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 2000	190			Repo Filed		CAI	NDI	DATE		COM	AITTEE	V	LUE	9611	.51	
Name of Filing C	ommittee, Candida	ate or L	obbyist:		AFT-PI	ENNSY	LVANI	ΙA			•						
Street Address:	AIRSIDE BUS	INESS F	PARK,100 A	AIRSID	E DR												
City:	MOON TOWNS	SHIP					State	e:	PA			Zip Co	de: 1	5108			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2.	30 DA		F	POST-	3.		AMENDN REPORT		Yes		No	/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4. X	2ND FRIDA ELECTION	Y PRE	- 5.	30 DA		F	POST-	6.		TERMINA REPORT		Yes		No	\
report type)	ANNUAL REPORT	7.	Year 2017				NG ME					PAPER		\	DI	SKET	ΓΕ
Name of Office S	- lought by Candidat	te:					DAT	ΕO	F ELE	CTIO	N	District Number	Office Code	Pa	erty (Code C	ounty ode
							МО		DAY	YE	EAR		·	·		-	
								11		7	2017		(SEE IN	ISTRUCT	IONS	FOR CO	DES)
	Receipts and	МО	DAY	YEAR	l		МО		DAY	ΥI	EAR	FC	R OFFI	CE US	E OI	NLY	
Expenditures	from:		6 6	2	017	то		9]	.8	2017						
A. Amount Bro	ught Forward Fron	1 Last R	eport			\$				59,1	103.45						
B. Total Moneta	ary Contributions A	And Rec	eipts (Fron	n Sche	dule I)	\$	1			9,2	298.08						
C. Total Funds	Available (Sum Of	Lines A	and B)			\$				68,4	401.53						
D. Total Expend	ditures (From Sche	edule II	I)			\$				4,4	150.00						
E. Ending Cash	Balance (Subtract	Line D	From Line	C)		\$				63,9	51.53						
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedu	le II)	\$					0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule I\	/)		\$					0.00			•			
						IT SE											
I swear (or affirm)	that this report, incl		_								_		f my kno	wledge	e and	l belief	, true
correct and comple	cribed before me this										lanatur	of Perso	n Gubmit	ting D	nort		
	day of		_ 20			_					ngnature	or Perso	II Subilli	itilig K	грого		
	Signatu	re				_						Prin	ted Nam	е			
My Commission Ex						_						Ema	il				
	МО		AY	YR						a Coc	le	Daytin	ie Telep	hone N	umb	er	
	a report of a cand that to the best of m				•				_		mp=!-	ions of th	o pat of 1	lune ?	1027	/ (D ! - 4	,,,
No 320) as amende		iy Kilowie	suge and bei	iei tilis	politica	ii Collilli	iittee ii	as II		eu an	ly provis	ions or th	e act or s	une 3,	1937	(P.L.)	
Sworn to and Subsc	day of		20								s	ignature (of Candid	late			_
												Printe	d Name				
My Commission Exp	Signature ires											Ema	il				-
	мо	D	AY	YR		_			Area	Code		D	aytime 1	Telepho	ne N	lumber	$-\mid$

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
AFT-PENNSYLVANIA	From:	<u>6/6/201</u>	<u>7</u> To:	9/18/2017
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) 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 C	Candidate	R	eporting	Period			
		F	rom:		То	:	
		·		DATE			AMOUNT
Full Name of Contributing Comm	nittee		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.

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.

Name of Filing Commit	tee or Candidate		Rep	orting P	eriod			
			Froi	m:		To	o:	
		I			DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)				Ī	l	

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		A	MOUNT
Full Name of Contributing Committee				МО	DAY	YEAR	\$	0.00
Mailing Address							7 *	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	lule I, Detailed Sun	nmary 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 Candida	te			Rep	orting Pe	eriod			
				Fror	n:		Т	o:	
					D	ATE		А	MOUNT
Full Name of Contributor					МО	DAY	YEAR	\$	0.00
Mailing Address								7	
City	State	Zi	ip Code (Plus	s 4)					
Employer Name					Occupa	tion			
Employer Mailing Address/Principal F	lace of Business		City		•	State		Zip Cod	de (Plus 4)
Enter Grand Total of Part C on Sc	nedule I, Detaile	ed Sumn	nary 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:			То:		
		•		D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	ıs 4)					
Receipt Description	<u>'</u>	<u>'</u>			•			
Futor Curred Total of Bout	For Cabadula I Batailad	I Comment Page Co		4				PAGE TOTAL
Enter Grand Total of Part	E on Schedule 1, Detailed	Summary Page, Se	ection	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								
AFT-PENNSYLVANIA	From:	<u>6/6/2017</u> To:	9/18/2017						
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 Car	ndidate		Reporting Period					
			From:			To	:	
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•		•	•		•		
					-			
Enter Grand Total of Part F o	n Schedule II, In-Ki	nd Contributions Detai	led Sun	mary Pa	ge,		PAGE TOTAL	•
Section 2.						\$	(0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reportin	ng Period			
AFT-PENNSYLVANIA	From	<u>6/6</u>	<u>5/2017</u>	То:	9/18/2017
		DATE			AMOUNT
To Whom Paid					

				DATE			AMOUNT
To Whom Paid			мо	DAY	YEAR		
MARKOSEK FOR STATE LEGISLAT	URE COMMITTEE		140		12/110		
Mailing Address P.O. BOX 114	66		11	10	2017	\$	1,000.0
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA	17108	CONTRI	BUTION			
To Whom Paid			мо	DAY	YEAR		
JAY COSTA, JR. FOR STATE SENA	.ΤΕ		МО	DAT	TEAR		
Mailing Address 314 NEWPORT	ΓROAD		11	20	2017	\$	250.0
City PITTSBURGH	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	15221	CONTRI	BUTION			
To Whom Paid			мо	DAY	YEAR		
PEOPLE FOR PEDUTO			МО		ILAK		
Mailing Address P.O. BOX 916	1		10	27	2017	\$	1,000.0
City PITTSBURGH State Zip Code (Plus 4)				tion of Exp	enditure		
	CONTRI	BUTION					
To Whom Paid			мо	DAY	YEAR		
COMMITTEE TO ELECT WAYNE FO	ONTANA		1-10				
Mailing Address 1309 CREEDM	OOR AVE		11	3	2017	\$	500.00
City PITTSBURGH	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA	15226	CONTRI	BUTION			
To Whom Paid			мо	DAY	YEAR		
CITIZENS FOR PAT BROWNE			1-10		12/110		
Mailing Address P.O. BOX 903	07		10	31	2017	\$	200.0
City ALLENTOWN	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	18109	CONTRI	BUTION			
To Whom Paid			МО	DAY	YEAR		
NON-PENNSYLVANIA EXPENDITU	RES		МО	DAI	ILAK		
Mailing Address						\$	1,500.0
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
							PAGE TOTAL
Enter Grand Total of Expendit	ures on Page 1, Re	port Cover Page, Item D).			\$	4,450.00