

# 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: 15009-0000				
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. X	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No <input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2016	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	County Code
				MO	DAY	YEAR				
				11	8	2016	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY	
		5	17	2016	TO	9	19	2016		
A. Amount Brought Forward From Last Report					\$ 16,112.96					
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 0.00					
C. Total Funds Available (Sum Of Lines A and B)					\$ 16,112.96					
D. Total Expenditures (From Schedule III)					\$ 3,825.00					
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 12,287.96					
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	From: <u>5/17/2016</u> To: <u>9/19/2016</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 0.00

<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>	\$ 0.00
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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
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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	
Mailing Address						\$ 0.00
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.**

Name of Filing Committee or Candidate	Reporting Period  From: <span style="float: right;">To:</span>
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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		From: <u>5/17/2016</u> To: <u>9/19/2016</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: <span style="float: right;">To:</span>
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			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.						<b>PAGE TOTAL</b>  \$ 0.00



# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
LOCAL 0712 IBEW COPE	From <u>5/17/2016</u> To: <u>9/19/2016</u>

DATE				AMOUNT			
To Whom Paid Huntington Bank				MO	DAY	YEAR	\$ 3.00
Mailing Address P.O. Box 1558 EA1W37				5	17	2016	
City Columbus		State OH	Zip Code (Plus 4) 43216	Description of Expenditure Bank service charge			
To Whom Paid John Kochanowski				MO	DAY	YEAR	\$ 10.00
Mailing Address 623 Frankfort Road				5	31	2016	
City Monaca		State PA	Zip Code (Plus 4) 15061	Description of Expenditure Notary Fee Reimbursement			
To Whom Paid Huntington Bank				MO	DAY	YEAR	\$ 3.00
Mailing Address P.O. Box 1558 EA1W37				6	15	2016	
City Columbus		State OH	Zip Code (Plus 4) 43216	Description of Expenditure Bank service charge			
To Whom Paid Friends of Longietti				MO	DAY	YEAR	\$ 300.00
Mailing Address 3660 Clearview Drive				6	28	2016	
City Hermitage		State PA	Zip Code (Plus 4) 16148	Description of Expenditure 10 tickets to fundraiser			
To Whom Paid Run With Rossi				MO	DAY	YEAR	\$ 300.00
Mailing Address 162 Cedar Ridge Drive				6	28	2016	
City Monaca		State PA	Zip Code (Plus 4) 15061	Description of Expenditure 2 tickets to fundraising reception			

To Whom Paid Huntington Bank			MO	DAY	YEAR	\$ 3.00
Mailing Address P.O. Box 1558 EA1W37			7	15	2016	
City Columbus	State OH	Zip Code (Plus 4) 43216	Description of Expenditure Bank service charge			

To Whom Paid Amadio for Commissioner			MO	DAY	YEAR	\$ 350.00
Mailing Address 263 Patton Drive			7	25	2016	
City Aliquippa	State PA	Zip Code (Plus 4) 15001	Description of Expenditure 2 tickets to fundraising event			

To Whom Paid Erie Crawford CLC			MO	DAY	YEAR	\$ 50.00
Mailing Address 32 W. 8th St. Suite 604			7	25	2016	
City Erie	State PA	Zip Code (Plus 4) 16501	Description of Expenditure 4 Tickets to legislative picnic			

To Whom Paid Friends of Jared Gibbons			MO	DAY	YEAR	\$ 500.00
Mailing Address 930 Bridge Street			7	25	2016	
City Ellwood City	State PA	Zip Code (Plus 4) 16117	Description of Expenditure 8 tickets to annual family picnic fundraiser			

To Whom Paid PA AFL-CIO COPE			MO	DAY	YEAR	\$ 250.00
Mailing Address 600 N. 2nd Street			7	25	2016	
City Harrisburg	State PA	Zip Code (Plus 4) 17101	Description of Expenditure Contribution to COPE fundraiser			

To Whom Paid Friends of David A. Rossi			MO	DAY	YEAR	\$ 125.00
Mailing Address 1420 Pacific Avenue			7	25	2016	
City Monaca	State PA	Zip Code (Plus 4) 15061	Description of Expenditure 1 ticket to fundraiser			

<b>To Whom Paid</b> Chris Sainato for State Representative			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 607 Barker Avenue			8	10	2016	
<b>City</b> New Castle	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16101	<b>Description of Expenditure</b> 10 tickets to annual pinic fundraiser			

<b>To Whom Paid</b> Huntington Bank			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 3.00
<b>Mailing Address</b> P.O. Box 1558 EA1W37			8	15	2016	
<b>City</b> Columbus	<b>State</b> OH	<b>Zip Code (Plus 4)</b> 43216	<b>Description of Expenditure</b> Bank service charge			

<b>To Whom Paid</b> Beaver County Democratic Committee			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b> 3645 Broadhead Road			8	22	2016	
<b>City</b> Monaca	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15061	<b>Description of Expenditure</b> Contribution			

<b>To Whom Paid</b> Judy Hines for State Representative			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 891 Old Mercer Road			8	22	2016	
<b>City</b> Mercer	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16137	<b>Description of Expenditure</b> Contribution			

<b>To Whom Paid</b> The Committee to Elect Connie Tuccinard Javens Treasurer			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 125.00
<b>Mailing Address</b> 1120 Don Street			9	7	2016	
<b>City</b> Monaca	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15061	<b>Description of Expenditure</b> Contribution			

<b>To Whom Paid</b> Friends of Jim Marshall			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 200.00
<b>Mailing Address</b> P.O. Box 262			9	7	2016	
<b>City</b> Beaver	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15009	<b>Description of Expenditure</b> Contribution to fundraiser			

<b>To Whom Paid</b> Political Labor Action Now			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b> 904 N. 2nd Street			9	7	2016	
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17102	<b>Description of Expenditure</b> Contribution			

  

<b>To Whom Paid</b> Huntington Bank			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 3.00
<b>Mailing Address</b> P.O. Box 1558 EA1W37			9	15	2016	
<b>City</b> Columbus	<b>State</b> OH	<b>Zip Code (Plus 4)</b> 43216	<b>Description of Expenditure</b> Bank service charge			

  

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 3,825.00

