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 800	0367				port		CANDI	DATE		СОМ	ITTEE	✓	LOBI	BYIST	
Name of Filing C	Committee, Candi	date or L	obbyist:		LOC	AL (0712	IBEW CO	PE			<u> </u>	•			
Street Address: 217 SASSAFRAS LANE																
City:	BEAVER State: PA									Zip Code: 15009-0000						
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE- PRIMARY 2. 30 E								AMENDMENT Yes No REPORT?				~	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA' ELECTION	y pre	≣-	5.	30 DA		POST-	6. X		TERMINA REPORT	No	~		
report type)	ANNUAL REPOR	7.	Year 2017					IG METHO				PAPER		/	DISKE	TTE
Name of Office S	- Sought by Candid	ate:						DATE 0	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code
								МО	DAY	YE	AR		10000	•		
								11		7	2017		(SEE IN	ISTRUCTI	ONS FOR (CODES)
Summary of Expenditures	Receipts and from:	МО	DAY	YEAR		_	•	МО	DAY		AR	FO	R OFFI	CE USE	ONLY	
-			10 24	2	017	•	O	11		27	2017					
	ught Forward Fro ————————ary Contributions			Sche	dule	1)	\$ \$				570.79 180.86	<u> </u>				
	Available (Sum (\$				751.65					
	ditures (From Sc						\$				82.04	-				
E. Ending Cash	Balance (Subtra	ct Line D	From Line (C)			\$			10,7	69.61	1				
F. Value Of In-	Kind Contribution	ns Receiv	ed (From So	chedu	le II	:)	\$				0.00	1				
G. Unpaid Debt	s And Obligation	s (From S	Schedule IV)			\$				0.00			,		
				AFF	ID/	\VI	T SE	CTION								
PART I - If this is	s a Committee re	port, trea	surer sign l	here.	If th	is is	a Car	ididate re	eport, c	andi	date sig	gn here.				
I swear (or affirm) correct and complete) that this report, in ete.	cluding the	e attached sch	nedule	s file	d on	paper	or by elect	ronic m	edium	, are to t	the best o	f my kno	wledge	and beli	ef , true
Sworn to and subs	cribed before me th	is	20							S	ignature	of Perso	n Submit	ting Rep	ort	
	Signat	ure					- -					Prin	ted Name	e		
My Commission Ex	_											Ema	il			
	мо	D	AY	YR					Are	ea Cod	le	Daytim	e Telepi	none Nu	mber	
Part II- If this is	a report of a car	ndidate's	authorized	Comn	nitte	e, C	andid	ate shall	sign he	ere.						
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	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		5									s	ignature o	of Candid	ate		
	day of						_					Printe	d Name			
M. C	Signature	1					-		Email							
My Commission Exp							_					Liila	-			
	МО	D	AY	YR	_ 				Area	Code		Da	aytime T	elephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period							
LOCAL 0712 IBEW COPE From: 10/24/2017 To: 11/3								
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor								
TOTAL for the Reporting	J Period	(1)	\$	2,015.69				
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)	\$	2,165.17						
TOTAL for the Reporting	(2)	\$	2,165.17					
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			\$	4,180.86				

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize on with an aggregate val							
Name of Filing Committee or Candidate			Re	porting	Period			
			Fr	om:		То	:	
					DATE			AMOUNT
Full Name of Contribution	ng Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
	•					-	Г	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 Filing Committee or Candid	Name of Filing Committee or Candidate							
LOCAL 0712 IBEW COPE			From:	10/24/	2017 T o	<u>11/27/2017</u>		
			ı	DATE		AMOUNT		
Full Name of Contributor See Attached 1			МО	DAY	YEAR			
Mailing Address See Attached 1						\$ 250.00		
City See Attached 1	State PA	Zip Code (Plus 4) 15009	11	3	2017			
Full Name of Contributor See Attached 2			МО	DAY	YEAR			
Mailing Address See Attached 2 City See Attached 2	State PA	Zip Code (Plus 4) 15009	11	3	2017	\$ 250.00		
Full Name of Contributor See Attached 3			МО	DAY	YEAR			
Mailing Address See Attached 3						\$ 250.00		
City See Attached 3	State PA	Zip Code (Plus 4) 15009	11	3	2017			
Full Name of Contributor See Attached 4			МО	DAY	YEAR			
Mailing Address See Attached 4 City See Attached 4	State PA	Zip Code (Plus 4) 15009	11	3	2017	\$ 250.00		
Full Name of Contributor See Attached 5			МО	DAY	YEAR			
Mailing Address See Attached 5 City See Attached 5	State PA	Zip Code (Plus 4) 15009	11	3	2017	\$ 250.00		

