

# 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 : 8000367		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: LOCAL 0712 IBEW COPE										
Street Address: 217 SASSAFRAS LANE										
City: BEAVER				State: PA		Zip Code: 15009				
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	No <input checked="" type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.X	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No <input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2002	FILING METHOD ( ) CHECK ONE		PAPER <input checked="" type="checkbox"/>		DISKETTE		
Name of Office Sought by Candidate:				DATE OF ELECTION			District Number	Office Code	Party Code	
				MO	DAY	YEAR				
				11	5	2002	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO		FOR OFFICE USE ONLY			
		1	1	1	10		21 2002			
A. Amount Brought Forward From Last Report				\$ 24,307.09						
B. Total Monetary Contributions And Receipts (From Schedule I)				\$ 1,874.93						
C. Total Funds Available (Sum Of Lines A and B)				\$ 26,182.02						
D. Total Expenditures (From Schedule III)				\$ 16,750.00						
E. Ending Cash Balance (Subtract Line D From Line C)				\$ 9,432.02						
F. Value Of In-Kind Contributions Received (From Schedule II)				\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)				\$ 0.00						

## 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**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
LOCAL 0712 IBEW COPE	<b>From:</b> <b>To:</b> <u>10/21/2002</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 1,874.93

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 0.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 0.00
<b>All Other Contributions (Part D)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 0.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>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.)</b>	\$ 1,874.93
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

<b>PAGE TOTAL</b>	
\$	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	Reporting Period
	From: To:

DATE				AMOUNT
Full Name of Contributor	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 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.

<b>PAGE TOTAL</b>
\$ 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: <span style="float: right;">To:</span>

			DATE	AMOUNT		
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

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

<b>PAGE TOTAL</b>
\$ 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.**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>  <b>From:</b> <b>To:</b>
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			DATE			AMOUNT	
Full Name			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					
Receipt Description							

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

<b>PAGE TOTAL</b>	
\$	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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
LOCAL 0712 IBEW COPE		<b>From:</b>	<b>To:</b> <u>10/21/2002</u>
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)		\$	0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)		\$	0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
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 II**  
**PART G**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OVER \$250.00**

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
LOCAL 0712 IBEW COPE	From To: <u>10/21/2002</u>

DATE				AMOUNT		
To Whom Paid CRAWFORD COUNTY LABOR UNION COUNCIL			MO	DAY	YEAR	\$ 400.00
Mailing Address 287 1/2 CHESTNUT STREET			9	20	2002	
City MEADVILLE	State PA	Zip Code (Plus 4) 16335	Description of Expenditure 10/5/02 FUNDRAISER			
To Whom Paid HOPEWELL DEMOCRATIC COMMITTEE			MO	DAY	YEAR	\$ 120.00
Mailing Address C/O 1301 HORNYAK DRIVE			9	20	2002	
City ALIQUIPPA	State PA	Zip Code (Plus 4) 150014544	Description of Expenditure 10/24/02 FUNDRAISER			
To Whom Paid JEAN JONES FOR STATE REPRESENTATIVE			MO	DAY	YEAR	\$ 500.00
Mailing Address 203 LINDA LANE			9	20	2002	
City MEADVILLE	State PA	Zip Code (Plus 4) 16335	Description of Expenditure CAMPAIGN CONTRIBUTION			
To Whom Paid JEAN JONES FOR STATE REPRESENTATIVE			MO	DAY	YEAR	\$ 30.00
Mailing Address 203 LINDA LANE			9	20	2002	
City MEADVILLE	State PA	Zip Code (Plus 4) 16335	Description of Expenditure 9/29/02 FUNDRAISER			
To Whom Paid MERCER COUNTY CENTRAL LABOR COUNCIL			MO	DAY	YEAR	\$ 200.00
Mailing Address 825 DIVISION STREET			9	20	2002	
City SHARON	State PA	Zip Code (Plus 4) 16146	Description of Expenditure 10/19/02 FUNDRAISER			

To Whom Paid BEAVER COUNTY YOUNG DEMOCRATS			MO	DAY	YEAR	\$ 3,000.00
Mailing Address 109 PAULA DRIVE			9	20	2002	
City ALIQUIPPA	State PA	Zip Code (Plus 4) 15001	Description of Expenditure DONATION			

To Whom Paid IBEW COPE			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 1125 15TH STREET			9	20	2002	
City WASHINGTON	State PA	Zip Code (Plus 4) 20005	Description of Expenditure DONATION MIKE VEON \$500 VINCE BIANCUCCI \$500			

To Whom Paid FRIENDS OF VINCE BIANCUCCI			MO	DAY	YEAR	\$ 500.00
Mailing Address 226 PLEASANT DRIVE			9	27	2002	
City ALIQUIPPA	State PA	Zip Code (Plus 4) 15001	Description of Expenditure 9/26/02 FUNDRAISER - 5 TICKETS			

To Whom Paid CRAWFORD COUNTY DEMOCRATIC COMMITTEE			MO	DAY	YEAR	\$ 300.00
Mailing Address 287 1/2 CHESTNUT STREET			10	11	2002	
City MEADVILLE	State PA	Zip Code (Plus 4) 16335	Description of Expenditure 10/19/02 FUNDRAISER - 10 TICKETS PROGRAM AD			

To Whom Paid LABOR COUNCIL OF BEAVER COUNTY			MO	DAY	YEAR	\$ 500.00
Mailing Address P.O. BOX A			10	11	2002	
City BEAVER	State PA	Zip Code (Plus 4) 15009	Description of Expenditure 10/30/02 FUNDRAISER - 8 TICKETS PROGRAM AD			

To Whom Paid JUDY ENSLEN FOR CLERK OF COURTS COMMITTEE			MO	DAY	YEAR	\$ 200.00
Mailing Address C/O TERESINA MARAVICH 1400 15TH STREET			10	11	2002	
City CONWAY	State PA	Zip Code (Plus 4) 15027	Description of Expenditure 10/26/02 FUNDRAISER - 2 TICKETS			

<b>To Whom Paid</b> I.B.E.W. COPE			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 1125 15TH STREET, N.W.			10	18	2002	
<b>City</b> WASHINGTON	<b>State</b> DC	<b>Zip Code (Plus 4)</b> 20005	<b>Description of Expenditure</b>			
<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b> \$ 16,750.00

