Campaign Finance Report

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

Filer Identification 9900041 Report Filed By:								ATE		СОМ	4ITTEE	✓	LOB	BYIST							
Name of Filing C	Committee, Candid	late or L	obbyist:	Ī	PSSU L	.OCAL	. 668 C	OPE	FUND)											
Street Address:	2589 INTERS	TATE DI	RIVE																		
City:	HARRISBURG	i					State		PA			Zip Cod	ie: 17	7110							
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	2.	30 D PRIM		PC	OST-	3.		AMENDM REPORT		Yes	No	~					
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- 5. X		AY TION	PC	OST-	6.		TERMINATION YER		Yes	No	~					
report type)	ANNUAL REPORT	7.	Year 2019				NG MET					PAPER		\	DISKE	TTE					
Name of Office S	Sought by Candida	ite:			-		DATE	OF	ELEC	CTIO	N	District Number	Office Code	Par	ty Code	County					
							МО		DAY	YE	AR	- rumber	Todac			couc					
								11		5	2019		(SEE IN	ISTRUCTI	ONS FOR O	ODES)					
Summary of Expenditures	Receipts and	МО	DAY Y	EAR			МО		DAY	YE	AR	FO	R OFFI	CE USE	ONLY						
Expenditures	irom:		9 17	20)19 1	О		10	2	21	2019										
A. Amount Bro	ught Forward Fro	m Last R	eport			\$;			35,1	.85.71										
B. Total Moneta	ary Contributions	And Rec	eipts (From S	che	dule I)	\$	5			1	25.00										
C. Total Funds Available (Sum Of Lines A and B) \$ 35,310.71									10.71												
D. Total Expenditures (From Schedule III)						\$	5			6,0	63.75										
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)			4	5			29,2	46.96										
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	edul	e II)	4	5				0.00										
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV)			\$	5				0.00			•							
			A	\FF	IDAVI	T SE	CTIO	N													
PART I - If this is	s a Committee rep	ort, trea	surer sign he	re. I	f this i	s a Ca	ndidate	e rep	port, c	andid	late sig	ın here.									
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	e attached sched	dules	filed on	paper	or by el	ectro	onic me	dium,	are to t	he best o	f my kno	wledge	and belie	ef , true					
Sworn to and subs	cribed before me thi day of	s	20					-		S	ignature	of Perso	n Submit	ting Re _l	ort						
	Signatu	ıre				_		-				Prin	ted Name	e							
My Commission Ex	cpires					_		_				Ema	il								
	мо	D	AY	YR					Are	a Cod	е	Daytim	e Telepi	none Nu	mber						
Part II- If this is	a report of a can	didate's	authorized Co	omm	ittee, (Candio	late sh	all s	ign he	re.											
I swear (or affirm) No 320) as amende	that to the best of led.	my knowle	edge and belief	this	political	comn	nittee ha	s no	t violat	ed an	y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333,	l				
Sworn to and subsc	ribed before me this day of		20					•			s	ignature o	of Candid	ate							
						_		-				Printe	d Name								
My Commission Exp	Signature					_		-				Ema	il								
						-		-													
	МО	D	AY	YR					Area (Code		D	aytime T	elephor	e Numb	er					

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
PSSU LOCAL 668 COPE FUND	From:	9/17/20) <u>19</u> To:	10/21/2019
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)	\$	125.00
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			\$	125.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize onl with an aggregate val	-			-			
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		1			DATE			AMOUNT
Full Name of Contribution	ng Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	•	•			•	•		PAGE TOTAL

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

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 of	or Candidate		Rep Fro	oorting P	eriod	To):	
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	١					

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	1		Reporting	Period				
			From:			То:		
				DA	TE		А	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 Scho	edule I, Detailed Su	mmary 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	ate			Rep	orting Pe	riod			
				Froi	n:		То	:	
					D	ATE		AN	MOUNT
Full Name of Contributor					МО	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus	i 4)					
Employer Name	•	•			Occupa	tion	•	•	
Employer Mailing Address/Principal Business	Place of		City			State		Zip Code	e (Plus 4)
Enter Grand Total of Part C on So	chedule I, Deta	iled Sumr	mary Page,	Section	on 3.			P	AGE 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	Reporting Per	iod	
PSSU LOCAL 668 COPE FUND	From:	9/17/2019 To :	10/21/2019

				D	ATE		AMOUNT
Full Name SEIU 668 COPE FUND				МО	DAY	YEAR	
Mailing Address 258	39 INTERSTATE D	PRIVE				2010	\$ 125.00
City HARRISBURG		State PA	Zip Code (Plus 4) 17110	9	18	2019	
Receipt Description		JNDS AT NEW FINAN	NCIAL INSTITUTION A	ND REIM	BURSEMEN	IT OF FEI	ES FROM SEIU 668

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

PAGE TOTAL \$ 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

Name of Filing Committee or Candidate	Reporting Perio	d	
PSSU LOCAL 668 COPE FUND	From:	<u>9/17/2019</u> To:	10/21/2019
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER 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 Candid	ate		Reporting	g Period			
			From:			To:	
				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	те 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	е				Re	porting	Period			
					Fro	om:		То:		
					•		DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor	-1		•			Occupa	ation			
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, I	in-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reportin	g Period		
PSSU LOCAL 668 COPE FUND	From	9/17/2019	То:	10/21/2019
		DATE		AMOUNT

			DATE				AMOUNT
To Whom Paid FRIENDS OF MARY JO DALEY			МО	DAY	YEAR		
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 FRIENDS OF CE-CE GERLACH			МО	DAY	YEAR		
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 FRIENDS OF DAVE HARRINGTON			МО	DAY	YEAR		
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 FRIENDS OF NUSRAT RASHID			МО	DAY	YEAR		
Mailing Address 400 EDGMONT 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 LUKE VERDES FOR NORTHAMPTON COUNTY COUNCIL			МО	DAY	YEAR		
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 FRIENDS OF ELIZABETH FIEDLER			мо	DAY	YEAR		
Mailing Address PO BOX 2468			10	2	2019	\$	500.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19147	Description of Expenditure CONTRIBUTION				
To Whom Paid COMMITTEE TO ELECT KELLY ECKEL			МО	DAY	YEAR		
Mailing Address 2928 MORRIS ROAD			10	10	2019	\$	750.00
City ARDMORE	State PA	Zip Code (Plus 4) 19003	Description of Expenditure CONTRIBUTION				
To Whom Paid PSSU COPE FUND COLLECTION ACCOUNT			МО	DAY	YEAR		
Mailing Address 2589 INTERSTATE DRIVE			10	10	2019	\$	313.75
City HARRISBURG	State PA	Zip Code (Plus 4) 17110	Description of Expenditure REIMBURSE FOR ACH REJECTION FEES FROM BANK				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
Lines Grand Total of Expenditules on Page 1, Report Cover Page, Item D.							6,063.75