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 9900	041				port ed B		CANDI	DATE		СОМ	4ITTEE	✓	LOBI	BYIST		
Name of Filing C	Committee, Candid	ate or L	obbyist:		PSS	SU LC	DCAL	668 COP	E FUNI	D		_	-				
Street Address:																	
City:	HARRISBURG							State:	PA			Zip Cod	le: 1	7110			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	-	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT?		Yes	No		/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	-	5.	30 DA ELECT		POST-	6. X		TERMINA REPORT?		Yes	No		/
report type)	ANNUAL REPORT	7.	Year 2019					IG METHO				PAPER		\	DISKE	TTE	
Name of Office S	Sought by Candida	te:						DATE O	F ELE	СТІО	N	District Number	Office Code	Par	ty Code	Coun	
	-							МО	DAY	YE	AR		1				
						,		11		5	2019		(SEE IN	ISTRUCTI	ONS FOR C	ODES	
Summary of Expenditures	Receipts and from:	МО		YEAR		 T	^	МО	DAY		AR 2010	FO	R OFFI	CE USE	ONLY		
	ught Forward Fror		10 22		019		1	11		25	2019						
	ary Contributions		•	Sche	dule	e I)	\$ \$			29,2	0.00						
C. Total Funds Available (Sum Of Lines A and B) \$ 29,246.96																	
D. Total Expen	ditures (From Sch	edule II	I)				\$			12,6	73.92						
E. Ending Cash	Balance (Subtrac	Line D	From Line C	:)			\$			16,5	73.04						
F. Value Of In-	Kind Contributions	Receiv	ed (From Sc	hedu	le II	I)	\$				0.00						
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV)	,			\$				0.00	<u> </u>		•			
				AFF	ID/	AVI	ΓSE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign h	iere. I	If th	nis is	a Can	ndidate re	eport, c	candi	date sig	ın here.					
I swear (or affirm) correct and comple) that this report, incl ete.	uding the	attached sch	edules	s file	ed on p	paper (or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , tru	ıe'
Sworn to and subs	cribed before me this day of	ì	20							S	ignature	of Perso	n Submit	ting Rep	ort		_
	Signatu	re					-					Prin	ted Nam	e			-
My Commission Ex	cpires 						_					Ema	il				_
	МО	D/	AY	YR					Are	ea Cod	le	Daytim	e Telepi	hone Nu	mber		<u>_</u>
Part II- If this is	a report of a can	lidate's	authorized (Comm	nitte	ee, Ca	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of ned.	ıy knowle	edge and belie	f this	polit	itical	commi	ittee has n	ot viola	ted an	y provisi	ions of the	e act of J	une 3,1	937 (P.L.	. 1333	3,
Sworn to and subso	ribed before me this day of		20								Si	ignature o	of Candid	late			-
	<u> </u>						-					Printe	d Name				-
My Commission Exp	Signature pires						-					Ema	il				-
	МО	D.	AY	YR			•		Area	Code		Da	aytime 1	elephon	e Numbe	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
PSSU LOCAL 668 COPE FUND	From:	10/22/20	<u>19</u> To:	11/25/2019
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)	\$	0.00
			1	
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 Ca	ındidate	R	Reporting Period						
		F	rom:		То	:			
		·		DATE			AMOUNT		
Full Name of Contributing Commi	ttee		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.

0.00

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.

(Exclu	ide contributions from	n political comm	itte	es re _l	ported	in Part .	A)	
Name of Filing Committe	ee or Candidate		Rep	orting P	eriod			
			Froi	m:		To):	
		•			DATE			AMOUNT
Full Name of Contributor				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.

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		P	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.0
Mailing Address							- \$	0.0
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule 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 Candidate	2			Rep	orting Pe	riod			
				Fron	n:		To) :	
					D	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR	\$	0.00
Mailing Address									
City	State	Zi	p Code (Plus	(4)					
Employer Name	•				Occupa	tion	-	-	
Employer Mailing Address/Principal Pl	ace of Business		City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detaile	ed Sumr	mary 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:			To:		
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plus 4)					
Receipt Description	•	•			•			
Forten Commit Tatal of Boot	F an Cabadala I Batallad	I C B	C					PAGE TOTAL
Enter Grand Total of Part	e on Schedule I, Detalled	summary Page,	Section	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 Per	od						
PSSU LOCAL 668 COPE FUND	From:	<u>10/22/2019</u> To:	11/25/2019					
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR								
TOTAL for the Reporting Pe	eriod (1)	\$	0.00					
. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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

ailing Address			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				Rep	porting	Period			
				Fro	m:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address				-				\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occup	ation			
Employer Mailing Address/Principal Plac	e of Business	City	у	State	e Zip	Code(Plus 4)	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, In-Kin	nd C	Contributions D	etaile	ed				PAGE TOTAL
Summary Page, Section 3.									0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting I	Period		
PSSU LOCAL 668 COPE FUND	From	10/22/2019	То:	11/25/2019

