

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 : 20130261		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST	
Name of Filing Committee, Candidate or Lobbyist: SCOTT WAGNER FOR SENATE								
Street Address:								
City: YORK				State: PA		Zip Code: 17404		
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 <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. X	Year 2014	FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/>	DISKETTE <input type="checkbox"/>	
Name of Office Sought by Candidate:				DATE OF ELECTION		District Number	Office Code	
				MO	DAY	YEAR	Party Code	County Code
				11	4	2014	REP	
						(SEE INSTRUCTIONS FOR CODES)		
Summary of Receipts and Expenditures from:	MO	DAY	YEAR	TO	MO	DAY	YEAR	
	11	25	2014		12	31	2014	
FOR OFFICE USE ONLY								
A. Amount Brought Forward From Last Report				\$ 24,343.03				
B. Total Monetary Contributions And Receipts (From Schedule I)				\$ 6,755.75				
C. Total Funds Available (Sum Of Lines A and B)				\$ 31,098.78				
D. Total Expenditures (From Schedule III)				\$ 1,479.67				
E. Ending Cash Balance (Subtract Line D From Line C)				\$ 29,619.11				
F. Value Of In-Kind Contributions Received (From Schedule II)				\$ 0.00				
G. Unpaid Debts And Obligations (From Schedule IV)				\$ 319,000.00				

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
SCOTT WAGNER FOR SENATE	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)	\$ 300.00
TOTAL for the Reporting Period (2)	\$ 300.00

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)	\$ 5,000.00
TOTAL for the Reporting Period (3)	\$ 5,000.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 1,455.75

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.)	\$ 6,755.75
---	-------------

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				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 SCOTT WAGNER FOR SENATE	Reporting Period From: <u>11/25/2014</u> To: <u>12/31/2014</u>
---	--

					DATE		AMOUNT		
Full Name of Contributor					MO	DAY	YEAR	\$	200.00
ERIC PORTER									
Mailing Address									
City YORK			State PA	Zip Code (Plus 4) 17404					
Full Name of Contributor					MO	DAY	YEAR	\$	100.00
ALEXANDER MUNRO									
Mailing Address									
City CONESTOGA			State PA	Zip Code (Plus 4) 17516					

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

PAGE TOTAL
\$ 300.00

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 SCOTT WAGNER FOR SENATE	Reporting Period From: <u>11/25/2014</u> To: <u>12/31/2014</u>
---	--

			DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
JEAN REAM				\$ 5,000.00
Mailing Address		12	18	2014
City YORK	State PA	Zip Code (Plus 4) 17408		
Employer Name REAM PRINTING		Occupation EXECUTIVE		
Employer Mailing Address/Principal Place of Business		City YORK	State PA	Zip Code (Plus 4)

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

PAGE TOTAL
\$ 5,000.00

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
SCOTT WAGNER FOR SENATE	From: <u>11/25/2014</u> To: <u>12/31/2014</u>

			DATE			AMOUNT
Full Name			MO	DAY	YEAR	\$
CINCINNATI INSURANCE						
Mailing Address						
City CINCINNATI	State OH	Zip Code (Plus 4) 45250	12	5	2014	
Receipt Description INSURANCE REFUND						

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

PAGE TOTAL
\$ 1,455.75

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	
SCOTT WAGNER FOR SENATE		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 RECIEVED - 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 III

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
SCOTT WAGNER FOR SENATE	From <u>11/25/2014</u> To: <u>12/31/2014</u>

				DATE	AMOUNT			
To Whom Paid				MO	DAY	YEAR	\$	
FACEBOOK				12	1	2014		
Mailing Address				12	1	2014	29.96	
City	MENLO PARK	State	CA	Zip Code (Plus 4)	94025			Description of Expenditure
				ADVERTISING				
To Whom Paid				MO	DAY	YEAR	\$	
JOSEPH GOTHIE				12	2	2014		
Mailing Address				12	2	2014	49.00	
City	YORK	State	PA	Zip Code (Plus 4)	17401			Description of Expenditure
				REIMBURSE - POSTAGE				
To Whom Paid				MO	DAY	YEAR	\$	
LABELS & LISTS				12	2	2014		
Mailing Address				12	2	2014	445.63	
City	BELLEVUE	State	WA	Zip Code (Plus 4)	98004			Description of Expenditure
				VOTER CONTACT INFO.				
To Whom Paid				MO	DAY	YEAR	\$	
ASHLEY SENFT				12	31	2014		
Mailing Address				12	31	2014	83.76	
City	YORK	State	PA	Zip Code (Plus 4)	17403			Description of Expenditure
				REIMBURSE-MILEAGE				
To Whom Paid				MO	DAY	YEAR	\$	
M&T BANK				12	8	2014		
Mailing Address				12	8	2014	8.00	
City	YORK	State	PA	Zip Code (Plus 4)	17401			Description of Expenditure
				ACCOUNT FEE				
To Whom Paid				MO	DAY	YEAR	\$	
MAIL CHIMP				12	18	2014		
Mailing Address				12	18	2014	50.00	
City	ATLANTA	State	GA	Zip Code (Plus 4)	30318			Description of Expenditure
				EMAIL SERVICES				

To Whom Paid PAY PAL			MO 12	DAY 31	YEAR 2014	\$ 813.32
Mailing Address						
City	State	Zip Code (Plus 4)	Description of Expenditure FEES			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 1,479.67

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 SCOTT WAGNER FOR SENATE	Reporting Period From: <u>11/25/2014</u> To: <u>12/31/2014</u>
---	--

				DATE			Outstanding Balance of Debt
Name of Creditor				MO	DAY	YEAR	\$ 319,000.00
SCOTT WAGNER							
Mailing Address				2	18	2014	
City	YORK	State	Zip Code (Plus 4)	Description of Debt			
		PA	17405	LOAN - AGGREGATE			
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL
							\$ 319,000.00