Full Name of Contributor	мо	DAY	YEAR					
Mailing Address		_				7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:			1					
Enter Grand Total of Part F on Sched Section 2.	ailed Summary Page,			PAGE TOTAL				
						\$		0.00

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

Name of Filing Committee or Candidate				Reporting Period					
						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 Plac	e of Business	City	State	e Zip	Code(Plus 4)	Descri	ption of Contribution		
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-Kind	d Contributions D	etaile	d			PAGE TOTAL 0.00		

SCHEDULE III STATEMENT OF EXPENDITURES

Name	Name of Filing Committee or Candidate				Reporting Period						
ART HAYWOOD				From	<u>5/(</u>	<u>5/2014</u>	То:	<u>6/9/2014</u>			
				DATE AMOUI							
To Whom Paid				мо	DAY	YEAR					
RADIC) ONE										
Mailing Address				5	16	2014	\$	1,461.00			
City	BALA CYNWD	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
		РА	19004	RADIO	AD						
To Wh	nom Paid			мо	DAY	YEAR					
BRENI	DA JAKSON										
Mailin	g Address			6	6	2014	\$	892.22			
City	PHILADELPHIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
PA 19119					CONSULTING						
								PAGE TOTAL			
Enter	Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	2,353.22			