

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 : 7900271		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: DEMOCRATIC STATE SENATE CAMPAIGN COMMITTEE											
Street Address: 250 STATE ST.											
City: HARRISBURG				State: PA		Zip Code: 17101					
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No <input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7. X	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				
					11	4	2014	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		11	25	2014		12	31	2014			
A. Amount Brought Forward From Last Report					\$ 436.35						
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 26,451.27						
C. Total Funds Available (Sum Of Lines A and B)					\$ 26,887.62						
D. Total Expenditures (From Schedule III)					\$ 25,869.36						
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 1,018.26						
F. Value Of In-Kind Contributions Received (From Schedule II)					\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)					\$ 256,000.00						

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
DEMOCRATIC STATE SENATE CAMPAIGN COMMITTEE	From: <u>11/25/2014</u> To: <u>12/31/2014</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)	\$ 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)	\$ 25,000.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 25,000.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 1,451.27

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.)	\$ 26,451.27
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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:
<div style="display: flex; justify-content: space-between;"> DATE AMOUNT </div>	

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
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 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	Reporting Period
	From: To:

					DATE			AMOUNT	
Full Name of Contributor					MO	DAY	YEAR	\$ 0.00	
Mailing Address									
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 DEMOCRATIC STATE SENATE CAMPAIGN COMMITTEE	Reporting Period From: <u>11/25/2014</u> To: <u>12/31/2014</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee CITIZENS FOR JOHN YUDICHAK				MO	DAY	YEAR	\$ 5,000.00
Mailing Address 116 THOMAS ST				12	30	2014	
City LARKSVILLE	State PA	Zip Code (Plus 4) 187041520					
Full Name of Contributing Committee COMMITTEE TO ELECT WAYNE FONTANA				MO	DAY	YEAR	\$ 10,000.00
Mailing Address PO BOX 96071				12	30	2014	
City PITTSBURGH	State PA	Zip Code (Plus 4) 152260071					
Full Name of Contributing Committee JAY COSTA, JR. FOR STATE SENATE				MO	DAY	YEAR	\$ 10,000.00
Mailing Address 314 NEWPORT RD				12	10	2014	
City PITTSBURGH	State PA	Zip Code (Plus 4) 152213757					

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

PAGE TOTAL
\$ 25,000.00

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	\$ 0.00
Mailing Address							
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 DEMOCRATIC STATE SENATE CAMPAIGN COMMITTEE	Reporting Period From: <u>11/25/2014</u> To: <u>12/31/2014</u>
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				DATE	AMOUNT	
Full Name			MO	DAY	YEAR	
PAYCHEX						
Mailing Address 500 NATIONWIDE DR STE 200			12	29	2014	\$ 1,451.27
City HARRISBURG	State PA	Zip Code (Plus 4) 171109766				
Receipt Description						

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

PAGE TOTAL
\$ 1,451.27

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	
DEMOCRATIC STATE SENATE CAMPAIGN COMMITTEE		From: <u>11/25/2014</u> To: <u>12/31/2014</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:
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			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

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SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
DEMOCRATIC STATE SENATE CAMPAIGN COMMITTEE	From <u>11/25/2014</u> To: <u>12/31/2014</u>

DATE				AMOUNT		
To Whom Paid BUCKS COUNTY COURRIER			MO	DAY	YEAR	\$ 9.99
Mailing Address 8400 BRISTOL PIKE			11	28	2014	
City LEVITTOWN	State PA	Zip Code (Plus 4) 190575117	Description of Expenditure SUBSCRIPTION			
To Whom Paid BUCKS COUNTY COURRIER			MO	DAY	YEAR	\$ 9.99
Mailing Address 8400 BRISTOL PIKE			12	30	2014	
City LEVITTOWN	State PA	Zip Code (Plus 4) 190575117	Description of Expenditure SUBSCRIPTION			
To Whom Paid CITIZENS BANK			MO	DAY	YEAR	\$ 101.20
Mailing Address 134 S 34TH ST			12	17	2014	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191043401	Description of Expenditure SERVICE CHARGE			
To Whom Paid DEER PARK WATER			MO	DAY	YEAR	\$ 7.14
Mailing Address 6661 DIXIE HWY STE 4			12	9	2014	
City LOUISVILLE	State KY	Zip Code (Plus 4) 402583950	Description of Expenditure WATER			
To Whom Paid FITZPATRICK MANHATTAN HOTEL			MO	DAY	YEAR	\$ 420.92
Mailing Address 687 LEXINGTON AVE			12	11	2014	
City NEW YORK	State NY	Zip Code (Plus 4) 100222607	Description of Expenditure TRAVEL EXPENSES			

