Campaign Finance Report

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

Filer Identificati Number :	on 9900	041				port ed B		CANDI	DATE		СОМ	ITTEE	✓	LOBI	BYIST		
Name of Filing C	Committee, Candid	ate or L	obbyist:		PSS	U LC	DCAL	668 COP	E FUNI	D			_				
Street Address:																	
City:	HARRISBURG							State:	PA			Zip Cod	le: 17	7110			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	- 2	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No	•	/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	-	5.	30 DA ELECT		POST-	6. X		TERMINA REPORT		Yes	No	•	/
report type)	ANNUAL REPORT	7.	Year 2015					IG METHO				PAPER		\	DISKE	TTE	
Name of Office S	Sought by Candida	te:						DATE 0	F ELE	СТІС	N	District Number	Office Code	Par	ty Code	Count	ty
	-							МО	DAY	YI	AR		1			-	
								11		3	2015		(SEE IN	ISTRUCTI	ONS FOR C	ODES)	
Summary of Expenditures	Receipts and from:	МО		YEAR		 _T ,	^	МО	DAY		EAR		R OFFI	CE USE	ONLY		
	ught Forward From		10 20		015	•	U	11		23	2015 175.47						
	ary Contributions		•	Sche	dule	· I)	\$			30,.	0.00						
	Available (Sum Of		• `			,	\$			30,:	 175.47						
D. Total Expend	ditures (From Sch	edule II					\$				00.00	}					
E. Ending Cash	Balance (Subtrac	t Line D	From Line C))			\$			28,1	.75.47	1					
F. Value Of In-	Kind Contributions	s Receiv	ed (From Sch	nedul	le II	[)	\$				0.00	1					
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV)				\$				0.00	<u> </u>					
				AFF	ID/	٩VI	ΓSE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign he	ere. 1	[f th	is is	a Can	ididate re	eport, o	candi	date sig	jn here.					
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	attached sche	dules	filed	d on	paper (or by elect	ronic m	edium	, are to t	the best o	f my kno	wledge	and belie	ef , tru	ıe
Sworn to and subs	cribed before me this day of	5	20							S	Signature	of Perso	n Submit	ting Rep	oort		-
	Signatu	re					-					Prin	ted Name	e			-
My Commission Ex	kpires						_					Ema	il				_
	МО	D	AY	YR					Are	ea Coo	le	Daytim	e Telepi	hone Nu	mber		
Part II- If this is	a report of a can	didate's	authorized C	omm	nitte	e, C	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of red.	ny knowle	edge and belief	this	polit	tical	commi	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L.	1333	۶,
Sworn to and subsc	ribed before me this day of		20								S	ignature o	of Candid	late			-
	<u> </u>						-					Printe	d Name				-
My Commission Exp	Signature pires						-					Ema	il				-
	МО	D	AY	YR			-		Area	Code		Da	aytime T	elephon	ie Numbe	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
PSSU LOCAL 668 COPE FUND	From:	10/20/201	<u>5</u> To:	11/23/2015
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	J 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			\$	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 Candida	te	R	eporting	Period			
		F	rom:		То	:	
		·		DATE			AMOUNT
Full Name of Contributing Committee			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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

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:		To) :	
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
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:			То:			
				DA	TE		P	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			0.00
Mailing Address							- \$		0.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTA	AL
Enter Grand Total of Part C on Sche	dule I, Detailed Sun	nmary P	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	2			Rep	orting Pe	riod			
				Fron	n:		To) :	
					D	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR	\$	0.00
Mailing Address									
City	State	Zi	p Code (Plus	(4)					
Employer Name	•				Occupa	tion	-	-	
Employer Mailing Address/Principal Pl	ace of Business		City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detaile	ed Sumr	mary Page,	Section	on 3.				PAGE 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		Report	ing Peri	od			
			From:			To:		
		'			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	'	1					<u> </u>	
	- C		. .:	_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	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 Peri	od	
PSSU LOCAL 668 COPE FUND	From:	<u>10/20/2015</u> To:	<u>11/23/2015</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTO	١	
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T 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 Candidate			Reporting	g Period				
			From:			To:		
				DATE			AMOUNT	
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 Sche Section 2.	dule II, In-Kind (Contributions Detai	iled Sum	mary Pag	je,		PAGE TOTAL	
						\$	(0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Rep	porting	Period			
				Fro	m:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address				-				\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occup	ation			
Employer Mailing Address/Principal Plac	e of Business	City	у	State	e Zip	Code(Plus 4)	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, In-Kin	nd C	Contributions D	etaile	ed				PAGE TOTAL
Summary Page, Section 3.									0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting F	Period		
PSSU LOCAL 668 COPE FUND	From	10/20/2015	То:	11/23/2015

