Campaign Finance Report

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

Filer Identificat Number :	c ion 2(00190			Report Filed B		CANDI	DATE	CO	MMITTEE	\checkmark	LOBI	BYIST	
Name of Filing	Committee, Can	didate or l	obbyist:		PAFT (P	A FEC	TEACH)	COM S	SUPT					
Street Address:														
City:	PHILADELF	PHIA					State:	PA		Zip Co	de: 19	103		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRID PRIMARY	DAY PRE		30 DA PRIMA		POST-	3.		AMENDMENT REPORT?		No	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRID		E- 5. X				TERMIN REPORT		Yes	No	\checkmark	
report type)	ANNUAL REPO	RT 7.	Year 200	4			LING METHOD) CHECK ONE					\checkmark	DISKE	TTE
Name of Office	⊥ Sought by Cand	idate:					DATE O	F ELEC	CTION	District Number	Office Code	Par	ty Code	County Code
							мо	DAY	YEAR		-			
							11		2 200	14	(SEE INS	STRUCTI	ONS FOR (ODES)
	Receipts and	мо	DAY	YEAR	2		мо	DAY	YEAR	F	OR OFFIC	E USE	ONLY	
Expenditure	s from:		1	1	1 T	0	10	1	.8 200)4				
A. Amount Bro	ought Forward F	rom Last I	Report			\$			5,772.4	2				
B. Total Monet	B. Total Monetary Contributions And Receipts (From Schedule I) \$ 252.00													
C. Total Funds Available (Sum Of Lines A and B) \$ 6,024.42							2							
D. Total Exper	nditures (From S	Schedule I	11)			\$			1,600.0	0				
E. Ending Casl	h Balance (Subt	ract Line D	From Line	e C)		\$			4,424.4	2				
F. Value Of In	-Kind Contributi	ons Receiv	ved (From	Schedu	le II)	\$			0.0	0				
G. Unpaid Deb	ots And Obligation	ons (From	Schedule 1	[V)		\$			0.0	0				
				AFF	IDAVI	ΓSE	CTION							
PART I - If this		• •	-					• •						
I swear (or affirm correct and comp	ı) that this report, lete.	including th	e attached s	schedule	s filed on _l	paper	or by elect	ronic me	dium, are t	o the best o	of my knov	vledge	and beli	ef , true
Sworn to and sub	scribed before me day of	this	20						Signat	ure of Perso	on Submitt	ing Rep	oort	
		ature				-				Prir	ited Name			
My Commission E	-	ature								Ema	nil			
	мо	0	DAY	YR		-		Are	a Code	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	s a report of a c	andidate's	authorize	d Comn	nittee, Ca	andid	ate shall	sign he	re.					
I swear (or affirm No 320) as amend) that to the best led.	of my know	ledge and be	elief this	political	comm	ittee has n	ot violat	ed any prov	visions of th	e act of Ju	ine 3,1	937 (P.L	. 1333,
Sworn to and subs		his								Signature	of Candida	ite		—
	day of					-				Print	ed Name			
	Signatu	ire				-								
My Commission Ex	pires									Ema	hil			
	мо	[DAY	YR	1			Area C	Code	D	aytime Te	elephon	ne Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** PAFT (PA FED TEACH) COM SUPT From: To: 10/18/2004 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 252.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 252.00 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 \$ 252.00 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 Candidate				Reporting Period							
PAFT (PA FED TEACH) COM SUPT Fre				From:				1	<u>10/18/2004</u>		
			1		DATE				AMOUNT		
Full Name of Contributing Committee	e			мо	DAY		YEAR				
Mailing Address				10		7	2004	\$	120.00		
City NEW CASTLE	State	Zip Code (Plus	4)	10		í	2004				
	PA	16101									
Full Name of Contributing Committe	e										
NEW CASTLE SCHOOL DIST				мо	DAY		YEAR				
Mailing Address				10		7	2004	\$	132.00		
City NEW CASTLE	State	Zip Code (Plus	4)	10		'	2004				
	PA	16101									
									PAGE TOTAL		

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

252.00

\$

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. (Exclude contributions from political committees reported in Part A)									
Name of Filing Committee or Candidate					Reporting Period				
			From: To			o: 			
					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	\$	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	Reporting Period						
				То:						
				DA	TE		A	AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR		0.00		
Mailing Address							\$	0.00		
City	State	Zip Cod	e (Plus 4)							
								PAGE TOTAL		
Enter Grand Total of Part C on Sched	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:				om:						
				ATE	AM	OUNT				
Full Name of Contributor				DAY	YEAR	\$	0.00			
State	Zip Code (Plu	s 4)								
•			Occupation							
Employer Name 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.							GE TOTAL 0.00			
	State ce of Business	State Zip Code (Plus ce of Business City	State Zip Code (Plus 4) ce of Business City	From: DA DA From: DA MO State Zip Code (Plus 4) Coccupat ce of Business City	From: DATE DATE DATE State Zip Code (Plus 4) City Occupation Ce of Business City State	From: To DATE MO DAY YEAR State Zip Code (Plus 4) Image: Comparison of the second	From: To: DATE AM MO DAY YEAR \$ State Zip Code (Plus 4) Occupation ce of Business City State Zip Code			

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			Reporting Period							
				n: To:						
				D	ATE			AMOUNT		
Full Name				мо	DAY	YEAR	\$		0.00	
Mailing Address										
City	State	Zip Code (Plus 4)							
Receipt Description	·	•					•			
				PAGE TO			TAL			
Enter Grand Total of Part E on Schedule I, Detailed 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 Period		
PAFT (PA FED TEACH) COM SUPT	From:	To:	<u>10/18/2004</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	\$	0.00	
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
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			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 Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						PAGE TOTAL						
						\$		0.00				

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

Name of Filing Committee or Candidate				Reporting Period						
				From:						
					DATE	AMOUNT				
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address			-				\$ 0.00			
City	State	Zip Code(Plus 4)								
Employer of Contributor				Occupa	ation					
Employer Mailing Address/Principal Plac	e of Business	City	State	e Zip	Code(Plus 4)	Descri	ption 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

Name of Filing Committee or Candidate			Reporting Period					
PAFT (PA FED TEACH) COM SUPT			From			То:	<u>10/18/2004</u>	
				DATE			AMOUNT	
To Whom Paid			мо	DAY	YEAR			
REP JOHN YUDICHAK								
Mailing Address				28	2004	\$	300.00	
City State Zip Code (Plus 4)				tion of Exp	enditure			
To Whom Paid				DAY	YEAR			
SENATOR ALLEN KUKAVICH					TEAR			
Mailing Address			9	28	2004	\$	500.00	
City	City State Zip Code (Plus 4)			tion of Exp	enditure	1		
			CONT					
To Whom Paid			мо	DAY	YEAR			
RICHARD GRUCELA REP			no		- - /-			
Mailing Address			9	28	2004	\$	500.00	
City	State	Zip Code (Plus 4)	Description of Expenditure CONT					
To Whom Paid			мо	DAY	YEAR			
PAT VANCE			no		1 LAIX			
Mailing Address			10	4	2004	\$	300.00	
City State Zip Code (Plus 4)			Description of Expenditure					
			CONT					
							PAGE TOTAL	
Enter Grand Total of Expenditures of	on Page 1, Report C	over Page, Item D				\$	1,600.00	