# **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 8000	)367			Repor Filed			CANDI	DATE		СОМ	<b>1ITTEE</b>	✓	LOBI	BYIST		
Name of Filing C	Committee, Candid	ate or L	obbyist:		LOCAL	071	L2 I	BEW CO	PE							-	
Street Address:	217 SASSAFF	RAS LAN	E														
City:	BEAVER							State:	PA			Zip Co	<b>le:</b> 15	009-0	000		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.		DA IMA		POST-	3.		AMENDMENT REPORT?		Yes	N	D	$\checkmark$
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	5.		DA ECT	Y F 'ION	POST- 6.			TERMIN/ REPORT		Yes	N	C	$\checkmark$
report type)	ANNUAL REPORT	7. <b>X</b>	<b>Year</b> 2018					IG METHO				PAPER		$\checkmark$	DISK	ETTE	
Name of Office S	bought by Candida	te:	-					DATE O	F ELEO	CTIC	N	District Number	Office Code	Par	ty Code	Cour	
								мо	DAY	Y	EAR						
								11		6	2018		(SEE INS	TRUCTI	ONS FOR	CODES	)
	Receipts and	мо	DAY	YEAR	2			мо	DAY	YI	EAR	FC	R OFFIC	E USE	ONLY		
Expenditures	s from:		11 27	2	018 7	ГО		12	1.1	31	2018						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			16,2	253.61						
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 5,095.77																	
C. Total Funds Available (Sum Of Lines A and B)							\$			21,3	349.38						
D. Total Expenditures (From Schedule III)							\$			1	52.11	]					
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)			\$			21,1	.97.27						
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	le II)		\$				0.00	-					
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	')			\$				0.00						
				AFF	IDAV	IT S	SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign	here. I	If this i	s a (	Can	didate re	eport, c	andi	date sig	gn here.					
I swear (or affirm) correct and comple	) that this report, inc ete.	luding the	e attached sc	hedules	s filed or	ı pap	er o	or by elect	ronic me	edium	, are to t	the best o	f my knov	vledge	and bel	ief , tr	ue
Sworn to and subs	cribed before me this day of	5	20							5	Signature	e of Perso	n Submitt	ing Rep	oort		-
	Signatu	Ire				_						Prin	ted Name				-
My Commission Ex	-											Ema	il				-
	мо	D	AY	YR					Are	a Coc	le	Daytin	e Teleph	one Nu	mber		_
Part II- If this is	a report of a can	didate's	authorized	Comn	nittee, (	Cand	dida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of r ed.	ny knowle	edge and beli	ef this	political	l con	nmi	ttee has n	ot violat	ed an	ıy provis	ions of th	e act of Ju	ine 3,1	937 (P.	L. 133	з,
Sworn to and subso	ribed before me this day of		20								S	ignature (	of Candida	ite			-
												Printe	d Name				-
My Commission Exp	Signature					_						Ema	il				-
						_											_
	мо	D	AY	YR					Area	Code		D	aytime Te	lephon	e Numl	ber	

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** LOCAL 0712 IBEW COPE From: <u>11/27/2018</u> **To:** 12/31/2018 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor \$ 4,261.31 **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 834.46 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 834.46 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 0.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 5,095.77 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

# 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 Candida	Name of Filing Committee or Candidate				Reporting Period					
	Fre					From: To:				
		·			DATE			AMOUNT		
Full Name of Contributing Committee			м	10	DAY	YEAR				
Mailing Address							\$	0.00		
City State Zip Code (Plus 4)										
							Γ	PAGE TOTAL		

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

0.00

\$

PAGE 3

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 Candidat	e		Reporting I	Period					
LOCAL 0712 IBEW COPE			From:	om: <u>11/27/2018</u> To: <u>12/3</u>					
				DATE		AMOUNT			
Full Name of Contributor Jerry Close			мо	DAY	YEAR				
Mailing Address PO Box 645				<b>\$</b> 145.	.52				
City Carneige	State	Zip Code (Plus 4)	11	30	2018				
City Carneige	РА	15106							
Full Name of Contributor James Serich	мо	DAY	YEAR						
Mailing Address 65 Edgewater Dr				<b>\$</b> 84.	.30				
City Poland	State OH	Zip Code (Plus 4) 44514	11	30	2018				
Full Name of Contributor Robert Donatelli			мо	DAY	YEAR				
Mailing Address 646 South 4th Stre	et					<b>\$</b> 52	2.05		
City Sharpsville	State	Zip Code (Plus 4)	11	30	2018				
	РА	16150							
Full Name of Contributor Terri Thayer			мо	DAY	YEAR				
Mailing Address 600 Elmwood Dr						<b>\$</b> 77.	.46		
City Mt Sterling	State KY	Zip Code (Plus 4) 40353	11	30	2018				
Full Name of Contributor Dominick Treemarchi				DAY	YEAR				
Mailing Address 835 Nimick Ave						<b>\$</b> 58	8.31		
City Monaca	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15061	11	30	2018				

