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 8000	367				port		CAND	DATE		соми	ITTEE	✓	LOBI	BYIST		
Name of Filing C	Committee, Candid	ate or L	obbyist:		Loca	al 07	712 IE	BEW COP	Έ								_
Street Address:	217 SASSAFF	RAS LAN	E														
City:	BEAVER							State:	PA			Zip Code: 15009					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	ND FRIDAY PRE- 2. 30 DAY POST- 3. PRIMARY							AMENDMENT Yes REPORT?				`		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	-	5.	5. 30 DAY POST- 6. X ELECTION					TERMINA REPORT		Yes	No	`	
report type)	ANNUAL REPORT	7.	Year 2004					IG METH				PAPER		V	DISKE	TTE	
Name of Office S	Sought by Candida	te:	•		-			DATE C	F ELE	CTIC	N	District Number	Office Code	Par	ty Code	Count Code	y
	,							МО	DAY	YI	AR	Number	code			Code	
								11		2	2004		(SEE IN	STRUCTI	ONS FOR C	ODES)	_
	Receipts and	МО	DAY	YEAR	l			МО	DAY	ΥI	EAR	FC	R OFFI	CE USE	ONLY		
Expenditures			1 1		1	Т	0	11		22	2004						
A. Amount Bro	ught Forward Froi	n Last R	eport				\$			7,8	361.66						
B. Total Moneta	ary Contributions	And Rec	eipts (From	Sche	dule	ı)	\$			1,6	549.59						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			9,5	511.25						
D. Total Expend	ditures (From Sch	edule II	I)				\$			3	350.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)			\$			9,1	61.25						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	hedu	le II	[)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$				0.00			1			
				AFF	ID/	٩VI	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign h	ere. 1	[f th	is is	a Can	ndidate r	eport, o	candi	date sig	jn here.					
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	attached sche	edules	file	d on	paper (or by elect	tronic m	edium	, are to t	the best o	f my kno	wledge	and belie	ef , tru	e,
Sworn to and subs	cribed before me thi day of	5	20							S	Signature	of Perso	n Submit	ting Rep	ort		1
	Signatu	re					- -					Prin	ted Name	e			-
My Commission Ex	cpires						_					Ema	il				-
	МО	D	AY	YR					Are	ea Coo	le	Daytim	e Teleph	none Nu	mber		
Part II- If this is	a report of a can	didate's	authorized C	Comn	nitte	e, C	andida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of red.	ny knowl	edge and belief	f this	polit	tical	commi	ittee has r	ot viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L.	1333,	٠
Sworn to and subsc	ribed before me this										s	ignature (of Candid	ate			-
	day of ————————————————————————————————————						_					Printe	d Name				-
	Signature						-										╻┃
My Commission Exp	pires											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 Period		
Local 0712 IBEW COPE	From:	To:	11/22/2004
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			
TOTAL for the Reporting	Period (1)	\$	1,649.59
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	J 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
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		\$	1,649.59

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate val							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fr	om:		То	:	
		•			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
	•	•		•	•	•	$\overline{}$	PAGE TOTAL

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

PAGE TOTAL
\$ 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 Fining Committee of Candidate				Reporting Period From: To:				
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	1					

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:			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 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.)

	ame of Filing Committee or Candidate			Reporting Period					
From:						To):		
				D.	ATE		A	MOUNT	
				мо	DAY	YEAR			
							\$	0.00	
State	Zi	p Code (Plus	s 4)						
·	·			Occupa	tion				
al Place of		City			State		Zip Cod	le (Plus 4)	
Schedule I, Detai	iled Sumr	mary Page,	Section	on 3.				PAGE TOTAL 0.00	
	al Place of	al Place of	al Place of City	State Zip Code (Plus 4) al Place of City	MO State Zip Code (Plus 4) Occupation	State Zip Code (Plus 4) Occupation Oliver State	State Zip Code (Plus 4) Occupation Olympia Place of City State Schedule I, Detailed Summary Page, Section 3.	State Zip Code (Plus 4) Occupation Olivy State Zip Code Occupation State Zip Code	

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 Co	andidate		Report	ting Perio	bd			
			From:			То:		
				D	ATE		AN	10UNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	•						
Enter Grand Total of Part E or	Schedule T Detaile	d Summary Page	Section	4			PA	GE TOTAL
Lines Grana Fotal of Fair 2 of	r benedule 1/ betanet	z Summary r 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 Period		
Local 0712 IBEW COPE	From:	То:	11/22/2004
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER 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							
	Froi					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	lame 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)					
Employer of Contributor					Occupa	ation			
Employer Mailing Address/Principal Plad Business	ce of	City	Sta	ite	Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, I	n-Kind	Contributions	Deta	ailed				PAGE TOTAL
Summary Page, Section 3.									0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or C	Candidate		Reporti	ng Period			
Local 0712 IBEW COPE			From			То:	11/22/2004
				DATE			AMOUNT
To Whom Paid Bill DeWeese Campaign Comm	nittee		МО	DAY	YEAR		
Mailing Address Box 2000			10	29	2004	\$	250.00
City Waynesburg	State PA	Zip Code (Plus 4) 15370		ption of Exp			
To Whom Paid Beaver County Treasurer			МО	DAY	YEAR		
Mailing Address Beaver Cou	unty Courthouse 810 Th	ird Street	11	9	2004	\$	100.00
City Beaver	State PA	Zip Code (Plus 4) 150092190		ption of Exp	enditure		
Enter Grand Total of Expen	ditures on Page 1, Re	port Cover Page, Item I).				PAGE TOTAL

350.00