#### **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 8	30003	367				port ed B		CAND	DATE		СОМ	<b>4ITTEE</b>	<b>✓</b>	LOB	BYIST		
Name of Filing C	Committee, Car	ndida	te or Lo	bbyist:														
Street Address:	217 SASS	SAFRA	AS LANE															
City:	BEAVER								State:	PA			Zip Cod	de: 1	5009-0	000		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	-	1.	2ND FRIDA' PRIMARY	Y PRE	-	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT	MENDMENT Yes NEPORT?				
(place X to the right of	6TH TUESDAY PRE-ELECTION		4.	2ND FRIDA' ELECTION	y pre	≣-	5.	30 DA ELECT		POST-	6.		TERMINA REPORT		No	•	<b>/</b>	
report type)	ANNUAL REPO	ORT	7. <b>X</b>	<b>Year</b> 2017					IG METH CHECK O				PAPER	APER DISK				
Name of Office S	- Sought by Cand	didate	e:			_			DATE (	)F ELE	CTIO	N	District Number	Office Code	Pai	ty Code	Count	ty
									МО	DAY	YE	AR		1000	ļ.		5525	
				_					11	-	7	2017		(SEE IN	ISTRUCTI	ONS FOR (	CODES)	
Summary of Expenditures		d	МО	DAY	YEAR		_	_	МО	DAY		EAR	FO	R OFFI	CE USE	ONLY		
				.1 28	2	017	•	<u>О</u>	12	2	31	2017						
A. Amount Bro				-				\$				769.61						
B. Total Moneta					Sche	dule	1)	\$			۷,5	369.61						
C. Total Funds				-				\$				139.22						
D. Total Expend	ditures (From	Sche	dule III	1)				\$			6,0	)12.73						
E. Ending Cash	Balance (Sub	tract	Line D I	From Line (	C)			\$			7,1	26.49						
F. Value Of In-	Kind Contribut	tions	Receive	ed (From Se	chedu	le II	[)	\$				0.00						
G. Unpaid Debt	s And Obligati	ions (	(From S	chedule IV	)			\$				0.00						_
					AFF	ID/	٩VI	T SE	CTION									
PART I - If this is		=	-	_								_						
I swear (or affirm) correct and complete		., inclu	iding the	attached sci	iedule	s filed	d on	paper (	or by elec	tronic m	edium	, are to t	the best o	f my kno	wledge	and belie	ef , tru	ıe.
Sworn to and subs	cribed before me day of	e this		20							S	ignature	of Perso	n Submit	ting Re	oort		_
				·				- -					Prin	ted Nam	e			-
My Commission Ex	-	ınature	<b>-</b>										Ema	il				-
	МО		DA	·Υ	YR					Ar	ea Cod	le	Daytim	e Telepi	none Nu	mber		_
Part II- If this is	a report of a	candi	idate's a	authorized	Comn	nitte	e, C	andida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende		t of my	y knowle	dge and beli	ef this	polit	tical	commi	ittee has ı	not viola	ted an	y provis	rovisions of the act of June 3,1937 (P.L. 1333					
Sworn to and subsc		this										s	ignature o	of Candid	ate			-
	day of 							-					Printe	d Name				-
	Signat	ture						-										_
My Commission Exp	ires												Ema	il				
	мо	,	DA	ΛΥ	YR	l		•		Area	Code		Da	aytime 1	elephor	ne Numb	er	-

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
LOCAL 0712 IBEW COPE	From:	11/28/201	<u>7</u> To:	12/31/2017
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	Period	(1)	\$	2,194.61
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	Period	(4)	\$	175.00
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 Page			\$	2,369.61

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	)					
	•	·			•	•	$\overline{}$	DACE 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 Filling Committee of Candidate				Reporting Period From: To:				
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	1					

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 Candi	date		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule 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 Candi	date			Rep	orting Pe	riod			
				Froi	n:		To	):	
					D	ATE		AM	10UNT
Full Name of Contributor					МО	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus	4)					
Employer Name					Occupa	tion			
Employer Mailing Address/Principal Business	l Place of		City			State		Zip Code	e (Plus 4)
Enter Grand Total of Part C on 9	Schedule I, Deta	iled Sumr	nary Page,	Section	on 3.			P <i>/</i>	O.00
							L		

## 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 Pe	eriod	
LOCAL 0712 IBEW COPE	From:	11/28/2017 <b>To:</b>	12/31/2017

			D	ATE		AMOUNT
Full Name  Committee to Elect Diane Zac	k Buchanan Judge		МО	DAY	YEAR	
Mailing Address 525 Third Street			12	24	2017	<b>\$</b> 175.00
<b>City</b> Beaver	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15009	12	31	2017	
Receipt Description Void	outstanding check					

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

**PAGE TOTAL**175.00

\$

#### **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 Per	iod	
LOCAL 0712 IBEW COPE	From:	<u>11/28/2017</u> <b>To:</b>	12/31/2017
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	R	
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 Candid	ate		Reporting	g Period			
			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	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	porting P	Period			
				Fro	om:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occupa	tion			
Employer Mailing Address/Principal Plac Business	ce of Cit	ity	State		Zip 4)	Code(Plus	Descri	ption o	f Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-K	Kind (	Contributions De	etaile	ed				PAGE TOTAL 0.00

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee of	or Candidate		Reporti	ng Period			
LOCAL 0712 IBEW COPE			From	11/28	8/2017	То:	12/31/2017
				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
Beaver County Democratic	Committee						
Mailing Address PO Box	243		12	13	2017	\$	250.00
City Ambridge	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	<u>'</u>	
-	PA	15003	Sponso	rship cont	ribution		
To Whom Paid IBEW Local Union #712 Fed	deral Credit Union		МО	DAY	YEAR		
Mailing Address 217 Sas	safras Lane		12	13	2017	\$	109.73
City Beaver	State	Zip Code (Plus 4)	Descrip	tion of Exp	oenditure	•	
PA 15009				fees for de			mation
To Whom Paid IBEW PAC			МО	DAY	YEAR		
Mailing Address 900 Sev	enth Street, NW		12	13	2017	\$	5,640.00
<b>City</b> Washington	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	<u> </u>	
J	DC	20001	Contrib	ution			
<b>To Whom Paid</b> John Kochanowski			МО	DAY	YEAR		
Mailing Address 623 Fran	nkfort Road		12	13	2017	\$	10.00
City Monaca	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	<u> </u>	
	PA	15061	Reimbu	ırse notary	fee for	campaign	finance report
<b>To Whom Paid</b> Huntington Bank			мо	DAY	YEAR		
Mailing Address P.O. Box	( 1558 EAW37		12	15	2017	\$	3.00
City Columbus	State	Zip Code (Plus 4)	Descrin	tion of Exp	enditure	<u> </u>	
33.4.11543	ОН	43216	Bank cl				
			_				PAGE TOTAL
Enter Grand Total of Exp	enditures on Page 1, Re	port Cover Page, Item I	J.			\$	6,012.73