# **Campaign Finance Report**

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificat	ion 2005	5226			Repor Filed I		CANDI	DATE	C	OMMITTE	■ 🗸	LOB	BYIST		
Name of Filing (	Committee, Candid	late or Lo	bbyist:		Local 0	032B	J PA Amei	rican Dr	eam Fu	nd					
Street Address:	25 W 18TH S	Т													
City:	New York						State:	NY		Zip C	Code:	<b>e:</b> 10011			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		2ND FRIDA PRIMARY	Y PRE-	- 2.	30 D. PRIM		POST- 3.			AMENDMENT REPORT?		No	$\checkmark$	
(place X to the right of	6TH TUESDAY PRE-ELECTION		2ND FRIDA ELECTION	Y PRE	- 5. <b>X</b>	30 D. ELEC	AY F TION	POST-	POST- 6.		TERMINATION REPORT?		No	$\checkmark$	
report type)	ANNUAL REPORT	7.	<b>Year</b> 2012				NG METHO CHECK O			PAPE	R		DISKE	TTE	
Name of Office S	⊥ Sought by Candida	te:					DATE O	F ELEC	TION	Distri			rty Code	County Code	
							мо	DAY	YEAR			-		coue	
							11		6 20	)12	(SEE	INSTRUCT	ONS FOR	CODES)	
	Receipts and	мо	DAY	YEAR	1		мо	DAY	YEAR		FOR OFF	ICE USE	ONLY		
Expenditures from:9182012						0	10	2	2 20	)12					
A. Amount Bro	ught Forward Fro	m Last Re	port			\$			28,795.	96					
B. Total Monet	ary Contributions	And Rece	ipts (Fron	1 Sche	dule I)	\$	\$ 0.00								
C. Total Funds	Available (Sum Of	f Lines A	and B)			\$	;		28,795.	96					
D. Total Expen	ditures (From Sch	edule III	)			\$	5		1,000.	00					
E. Ending Cash	Balance (Subtrac	t Line D F	rom Line	C)		\$	5		27,795.	96					
F. Value Of In-	Kind Contribution	s Receive	d (From S	chedu	le II)	\$	5		0.	00					
G. Unpaid Deb	ts And Obligations	(From S	chedule IV	()		\$	5		0.	00					
				AFF	IDAVI	T SE	CTION								
	s a Committee rep	•	-					• •		-					
I swear (or affirm correct and compl	) that this report, inc ete.	luding the	attached sc	hedules	s filed on	paper	or by elect	ronic me	dium, are	to the bes	t of my kr	nowledge	and beli	ef , true	
Sworn to and subs	scribed before me this day of	s	20			_			Signa	ture of Per	son Subm	nitting Re	port		
	Signatu	ire				_				Р	rinted Na	me			
My Commission E	xpires					_				E	mail				
	мо	DA	Y	YR				Area	a Code	Day	time Tele	phone Nu	ımber		
Part II- If this is	a report of a can	didate's a	uthorized	Comm	nittee, C	Candid	late shall	sign he	re.						
I swear (or affirm) No 320) as amend	) that to the best of r ed.	ny knowle	dge and beli	ef this	political	comn	nittee has n	ot violate	ed any pro	ovisions of	the act of	f June 3,1	.937 (P.L	1333,	
Sworn to and subso	cribed before me this day of		20							Signatur	e of Cand	idate			
day of 20						_				Pri	nted Nam	e			
My Commission Exp	Signature					-				E	nail				
						_									
	мо	DA	Y	YR				Area C	ode		Daytime	Telepho	ne Numb	er	

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Detailed Summary Page				
Name of Filing Committee or Candidate	Reporting	Period		
Local 0032BJ PA American Dream Fund	From:	<u>9/18/201</u>	<u>.2</u> To:	<u>10/22/2012</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)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page			\$	0.00

# 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			Re	porting	Period			
			Fro	om:		То	•	
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
							Γ	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 Candidat	e		Rep	orting P	eriod				
	From: To:						):		
					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 S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	<u>.</u>		\$	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 Cand	Name of Filing Committee or Candidate			J Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Commit	ttee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C on	Schedule I, Detail	ed Summary Pa	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	Reporting Period	
	From:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

## 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 C	andidate		Report	ting Perio	bd			
			From:			То:		
			I	D	ATE		AMOUNT	
Full Name				мо	DAY	YEAR		
Mailing Address							\$ i	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	I				1			
Enter Grand Total of Part E o	- Schodulo I. Dotailoc	l Summary Page	Section	4			PAGE TOT	AL
	i Schedule 1, Detailet	summary raye,	Section				\$	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		
Local 0032BJ PA American Dream Fund	From:	<u>9/18/2012</u> <b>то:</b>	<u>10/22/2012</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 PART	ſ F)		
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, I		\$	0.00

## SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

### VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporting	g Period			
F					То:		
				DATE		АМО	UNT
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address						\$	0.00
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	je,	PAGE	TOTAL
					4	6	0.00

0.00

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

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate					oorting P	Period			
					Fro	From: To:				
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address								\$	0.00	
City	State		Zip Code(P	Plus 4)						
Employer of Contributor						Occupat	tion			
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip 4)	Code(Plus	Descri	otion o	of Contribution
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Det				taile	d				PAGE TOTAL	

Summary Page, Section 3.

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate						
Local 0032BJ PA American Dream Fund	From	<u>10/22/2012</u>					
	DATE AMO						
<b>To Whom Paid</b> Friends of Matt Smith				DAY	YEAR		
Mailing Address P.O. Box 13445			10	11	2012	\$	1,000.00
City Pittsburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15243	· ·	<b>ition of Exp</b> l Contribut		1	
							PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.			).			\$	1,000.00