

# Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

<b>Filer Identification Number :</b>		9900041		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>		
<b>Name of Filing Committee, Candidate or Lobbyist:</b> PSSU LOCAL 668 COPE FUND												
<b>Street Address:</b> 2589 INTERSTATE DRIVE												
<b>City:</b> HARRISBURG						<b>State:</b> PA			<b>Zip Code:</b> 17110			
<b>TYPE OF REPORT</b>  (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.	2ND FRIDAY PRE-ELECTION	5.X	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2019		<b>FILING METHOD ( ) CHECK ONE</b>		<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>				
<b>Name of Office Sought by Candidate:</b>						<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>				
						11	5	2019				
									(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
		9	17	2019		10	21	2019				
<b>A. Amount Brought Forward From Last Report</b>						\$ 35,185.71						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 125.00						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 35,310.71						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 6,063.75						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 29,246.96						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$ 0.00						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$ 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>
PSSU LOCAL 668 COPE FUND	From: <u>9/17/2019</u> To: <u>10/21/2019</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>	\$ 125.00

<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>	\$ 125.00
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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 Candidate	Reporting Period
	From: To:

DATE				AMOUNT
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Full Name of Contributing Committee			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: <span style="float: right;">To:</span>

DATE				AMOUNT
Full Name of Contributing Committee				
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
Mailing Address			YEAR	\$ 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.**

<b>Name of Filing Committee or Candidate</b>  PSSU LOCAL 668 COPE FUND	<b>Reporting Period</b>  <b>From:</b> <u>9/17/2019</u> <b>To:</b> <u>10/21/2019</u>
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				DATE			AMOUNT
Full Name			MO	DAY	YEAR		
SEIU 668 COPE FUND			9	18	2019	\$ 125.00	
Mailing Address 2589 INTERSTATE DRIVE							
City HARRISBURG	State PA	Zip Code (Plus 4) 17110					
<b>Receipt Description</b> DEPOSIT OF FUNDS AT NEW FINANCIAL INSTITUTION AND REIMBURSEMENT OF FEES FROM SEIU 668 COPE COLLECTIONS ACCOUNT							

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

<b>PAGE TOTAL</b>
\$ 125.00

## 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>	
PSSU LOCAL 668 COPE FUND		From: <u>9/17/2019</u> To: <u>10/21/2019</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 II**  
**PART G**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OVER \$250.00**

Name of Filing Committee or Candidate	Reporting Period
	From: To:

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
PSSU LOCAL 668 COPE FUND	From <u>9/17/2019</u> To: <u>10/21/2019</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
FRIENDS OF MARY JO DALEY				
Mailing Address P.O. BOX 752	10	1	2019	\$ 500.00
City CONSHOHOCKEN				
State PA				
Zip Code (Plus 4) 19428				
Description of Expenditure				
CONTRIBUTION				
To Whom Paid	MO	DAY	YEAR	
FRIENDS OF CE-CE GERLACH				
Mailing Address 307 S. 16TH STREET	10	1	2019	\$ 750.00
City ALLENTOWN				
State PA				
Zip Code (Plus 4) 18102				
Description of Expenditure				
CONTRIBUTION				
To Whom Paid	MO	DAY	YEAR	
FRIENDS OF DAVE HARRINGTON				
Mailing Address 6460 RED SUNSET CIRCLE	10	1	2019	\$ 1,750.00
City COOPERSBURG				
State PA				
Zip Code (Plus 4) 18036				
Description of Expenditure				
CONTRIBUTION				
To Whom Paid	MO	DAY	YEAR	
FRIENDS OF NUSRAT RASHID				
Mailing Address 400 EDMONT AVE. PO BOX 15	10	1	2019	\$ 750.00
City CHESTER				
State PA				
Zip Code (Plus 4) 19016				
Description of Expenditure				
CONTRIBUTION				
To Whom Paid	MO	DAY	YEAR	
LUKE VERDES FOR NORTHAMPTON COUNTY COUNCIL				
Mailing Address 3314 MORAVIAN CT.	10	1	2019	\$ 750.00
City BETHLEHEM				
State PA				
Zip Code (Plus 4) 18020				
Description of Expenditure				
CONTRIBUTION				
To Whom Paid	MO	DAY	YEAR	
FRIENDS OF ELIZABETH FIEDLER				
Mailing Address PO BOX 2468	10	2	2019	\$ 500.00
City PHILADELPHIA				
State PA				
Zip Code (Plus 4) 19147				
Description of Expenditure				
CONTRIBUTION				

<b>To Whom Paid</b> COMMITTEE TO ELECT KELLY ECKEL			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 750.00
<b>Mailing Address</b> 2928 MORRIS ROAD			10	10	2019	
<b>City</b> ARDMORE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19003	<b>Description of Expenditure</b> CONTRIBUTION			

  

<b>To Whom Paid</b> PSSU COPE FUND COLLECTION ACCOUNT			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 313.75
<b>Mailing Address</b> 2589 INTERSTATE DRIVE			10	10	2019	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17110	<b>Description of Expenditure</b> REIMBURSE FOR ACH REJECTION FEES FROM BANK			

  

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						<b>\$</b> 6,063.75