Full Name of Contributor See Attached 6	мо	DAY	YEAR			
Mailing Address See Attached 6	State	Zip Code (Plus 4)	11	3	2017	\$ 250.00
City See Attached 6	PA	15009				
Full Name of Contributor See Attached 7			МО	DAY	YEAR	
Mailing Address See Attached 7						\$ 250.00
City See Attached 7	State PA	Zip Code (Plus 4) 15009	11	3	2017	
Full Name of Contributor See Attached 8			мо	DAY	YEAR	
Mailing Address See Attached 8						\$ 250.00
City See Attached 8	State PA	Zip Code (Plus 4) 15009	11	3	2017	
Full Name of Contributor See Attached 9			мо	DAY	YEAR	
Mailing Address See Attached 9						\$ 165.17
City See Attached 9	State PA	Zip Code (Plus 4) 15009	11	3	2017	

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

PAGE TOTAL \$ 2,165.17

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.		Α	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 Sci	nedule I, Detail	ed Summary 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				Reporting Period					
						То	То:		
				D/	ATE		АМ	OUNT	
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address							\$	0.00	
City State Zip Code (Plus 4)									
Employer Name				Occupat	tion				
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	(Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.				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 Candid	Name of Filing Committee or Candidate			Reporting Period					
			From:			To:			
				D	ATE			AMOUNT	
Full Name				МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4)						
Receipt Description	·	·					•		
Enter Grand Total of Part E on Sci	nedule T. Detailed	d Summary Page.	Section	4.			I	PAGE TOTAL	
	.caa.ca, Betanet	a cammary rage,		•			\$	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						
LOCAL 0712 IBEW COPE	From:	<u>10/24/2017</u> To:	11/27/2017					
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR								
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 Period					
			From:			То:		
				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 S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	ле Г		PAGE TOTAL	
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	,		PAGE TOTAL	
						\$	0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Re	Reporting Period					
						From: T			o:		
					•		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 Sch Summary Page, Section 3.	edule II, I	in-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00	

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period				
LOCAL 0712 IBEW COPE			From	10/24	<u>4/2017</u>	То:	11/27/2017
				DATE	AMOUNT		
To Whom Paid Crawford County Democratic Committee			мо	DAY	YEAR		
Mailing Address P.O. Box 1316			11	8	2017	\$	100.00
City Meadville	State PA	Zip Code (Plus 4) 16335	Description of Expenditure Contribution				
To Whom Paid Friends of Dirk A. Goodwald			МО	DAY	YEAR		
Mailing Address 255 College Ave.			11	8	2017	\$	160.00
City Beaver	State PA	Zip Code (Plus 4) 15009	Description of Expenditure 4 tickets to fundraising event				
To Whom Paid John Kochanowski			МО	DAY	YEAR		
Mailing Address 623 Frankfort Road			11	8	2017	\$	10.00
City Monaca	State PA	Zip Code (Plus 4) 15061	Description of Expenditure Reimburse notary fee for campaign finance report				
To Whom Paid Political Labor Action Now			мо	DAY	YEAR		
Mailing Address 904 N. 2nd Street			11	8	2017	\$	1,000.00
City Harrisburg	State PA	Zip Code (Plus 4) 17102	Description of Expenditure Contribution				
To Whom Paid Huntington Bank			мо	DAY	YEAR		

Mailing Address

Columbus

City

P.O. Box 1558 EAW37

State

ОН

3.00

15

Description of Expenditure

2017

11

Bank charge

Zip Code (Plus 4)

43216

7 \$	709.04			
Description of Expenditure				
Programming & report fees for detailed COPE information.				
	PAGE TOTAL			
\$	1,982.04			
u	.7 \$ ure fees for d			