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 :	ion 9900	0041		Report Filed E		CANDI	DATE	СОМ	MITTEE	<	LOBI	BYIST			
	Committee, Candid	date or Lo	obbyist:			-	668 SEII	J COPE	FUND						
Street Address: 2589 INTERSTATE DRIVE															
City:	HARRISBURG	6					State: PA				Zip Code: 17110				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2.	30 D/ PRIM		POST- 3	3.	AMENDN REPORT		Yes	No	\checkmark	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 D/ ELEC		POST- 6	5.	TERMIN/ REPORT		Yes	No	\checkmark	
report type)	ANNUAL REPORT	7.	Year 2020				NG METHO CHECK O			PAPER		\checkmark	DISKE	TTE	
Name of Office	L Sought by Candida	ate:			!		DATE O	F ELEC	TION	District Number	Office Code	Par	ty Code	County Code	
							мо	DAY	YEAR						
							2	25	5 2020		(SEE INS	STRUCTI	ONS FOR (CODES)	
	Receipts and	мо	DAY	YEAR	L .		мо	DAY	YEAR	FC	OR OFFIC	E USE	ONLY		
Expenditures	s from:	1	.2 13	20	019 T	0	2	10	0 2020						
A. Amount Bro	ught Forward Fro	m Last Re	eport			\$			16,573.04						
B. Total Monet	ary Contributions	And Rece	eipts (Fron	1 Sche	dule I)	\$			23,381.93						
C. Total Funds	Available (Sum O	f Lines A	and B)			\$			39,954.97						
D. Total Expen	ditures (From Sch	edule III	[)			\$			35,000.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)		\$			4,954.97	4					
F. Value Of In-	Kind Contribution	s Receive	ed (From S	chedu	le II)	\$			0.00	4					
G. Unpaid Deb	ts And Obligations	s (From S	chedule IV	/)		\$			0.00						
				AFF	IDAVI	T SE	CTION								
PART I - If this i	s a Committee rep	oort, trea	surer sign	here. 1	If this is	a Ca	ndidate re	eport, ca	ndidate si	gn here.					
I swear (or affirm correct and compl) that this report, inc ete.	luding the	attached sc	hedules	s filed on	paper	or by elect	ronic med	dium, are to	the best o	f my knov	vledge	and beli	ef , true	
Sworn to and subs	scribed before me thi day of	is	20						Signatur	e of Perso	n Submitt	ing Rep	oort		
	Signati	Jre	-			-				Prin	ted Name	1			
My Commission E	xpires									Ema	il				
	мо	DA	NY	YR		_		Area	a Code	Daytin	ne Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's a	authorized	Comm	nittee, C	andid	ate shall	sign her	·e.						
I swear (or affirm) No 320) as amend) that to the best of ed.	my knowle	dge and beli	ef this	political	comm	ittee has n	ot violate	ed any provis	sions of th	e act of Ju	ine 3,1	937 (P.L	. 1333,	
Sworn to and subse	cribed before me this day of	;	20						5	Signature (of Candida	ite			
						-				Printe	ed Name				
My Commission Exp	Signature					-				Ema	il				
	мо	DA	λ Υ	YR		-		Area C	ode	D	aytime Te	elephor	e Numb	er	
		2.										-			

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Reportin	g Period		
From:	<u>12/13/20</u>) <u>19</u> To:	<u>2/10/2020</u>
ng Period	(1)	\$	0.00
		\$	0.00
		\$	0.00
ng Period	(2)	\$	0.00
		\$	23,381.93
		\$	0.00
ng Period	(3)	\$	23,381.93
)			
ng Period	(4)	\$	0.00
		\$	23,381.93
	From: From: ng Period ng Period ng Period) ng Period and enter am	ng Period (1)	From: 12/13/2019 To: Image Period (1) \$ Image Period (2) \$ Image Period (2) \$ Image Period (3) \$ Image Period (3) \$ Image Period (4) \$ Image Period (4) \$

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					
			Fro	om:		То	•			
					DATE			AMOUNT		
Full Name of Contributing Committee				мо	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			orting P	eriod			
			Fro	m:		Тс):	
					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 S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	2.		\$	0.00

PAGE 5

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								
PSSU LOCAL 668 SEIU COPE FUND From:					<u>3/2019</u>	То:	2/10/2020	
				DA	TE		Α	MOUNT
Full Name of Contributing Commission SERVICE EMPLOYEES INTERNAT		FUND		мо	DAY	YEAR		
Mailing Address 1800 MASSAC	CHUSETTS AVE NW						\$	23,381.93
City WASHINGTON	State DC	Zip Code 20036	e (Plus 4)	11	15	2019		
						Γ		PAGE TOTAL
Enter Grand Total of Part C on	Schedule I, Detai	led Summary Pa	age, Sectio	n 3.			\$	23,381.93

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		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

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	Name of Filing Committee or Candidate				Reporting Period						
			From:			То:					
				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		
		illi y i uge,	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	bd	
PSSU LOCAL 668 SEIU COPE FUND	From:	<u>12/13/2019</u> то:	<u>2/10/2020</u>
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	TF)		
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, 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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL
					4	6	0.00

0.00

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

Name of Filing Committee or Candidate					Reporting Period					
					Fro	m:		То:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(P	lus 4)						
Employer of Contributor	I		1			Occupat	tion			
Employer Mailing Address/Princ Business	ipal Place of	City		State		Zip 4)	Code(Plus	Descri	ption of	f Contribution
Enter Grand Total of Part G	on Schodulo II	In-Kind	Contributio		taile					PAGE TOTAL

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.	PAGE

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period					
PSSU LOCAL 668 SEIU COPE FUND			From	From <u>12/13/2019</u> To: <u>2/10/2020</u>				
			DATE				AMOUNT	
To Whom Paid GREEN FOR SAFE AND ACCOUNTABLE COMMUNITIES			мо	DAY	YEAR			
Mailing Address 3131 SPANGLER STREET			12	27	2019	\$	25,000.00	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19132	-	Description of Expenditure CONTRIBUTION				
To Whom Paid FRIENDS OF TOM MEHAFFIE			мо	DAY	YEAR			
Mailing Address PO BOX 7365			12	27	2019	\$	2,500.00	
City STEELTON	State PA	Zip Code (Plus 4) 17113		Description of Expenditure CONTRIBUTION				
To Whom Paid GREEN FOR SAFE AND ACCOUNTABLE COMMUNITIES			мо	DAY	YEAR			
Mailing Address 3131 SPANGLER STREET			2	5	2020	\$	7,500.00	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19132		Description of Expenditure CONTRIBUTION				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL	
						\$	35,000.00	