							TAGE 5
Full Name of Contributor				DAY	VELD		
Fred Brown			мо	DAY	YEAR		
Mailing Address 106 Sahara Dr	rive					\$	66.60
City Renfrew	State	Zip Code (Plus 4)	11	30	2018		
	ΡΑ	16053					
Full Name of Contributor Noah Harris			мо	DAY	YEAR		
Mailing Address 283 Wises Gro	ove Road					\$	112.20
City New Brighton	State	Zip Code (Plus 4)	11	30	2018		
New Drighton	ΡΑ	15066					
Full Name of Contributor Jason Vautard	мо	DAY	YEAR				
Mailing Address 431 Carpenter				\$	52.80		
City North Huntington	State	State Zip Code (Plus 4)			2018		
J	ΡΑ	15642					
Full Name of Contributor Marce Mayle II			мо	DAY	YEAR		
Mailing Address 7049 Bye Road	d					\$	50.25
City East Palestine	State	Zip Code (Plus 4)	11	30	2018		
	он	44413					
Full Name of Contributor Jesse Prisuta			мо	DAY	YEAR		
Mailing Address 378 Cannelton Road						\$	134.97
City Darlington	State	Zip Code (Plus 4)	11	30	2018		
Samgon	PA	16115					
	·			•	•		PAGE TOTAL
	on Schedule I,					1	

# 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		А	MOUNT
Full Name of Contributing Commit	ee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary 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	
	From:	То:

				D	ATE		AMOUNT	
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City State Zip Code (Plus 4)								
Employer Name				Occupation				
Employer Mailing Address/Princi Business	pal Place of		City		State		Zip Code (	(Plus 4)
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section				on 3.		Γ	PAG	E 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 Candidate			Report	ing Perio	d					
			From:	From: To:						
				D	ATE			AMOUNT	1	
Full Name				мо	DAY	YEAR	1			
Mailing Address							\$	5	0.00	
City	State	Zip Code (	Plus 4)							
Receipt Description						•	•			
Enter Grand Total of Part E on Schedu	ule T. Detailed Summ	nary Page	Section	4				PAGE TO	TAL	
nter Grand Total of Part E on Schedule I, Detailed Summary Page, Section							\$		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 Perio	od	
LOCAL 0712 IBEW COPE	From:	<u>11/27/2018</u> <b>то:</b>	<u>12/31/2018</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 PAR	TF)		
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			Reporting Period					
			From:			То:		
				DATE		АМО	UNT	
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 Schedule II, In-Kind Contributions Detail Section 2.				mary Pag	je,	PAGE	TOTAL	
					4	6	0.00	

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

Name of Filing Committee or Candidate	ame 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)									
Employer of Contributor	1		I		Occupation						
Employer Mailing Address/Principal Place of City State Business						Zip 4)	Code(Plus	Descri	ption of	f Contribution	
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, I	n-Kind	Contributi	ons De	etaile	ed				<b>PAGE TOTAL</b> 0.00	

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Cor	nmittee or Candidate				Reportir	ng Period				
LOCAL 0712 IBEW	/ COPE				From	<u>11/2</u>	7/2018	То:	<u>12/31/2018</u>	
						DATE			AMOUNT	
To Whom Paid IBEW Local Union	712 FCU			_	мо	DAY	YEAR			
Mailing Address	217 Sassafras Lane				12	12	2018	\$	139.11	
CityBeaverStateZip Code (Plus 4)PA15009				Description of Expenditure Fee for COPE contribution detail report						
To Whom Paid John A Kochanowski				мо	DAY	YEAR				
Mailing Address	623 Frankfort Road				12	12	2018	\$	10.00	
<b>City</b> Monaca		<b>State</b> PA	-	<b>5</b> 061		Description of Expenditure Reimburse notary fee for campaign finance repor				
To Whom Paid Huntington Bank					мо	DAY	YEAR			
Mailing Address	P.O. Box 1558 EA1V	V37			12	17	2018	\$	3.00	
CityColumbusStateZip Code (Plus 4)OH43216				<b>Descrip</b> Bank cl	<b>ition of Exp</b> harge	oenditure	1			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D				<u> </u>				PAGE TOTAL		
		n rage 1,		i rage, item i				\$	152.11	