To Whom Paid THE DAVE CODER CAMPAIGN COMMITTEE
THE DAVE CODER CAMPAIGN COMMITTEE Mailing Address 10 20 2015 \$ 50 City WAYNESBURG State PA 15370 CONTRIBUTION To Whom Paid SENATE DEMOCRATIC CAMPAIGN COMMITTEE Mailing Address 10 20 2015 \$ 1,000 City PHILADELPHIA State Zip Code (Plus 4) Description of Expenditure 10 20 2015 \$ 1,000 PAR To Whom Paid Senate Democratic Campaign Committee MO DAY YEAR To Whom Paid Senate Democratic Campaign Committee Mo DAY YEAR To Whom Paid Senate Democratic Campaign Committee Mo DAY PEAR The Day Description of Expenditure City PHILADELPHIA State Zip Code (Plus 4) Description of Expenditure
THE DAVE CODER CAMPAIGN COMMITTEE Mailing Address 10 20 2015 \$ 50 City WAYNESBURG State PA 15370 CONTRIBUTION To Whom Paid SENATE DEMOCRATIC CAMPAIGN COMMITTEE Mailing Address 10 20 2015 \$ 1,00 DAY YEAR City PHILADELPHIA State Zip Code (Plus 4) Description of Expenditure 2 2 2015 \$ 1,00 DAY PEAR 10 20 2015 \$ 1,00 DESCRIPTION OF EXPENDITURE DESCRIPTION OF EXPENDITURE DESCRIPTION OF EXPENDITURE
City WAYNESBURG State Zip Code (Plus 4) Description of Expenditure PA 15370 CONTRIBUTION To Whom Paid SENATE DEMOCRATIC CAMPAIGN COMMITTEE Mailing Address 10 20 2015 MO DAY YEAR State Zip Code (Plus 4) Description of Expenditure 21 20 2015 To Whom Paid SENATE DEMOCRATIC CAMPAIGN COMMITTEE Mailing Address 22 2015 To Whom Paid SENATE DEMOCRATIC CAMPAIGN COMMITTEE Mailing Address 23 2015 To Whom Paid SENATE DEMOCRATIC CAMPAIGN COMMITTEE Mailing Address 24 2015 Description of Expenditure
To Whom Paid SENATE DEMOCRATIC CAMPAIGN COMMITTEE Mailing Address City PHILADELPHIA PA 15370 CONTRIBUTION MO DAY YEAR 10 20 2015 \$ 1,000 21 2015 \$ 1,000
To Whom Paid SENATE DEMOCRATIC CAMPAIGN COMMITTEE Mailing Address 10 20 2015 \$ 1,000 City PHILADELPHIA State Zip Code (Plus 4) Description of Expenditure
SENATE DEMOCRATIC CAMPAIGN COMMITTEE Mailing Address 10 20 2015 \$ 1,00 City PHILADELPHIA State Zip Code (Plus 4) Description of Expenditure
SENATE DEMOCRATIC CAMPAIGN COMMITTEE Mailing Address 10 20 2015 \$ 1,00 City PHILADELPHIA State Zip Code (Plus 4) Description of Expenditure
City PHILADELPHIA State Zip Code (Plus 4) Description of Expenditure
DA 19103 CONTRIBUTION
FA 19102 CONTRIBUTION
To Whom Paid MO DAY YEAR
FRIENDS OF PATTY KIM
Mailing Address 10 20 2015 \$ 50
City HARRISBURG State Zip Code (Plus 4) Description of Expenditure
PA 17108 CONTRIBUTION
PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. \$ 2,00