#### STEPHEN N. HUNTINGTON

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Philadelphia, PA 19103
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2012 DEC 11 AM II: 53

FEC MAIL CENTER

December 6, 2012

Certified Mail/Return Receipt Requested Registered Mail/Return Receipt Requested

Federal Election Commission 999 E. Street, N.W. Washington, DC 20463

**Re: Center City West Neighbors PAC** 

To Whom It May Concern:

I am enclosing the Form 3X Report of Receipts and Disbursements for Center City West Neighbors PAC which includes pages 1-5, Schedule A (25 pages, Schedules B, D, E, and F.

The PAC has received \$12,640.00 and, to date, has made no disbursements.

Sincerely yours

STEPHEN N. HUNTINGTON

SNH/pm

**Enclosures** 

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FEC FORM 3X

## **AND DISBURSEMENTS**For Other Than An Authorized Committee

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#### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

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#### For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

# 12030980546

### **DETAILED SUMMARY PAGE** of Receipts

Page 3

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

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#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements		COLUMN A		COLUMN B	
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22.	Transfers to Affiliated/Other Part	- <b>,</b>	ત્વર્થી અના કાર્યો હતા. અને કેર્યાં કેર્યાં કેર્યાં હતા. વર્ષાં મીં હિલ્લા કાર્યોને છાલા અને ઉત્પાદના કરી દેશે ત્રાહું કરવામાં ત્રાહું કરાતા હતું કે કાર્યા હતું કરાતા અને કુલ કેર્યા અનુ છે. કાર્યા અનુ કરાતા હતું કરાતા હતુ ત્રાહું કરાતા કર્યા હતું કરાતા હતું કરાતા હતું કરાતા હતું કરાતા અને કુલ કેર્યા અનુ છે. કરાતા હતું કરાતા હતું ક	in the second se	erland. Manual end bera Ar andreas againtaine sengana province a againse	niiku araa iitaan kada kada ka miiraa kada kada kada kada kada ka
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	(use Schedule F)	internal Specials	વાંત રાત કરિકાન માટે કેલે તાલ મહિલા ભારતી મહાતા છે. જે જાત મહિલા ભારત કરિકો તાલ રાત કરિકાન માટે કેલે તાલ મહિલા ભારતી મહાતા છે. જે જાત મહિલા ભારત કરિકો છે.	ระบารโดยเกลดี เกาะเกรียกละ เกาะสมภาพละ	กลังเกราะที่สี่เรียวการ ตัวเกราะเกิดเกราะที่สี่ใหญ่สมรับแบบคน เราะเกราะ เกราะเกราะ เหตุสามารถการเกราะเกราะ สามารถเกราะ	ille all bankturad an magain com sa
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#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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A. Hailing Address 2201 Pennsylvan City State	ea Orc Zip Code	Date of Receipt
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City Phila (Flate	Zip Code 19103	Amount of Each Receipt this Period
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#### SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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Full Name (Last, First, Middle Initial)  A. HORICET WEIST	Date of Receipt
Mailing Address 1536 Washington Lone City State Zip Code	11 06 2012
Kyclol 12. 19046	Amount of Each Receipt this Period
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Full Name (Last_First, Middle Initial)  B	Date of Receipt
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City Philo State Zip Code 19103	Amount of Each Receipt this Period
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NAME OF COMMUTEE (In Full)	West N	ercypo	nosa PAC	
Full Name (Last, First, Middle Initial)	ARE	U		
· Och	11605		Date of Disbursement  Physical Company Agreement State of the	
Mailing Address	1115		Security (page) (1) The market means and a supplied to the control of the control	
City	State Zip Code			
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Office Sought: House Disbursen Senate	nent For: Primary [***] General			
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├─┤ _	Primary General			
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## SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) FOR LINE NUMBER: (check only one)

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NAME OF COMMITTEE (In Full)					
(e	enter Cutz M	Les Neighbors Pl	HC .		
A. Full Nar	me (Last, First, Midgle Initial) of E	Debtor or Creditor	Nature of Debt (Purpose):		
Mailing Add	ress 1830 R.H.	zip Coples Quare	Reimbursoblear costs incurred for grass roots t Grassprotion purposes		
P	lila ta.	19103	19,5,700		
Secretarily severables	ing Balance Beginning This Period and the second se		·		
A	mount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period		
ในการเพลียนสมเด็จส	an time and including the second seco	The contract of the contract o	11 730 71		
B. Full Nam	ne (Last, First, Middle Initial) of De	ebtor or Creditor	Nature of Debt (Purpose):		
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City	State	Zip Code			
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#### SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

EMIZED INDEPENDENT EXPENDITURES	PAGE OF FORM 3X
CATOR OF COMMITTEE (In Full)  CATOR	FEC IDENTIFICATION NUMBER V
Full Name (Last, First, Middle Initial) of Payee  Mailing Address	Date    Compared to the property of the proper
Type Type	Office Sought: House State: Senate District: President
	Check One: Support Oppose  Disbursement For: Primary General  Other (specify)
Full Name (Last, First, Middle Initial) of Payee  Mailing Address	Date    Company   Company
City State Zip Code  Purpose of Expenditure Category/ Type *** Typ	Office Sought:   House State:   Senate District:   President
	Check One: Support Oppose  Disbursement For: Primary General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	
Under penalty of perjury t certify that the independent expenditures reported herein were no with, or at the request or suggestion of, any candidate or authorized committee or agent of experty committee any political party committee or its agent.  Date	

## ITEMIZED COORDINATED PARTY EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)

ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE 2 U.S.C. §441a(d))  (To be used only by Political Committees in the General Election)  FOR LINE 25 OF FORM 3X					
NAME OF COMMITTEE (In Full) Center Cita	West Wes	hbors PAC			
Has your committee been designated to make coordinated expenditures by a political party committee NO		e			
If YES, name the designating committee:	Meiling Address				
	City	State ZIP (	Code		
Full Name (Last, First, Middle Initial) of Each Payer	9	Purpose of Expenditure	Category/		
Mailing Address	•	Date	Туре		
City Sta	te Zip Code		in mangrava ang sasarang  -  - 		
Name of Federal Candidate Supported Office Sou	ght: House State: District: Presidential	Amount  เกาะเกราะการแก้ง กรุงการกรร	g era skune allares elle mesek		
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Name of Federal Candidate Supported Office Sou	ught: House State: District: Presidential	Amount	*		
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Full Name (Last, First, Middle Initial) of Each Payer	В	Purpose of Expenditure	Category/		
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SUBTOTAL of Expenditures This Page (optional)		generalise in stage stages trape of purpose and stage of the stage of			
TOTAL This Period (last page this line number only)		and a facility of the state of the state of			

3/2005)

#### **Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS** The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery** Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office **Date of Receipt or Postmarked** Other (Specify):