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 20140	C1091			Report Filed B		CANDI	DATE	 	OMMITTE	E	LOB	BYIST		
	Committee, Candida	ate or Lo	obbyist:		SCOTT	-	NER								
Street Address:							C 1-1-1			Zip Cod	17	405			
City:							State:				ie: 17	405			-
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE		30 D/ PRIM	ARY		9ST- 3.		AMENDMENT REPORT?		Y	lo	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	Ξ- 5.		0 DAY POST- 6. X LECTION			TERMINA REPORT?		Yes	١	lo	\checkmark
report type)	ANNUAL REPORT	7.	Year 2014			FILING METHOD I () CHECK ONE						\checkmark	DISK	ETTE	
Name of Office	Sought by Candidat	:e:			_		DATE O	F ELEC	TION	District Number	Office Code	Pa	ty Cod	e Cou Cod	
							мо	DAY	YEAR	28	STS	REF)		
SENATOR IN I	HE GENERAL ASSE	MBLY					11		4 201	4	(SEE INS	TRUCTI	ONS FO	R CODES	5)
Summary of	Receipts and	мо	DAY	YEAR	2		мо	DAY	YEAR	FO	R OFFIC	e use	ONLY	(
Expenditures	s from:	1	.0 21	2	014 T	0	11	2	4 201	4					
A. Amount Bro	ought Forward From	n Last Ro	eport		·	\$	-	(38	33,750.00)					
B. Total Monet	ary Contributions A	And Reco	eipts (From	n Sche	dule I)	\$		49,000.00							
C. Total Funds	Available (Sum Of	Lines A	and B)			\$		(33	34,750.00)					
D. Total Expen	ditures (From Sche	dule II	[)			\$			0.00)					
E. Ending Cash	n Balance (Subtract	Line D	From Line	C)		\$		(33	4,750.00)					
F. Value Of In-	-Kind Contributions	Receive	ed (From S	chedu	le II)	\$			0.00)					
G. Unpaid Deb	ts And Obligations	(From S	chedule IV	')		\$			0.00)					
				AFF	IDAVI	t se	CTION								
	is a Committee repo	•	-					• •		-					
I swear (or affirm correct and compl	i) that this report, inclu lete.	uding the	attached sc	hedule	s filed on	paper	or by elect	ronic me	dium, are to	the best of	f my know	ledge	and be	lief , t	rue
Sworn to and sub	scribed before me this day of		20						Signatu	re of Persor	n Submitt	ing Re	port		-
	Signatur	·e	-			-				Print	ted Name				—
My Commission E	-	-								Emai	il				-
	мо	DA	NY	YR		-		Are	a Code	Daytim	e Teleph	one Nu	mber		_
Part II- If this is	a report of a cand	lidate's a	authorized	Comn	nittee, C	andid	ate shall	sign he	re.						
I swear (or affirm) No 320) as amend) that to the best of m ed.	ıy knowle	dge and beli	ef this	political	comm	iittee has n	ot violat	ed any prov	isions of the	e act of Ju	ine 3,1	937 (P	.L. 133	33,
Sworn to and subse	cribed before me this									Signature o	of Candida	te			-
	day of 		20			-				Printe	d Name				_
	Signature					-								_	
My Commission Ex	pires									Emai	II				
	мо	D/	NY	YR	1	-		Area C	ode	Da	aytime Te	lephor	ne Num	ber	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
SCOTT WAGNER	From:	<u>10/21/201</u>	<u>.4</u> To:	<u>11/24/2014</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g 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	g Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	49,000.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	g Period	(3)	\$	49,000.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)			_	
TOTAL for the Reporting	g Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	49,000.00

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 Sche	Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Se						\$	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				
			Fro	m:		Тс):		
					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, Detail	ed Summary Pag	je, Se	ection 2			\$	0.00	

PAGE 5

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	Name of Filing Committee or Candidate			Reporting						
SCOTT WAGNER				From:	<u>10/21/2014</u> To:			11	<u>11/24/2014</u>	
					DA	TE		A	MOUNT	
Full N	ame of Contributing Committee				мо	DAY	YEAR			
SCOT	T WAGNER FOR SENATE							\$	49,000.00	
Mailii	ng Address				11	24	2014		-,	
City	MANCHESTER	State	Zip Cod	e (Plus 4)		27	2014			
		PA	17345							
			_		_				PAGE TOTAL	
Enter	Grand Total of Part C on Sche	dule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	49,000.00	

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				
			Froi	n:		Т):	
				D	ATE		АМ	IOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Pl	ıs 4)					
Employer Name				Occupation				
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page	e, Sectio	on 3.			P#	AGE 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	Name of Filing Committee or Candidate			Reporting Period					
			From:			То:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (Plus 4)						
Receipt Description	·	•					•		
		_						PAGE TO	TAL
Enter Grand Total of Part E on Sched	ule 1, Detailed Sumn	nary 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 Perio	d	
SCOTT WAGNER	From:	<u>10/21/2014</u> то:	<u>11/24/2014</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			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address] \$	0.0)0
City	State	Zip Code (Plus 4)						
Description of Contribution:								
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	le,	P	AGE TOTAL	_
						\$	0.0	0

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 Scho Summary Page, Section 3.	edule II, In-Kin	d Contributions D	etaile	ed			PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate				Reporting Period				
	From			То:				
				DATE			AMOUNT	
To Whom Paid	мо	DAY	YEAR					
Mailing Address						\$	0.00	
City State Zip Code (Plus 4)				tion of Exp	enditure			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D							PAGE TOTAL	
	JII Page 1, Report C	lover Page, menn i				\$	0.00	