Campaign Finance Report

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

Filer Identificat Number :	ion 9900	Report Filed B		CANDI	DATE	сог	IMITTEE	✓	LOBI	BYIST					
	Committee, Candid	ate or L	obbyist:			·	668 COP	E FUND	 >						
Street Address: City:							State:	PA		Zin Co	de: 17	110			
-	HARRISBURG								-	Zip Code: 17110					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. X	2ND FRIDA PRIMARY			30 DA PRIM	ARY	POST- 3.		REPORT	AMENDMENT REPORT?		No	Y	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA	AY PRE	E- 5.	30 D/ ELEC		POST-	POST- 6.		TERMINATION REPORT?		No	· 🗸	
report type)	ANNUAL REPORT	7.	Year 2016				NG METHO			PAPER		\checkmark	DISKE	TTE	
Name of Office	 Sought by Candida	te:					DATE O	F ELEC	CTION	District Number		Par	ty Code	County	
							мо	DAY	YEAR						
							11		8 201	6	(SEE INS	TRUCTI	ONS FOR	CODES)	
	Receipts and	мо	DAY	YEAR	2		мо	DAY	YEAR	F	OR OFFIC	E USE	ONLY		
Expenditure	s from:		1 1	. 2	016 T	0	3	1	7 201	6					
A. Amount Bro	ought Forward From	n Last R	eport			\$			26,925.4	7					
B. Total Monet	tary Contributions	And Rec	eipts (Fron	n Sche	dule I)	\$		0.00							
C. Total Funds	Available (Sum Of	f Lines A	and B)			\$			26,925.4	7					
D. Total Exper	nditures (From Sch	edule II	I)			\$			5,305.9	2					
E. Ending Casl	h Balance (Subtrac	t Line D	From Line	C)		\$			21,619.5	5					
F. Value Of In	-Kind Contributions	s Receiv	ed (From S	Schedu	le II)	\$			0.0	2					
G. Unpaid Deb	ts And Obligations	(From S	Schedule I\	/)		\$			0.0	0					
				AFF	IDAVI	T SE	CTION								
	is a Committee rep		-					• •		-					
I swear (or affirm correct and comp	 that this report, include lete. 	luding the	e attached so	hedule	s filed on	paper	or by elect	ronic me	edium, are t	o the best o	of my knov	vledge	and beli	ef , true	
Sworn to and sub	scribed before me this day of	5	20						Signatu	ire of Perso	on Submitt	ing Rep	oort		
						-				Prir	nted Name				
My Commission E	Signatu Expires	re								Ema	ail				
	мо	D	AY	YR		-		Are	a Code		ne Teleph	one Nu	mber		
Part II- If this is	s a report of a can	didate's	authorized	l Comn	nittee, C	andid	ate shall	sign he	ere.						
I swear (or affirm No 320) as amend) that to the best of r led.	ny knowle	edge and bel	ief this	political	comm	ittee has n	ot violat	ed any prov	isions of th	ne act of Ju	ine 3,1	937 (P.I	1333,	
Sworn to and subs	cribed before me this									Signature	of Candida	ite			
	day of 					-				Print	ed Name				
	Signature					-									
My Commission Ex	pires									Ema	ail				
	мо	D	AY	YR	L	-		Area	Code	D	aytime Te	elephon	ne Numb	er	

SCHEDULE I **CONTRIBUTIONS AND RECEIPTS**

Detailed Summary Page

Name of Filing Committee or Candidate	ne of Filing Committee or Candidate Reporting Period									
PSSU LOCAL 668 COPE FUND	From:	<u>1/1/201</u>	<u>6</u> To:	<u>3/7/2016</u>						
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor									
TOTAL for the Reporting	g 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	\$	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	g Period	(3)	\$	0.00						
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)										
TOTAL for the Reporting	g Period	(4)	\$	0.00						
Total Monetary Contributions and Receipts During this Reporting Period (Add ar 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 Candidate				Reporting Period					
				From: To:					
		·			DATE			AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4	4)						
								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 Candida	te		Rep	orting P	eriod				
			Fror	m:		Тс):		
					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	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	2.		\$	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						
				То:					
				DA	TE		A	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR		0.00	
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on Sched	lule I, Detailed Sun	nmary 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						
Fro					From:			To:		
				D	ATE		АМ	IOUNT		
Full Name of Contributor				мо	DAY	YEAR	\$	0.00		
Mailing Address										
City	State	Zip Code (Pl	ıs 4)							
Employer Name				Occupation						
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)		
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page	e, Sectio	on 3.			P#	AGE TOTAL 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.

Name of Filing Committee or Candidat	Name of Filing Committee or Candidate			Reporting Period					
				From: To:					
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$	0	.00
Mailing Address									
City	State	Zip Code (Plus 4)						
Receipt Description									
		- -	o					PAGE TOTAL	
Enter Grand Total of Part E on Sche	ule I, Detailed	Summary Page,	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 Period		
PSSU LOCAL 668 COPE FUND	From:	<u>1/1/2016</u> то:	<u>3/7/2016</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	「 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, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate Re			Reporting Period					
F			From:			То:		
				DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address		_				7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:			1					
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,		PAGE TOTA	AL.
						\$		0.00

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

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

SCHEDULE III STATEMENT OF EXPENDITURES

Name	e of Filing Committee or Candidat	te		Reportin	ng Period					
PSSU	ULOCAL 668 COPE FUND			From	From <u>1/1/2016</u>			<u>3/7/2016</u>		
					DATE		AMOUNT			
To Wh	nom Paid			мо	DAY	YEAR				
FRIEN	IDS OF MARY JO DALEY									
Mailin	g Address			2	12	2016	\$	1,000.00		
City	CONSHOHOCKEN	State	Zip Code (Plus 4)	Description of Expenditure						
PA 19428				CONTRIBUTION						
-	To Whom Paid KEVIN SCHREIBER FOR YORK			мо	DAY	YEAR				
Mailin	g Address			2	29	2016	\$	1,000.00		
City	YORK	State	Zip Code (Plus 4)	Descript	L tion of Exp	enditure	I			
		PA	17405	CONTRI	BUTION					
To Wh	nom Paid			мо	DAY	YEAR				
PSSU	COPE FUND COLLECTIONS ACC	OUNT		MO	DAT	YEAK				
Mailin	g Address			3	3	2016	\$	3,305.92		
City	HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
		PA	17110		ER TO CO NG ACCOU		RTAGE I	N COLLECTIONS		
								PAGE TOTAL		
Enter	Grand Total of Expenditures	; on Page 1, R	leport Cover Page, Item I).			\$	5,305.92		