Campaign Finance Report

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

Filer Identification 8000367 Number :						ported E		CANDI	DATE		СОМ	MITTEE /		LOBE	BYIST		
Name of Filing C	Committee, Candid	ate or L	obbyist:		LOC	AL (0712	IBEW CC	PE								_
Street Address:	217 SASSAFR	AS LAN	E														
City:	BEAVER							State:	PA			Zip Cod	le: 15	5009			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. X	2ND FRIDA' PRIMARY	Y PRE	-	2.	30 DA		POST- 3.			AMENDM REPORT?		Yes	No	•	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA' ELECTION	y pre	≣-	5.	30 DA		POST-	6.		TERMINATION Yes REPORT?				1	
report type)	ANNUAL REPORT	7.	Year 2002					NG METHO				PAPER		/	DISKE	TTE	
Name of Office S	- Sought by Candida	te:						DATE 0	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Count	y
								МО	DAY	YE	AR		1				
								11		5	2002		(SEE IN	STRUCTIO	ONS FOR C	ODES)	
	Receipts and	МО	DAY	YEAR	ł			МО	DAY	YI	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	xpenditures from: 1 1 1 TO 4 1 2002							2002									
A. Amount Bro	ught Forward Fron	n Last R	eport				\$			32,9	965.29						
B. Total Monetary Contributions And Receipts (From Schedule 1						: I)	\$			4,6	526.63						
C. Total Funds Available (Sum Of Lines A and B)							\$			37,5	591.92						
D. Total Expenditures (From Schedule III)							\$			4,2	275.00						
E. Ending Cash Balance (Subtract Line D From Line C)							\$			33,3	16.92						
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedu	le II	()	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$				0.00			•			
				AFF	ID/	۱۷۲	T SE	CTION									
	s a Committee repo	-	_								_		6 may 1 may				
correct and comple) that this report, inclete.	uding the	attached sci	ieauie	s med	u on	paper	or by elect	ronic m	ealum	, are to t	ne best o	г ту кно	wiedge	and bene	er , truc	۹.
Sworn to and subs	cribed before me this day of	i	20							S	Signature	of Perso	n Submit	ting Rep	ort		•
	Signatu	re					_					Prin	ted Name	e			-
My Commission Ex	_											Ema	il				٠
	мо	D	AY	YR					Ar	ea Coc	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nitte	e, C	andid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and beli	ef this	polit	tical	comm	ittee has n	ot viola	ted an	y provis	ions of the	e act of J	une 3,1	937 (P.L.	. 1333,	
Sworn to and subsc	ribed before me this										s	ignature o	of Candid	ate			۱ -
	day of						_		Printed Name								-
	Signature						-										_
My Commission Exp	ires											Ema	il				
	МО	D	AY	YR	l		-		Area	Code		Daytime Telephone Number					

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period						
LOCAL 0712 IBEW COPE	From:	То:	4/1/2002				
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor							
TOTAL for the Reporting	Period (1)	\$	4,626.63				
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)	All Other Contributions (Part B)						
TOTAL for the Reporting Period (2) \$							
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 Pa		\$	4,626.63				

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

			to \$250.00 in the reporting period					
			From: To			o:		
					DATE			AMOUNT
Full Name of Contribut	ing Committee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	•)					
		1			<u> </u>			PAGE TOTAL

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

PAGE TOTAL \$0.00

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 Filling Committee of Candidate			Reporting Period From: To:					
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	١					

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	nme of Filing Committee or Candidate Rep		Reporting	Period				
	From:							
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00

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	ame of Filing Committee or Candidate		Rep	orting Pe	riod			
			Fron	n:	:			
				D	ATE		АМО	DUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address City State Zip Code (Plus 4)							\$	0.00
City	State	Zip Code (Plu	s 4)					
Employer Name				Occupation				
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.				on 3.			PAG	GE TOTAL 0.00

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		Repor	ting Perio	od			
			From:			To:		
			•	D	ATE		AI	MOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	•	•		•		•	•	
Enter Grand Total of Part E o	on Schedule I. Detailed	d Summary Page	Section	4			PA	GE TOTAL
- Inc. Statia Total of Fall E	Jonedane 2, Betanet	. Jammar y r uge,	500.011				\$	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 0712 IBEW COPE	From:	To:	4/1/2002						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR									
TOTAL for the Reporting Pe	\$	0.00							
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)									
TOTAL for the Reporting Pe	eriod (2)	\$	0.00						
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)									
TOTAL for the Reporting Pe	eriod (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,		\$	0.00						

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candid	late		Reportin	g Period			
			From:			To:	
				DATE		AMOUNT	
Full Name of Contributor				DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Inter Grand Total of Part F on Schedule II, In-Kind Contributions Deta			ailed Summary Page,			PAGE TOTAL	
Section 2.						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Re	porting l	Period			
					Fro	om:		То:		
					•		DATE			AMOUNT
Full Name of Contributor						МО	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupa	ition		•	
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iption	of Contribution
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.			ed				PAGE TOTAL 0.00			

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	andidate		Reporti	ng Period				
LOCAL 0712 IBEW COPE			From			То:	4/1/2002	
				DATE			AMOUNT	
To Whom Paid COMMITTEE TO ELECT CAROL	RUCKERT FIORUCCI		мо	DAY	YEAR			
Mailing Address 126 DRAVO	STREET		2	1	2002	\$	200.00	
City VANPORT State Zip Code (Plus 4) PA 15009				Description of Expenditure FUNDRAISER-VEON ROAST				
To Whom Paid MERCER COUNTY CENTRAL LABOR COUNCIL			МО	DAY	YEAR			
Mailing Address 825 DIVISION STREET			2	1	2002	\$	125.00	
City SHARON	State PA	Zip Code (Plus 4) 16146	Description of Expenditure 25 TICKETS FUNDRAISER					
To Whom Paid I.B.E.W. COPE	·		мо	DAY	YEAR			
Mailing Address 1125 15TH	STREET		2	15	2002	\$	3,000.00	
City WASHINGTON	State DC	Zip Code (Plus 4) 20005	1	otion of Exp			BERS	
To Whom Paid FRIENDS OF GUY TRAVAGLIO			МО	DAY	YEAR			
Mailing Address 118 PILLOW STREET			2	15	2002	\$	100.00	
City BUTLER State Zip Code (Plus 4) PA 16001				otion of Exp KETS-FUNI				

To Whom Paid DELUCA FOR SHERIFF COMMITTEE				DAY	YEAR	
Mailing Address 668 MEADOW LANE				15	2002	\$ 500.00
City ROCHESTER	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		

15074

FUNDRAISER-2/28/02

PΑ

To Whom Paid CHRIS SAINATO FOR STATE REPRESENTATIVE			мо	DAY	YEAR		
Mailing Address 607 BARKER AVENUE			3	15	2002	\$	200.00
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101	Description of Expenditure 4 TICKETS FUNDRAISER 4/27/02				
To Whom Paid CRAWFORD COUNTY DEMOCRATIC PARTY			МО	DAY	YEAR		
Mailing Address 309 CHESTNUT STREET			3	15	2002	\$	150.00
City MEADVILLE	State PA	Zip Code (Plus 4) 16335	Description of Expenditure 10 TICKETS FUNDRAISER 3/16/02				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
Lines Grand Fotal of Expend	iitai es on i age 1, Re	port cover i age, item b.	•			\$	4,275.00