					DATE			AMOUNT		
To Whom	Paid			МО	DAY	YEAR				
FRIENDS (OF FEDOR			140		ILAK				
Mailing Ad	dress			10	25	2019	\$	750.00		
City EN	OLA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
		PA	17025	CONTR	IBUTION					
To Whom	Paid			мо	DAY	YEAR				
BUCKS VI	CTORY			140	JA.	ILAK				
Mailing Ad	dress			10	31	2019	\$	2,000.00		
City LA	NGHORNE	State	Zip Code (Plus 4)	Description of Expenditure						
		PA	19047	CONTR	IBUTION					
To Whom	Paid			МО	DAY	YEAR				
DIGIROLA	MO FOR BUCKS COUNTY			140		ILAK				
Mailing Ad	Mailing Address					2019	\$	1,000.00		
City FEASTERVILLE TREVOSE State Zip Code (Plus 4)				Descrip	tion of Exp	enditure				
		PA	19053	CONTR	IBUTION					
To Whom	Paid			МО	DAY	YEAR				
FRIENDS (OF FISHER AND MACK			140		IZAK				
Mailing Ad	dress			10	31	2019	\$	500.00		
City NE	WTOWN	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•			
		PA	18940	CONTRIBUTION						
To Whom	Paid			МО	DAY	YEAR				
FRIENDS (OF DAN HARTZELL			140	JA.	ILAK				
Mailing Ad	dress			10	31	2019	\$	1,000.00		
City AL	LENTOWN	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	ı			
		PA	18104	CONTR	IBUTION					
To Whom	Paid			МО	DAY	YEAR				
RICK LOW	E FOR DELCO			1.10		LAIN				
Mailing Ad	Mailing Address			10	31	2019	\$	750.00		
City MEDIA State Zip Code (Plus 4)) Description of Expenditure							
	PA 19063				IBUTION					

								7.GL 12
To Whom Paid FRIENDS OF MARK PINSLEY					DAY	YEAR		
Mailing Address					31	2019	\$	250.00
City	ALLENTOWN	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	18104	CONTRI	BUTION			
To Whom Paid					DAY	YEAR		
COMMITTEE TO ELECT CHRISTINE REUTHER						ILAK		
Mailing Address					31	2019	\$	1,500.00
City	WALLINGFORD	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	ı	
		PA	19086	CONTRI	BUTION			
To Whom Paid					DAY	YEAR		
FRIENDS OF ELAINE SCHAEFER					DAT	TEAR		
Mailing Address					31	2019	\$	1,500.00
City	BROOMALL	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA 19008			CONTRIBUTION				
To Whom Paid				мо	DAY	YEAR		
FRIENDS OF JAMES B. SMITH				МО	DAT	TEAR		
Mailing Address				10	31	2019	\$	500.00
City	MONESSEN State Zip Code (Plus 4)			Descrip	tion of Exp	enditure		
		PA	15962	CONTRI	BUTION			
To Whom Paid				мо	DAY	YEAR		
FRIENDS OF MONICA TAYLOR				МО		ILAK		
Mailing Address					31	2019	\$	1,500.00
City	DREXEL HILL	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	ı	
		PA	19026	CONTRI	BUTION			
To Whom Paid				мо	DAY	YEAR		
YOUR MOTHER						I Z A II X		
Mailing Address				10	31	2019	\$	1,000.00
City	FOUNTAIN HILL	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	I	
		PA	18015	CONTRIBUTION				
To Whom Paid				мо	DAY	YEAR		
SEIU LOCAL 668 - PSSU				1-10		ILAK		
Mailing Address				11	1	2019	\$	423.92
City	HARRISBURG State Zip Code (Plus 4)			Description of Expenditure				
		PA	17110	REIMBURSE FOR COPE RAF			FLE ITE	MS AT
								PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							\$	12,673.92