To Whom Paid GOOGLE			MO	DAY	YEAR	\$ 87.50
Mailing Address			12	4	2014	
City	State	Zip Code (Plus 4)	Description of Expenditure ADVERTISING			
To Whom Paid PAYCHEX			MO	DAY	YEAR	\$ 4,135.54
Mailing Address 500 NATIONWIDE DR STE 200			11	28	2014	
City HARRISBURG	State PA	Zip Code (Plus 4) 171109766	Description of Expenditure TAXES			
To Whom Paid PAYCHEX			MO	DAY	YEAR	\$ 80.92
Mailing Address 500 NATIONWIDE DR STE 200			11	28	2014	
City HARRISBURG	State PA	Zip Code (Plus 4) 171109766	Description of Expenditure WORKERS COMP			
To Whom Paid PAYCHEX			MO	DAY	YEAR	\$ 8,943.94
Mailing Address 500 NATIONWIDE DR STE 200			11	28	2014	
City HARRISBURG	State PA	Zip Code (Plus 4) 171109766	Description of Expenditure PAYROLL			
To Whom Paid PAYCHEX			MO	DAY	YEAR	\$ 304.86
Mailing Address 500 NATIONWIDE DR STE 200			12	10	2014	
City HARRISBURG	State PA	Zip Code (Plus 4) 171109766	Description of Expenditure PAYROLL SERVICES			
To Whom Paid PAYCHEX			MO	DAY	YEAR	\$ 4,183.19
Mailing Address 500 NATIONWIDE DR STE 200			12	17	2014	
City HARRISBURG	State PA	Zip Code (Plus 4) 171109766	Description of Expenditure TAXES			

To Whom Paid PAYCHEX			MO	DAY	YEAR	\$ 82.70
Mailing Address 500 NATIONWIDE DR STE 200			12	17	2014	
City HARRISBURG	State PA	Zip Code (Plus 4) 171109766	Description of Expenditure WORKERS COMP			

To Whom Paid TEODORA RESTAURANT			MO	DAY	YEAR	\$ 129.75
Mailing Address 141 ESAT 57TH ST			12	11	2014	
City NEW YORK	State NY	Zip Code (Plus 4) 10022	Description of Expenditure TRAVEL EXPENSES			

To Whom Paid THIRTY-NINTH STREET STRATEGIES			MO	DAY	YEAR	\$ 6,010.00
Mailing Address 3511 39TH ST NW APT D490			12	11	2014	
City WASHINGTON	State DC	Zip Code (Plus 4) 200163067	Description of Expenditure CONSULTING			

To Whom Paid UBERCONFERENCE			MO	DAY	YEAR	\$ 10.00
Mailing Address			12	15	2014	
City	State	Zip Code (Plus 4)	Description of Expenditure CONFERENCE CALL LINE			

To Whom Paid VERIZON WIRELESS			MO	DAY	YEAR	\$ 1,351.72
Mailing Address PO BOX 4003			11	26	2014	
City ACWORTH	State GA	Zip Code (Plus 4) 301019004	Description of Expenditure PHONE SERVICES			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 25,869.36

SCHEDULE IV
STATEMENT OF UNPAID DEBTS
 Use this Section to itemize all unpaid debts and obligations
 which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate DEMOCRATIC STATE SENATE CAMPAIGN COMMITTEE				Reporting Period From: <u>11/25/2014</u> To: <u>12/31/2014</u>			
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DATE				Outstanding Balance of Debt		
Name of Creditor AFFLERBACH FOR SENATE COMMITTEE			MO	DAY	YEAR	\$ 2,000.00
Mailing Address 1222 LEHIGH ST			10	23	2000	
City ALLENTOWN	State PA	Zip Code (Plus 4) 181033808	Description of Debt LOAN			
DATE				Outstanding Balance of Debt		
Name of Creditor RE-ELECT STEWART COMMITTEE			MO	DAY	YEAR	\$ 4,000.00
Mailing Address PO BOX 2 R.D. 5			10	23	2000	
City JOHNSTOWN	State PA	Zip Code (Plus 4) 159070002	Description of Debt LOAN			
DATE				Outstanding Balance of Debt		
Name of Creditor CONNIE WILLIAMS			MO	DAY	YEAR	\$ 250,000.00
Mailing Address PO BOX 21			3	22	2005	
City HAVERFORD	State PA	Zip Code (Plus 4) 190410021	Description of Debt LOAN			
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.						PAGE TOTAL \$ 256,000.00