### **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	99000	041				port ed B		CA	NDII	DATE		COMN	1ITTEE	<b>✓</b> [	LOB	BYIST		
Name of Filing C	Committee	, Candida	ate or Lo	obbyist:		PSS	U L	OCAL	668 9	SEIU	COPE	FUN	ND						
Street Address:	Street Address:																		
City:	HARR	ISBURG						-	State	e:	PA			Zip Cod	le: 17	110-9	9602		
TYPE OF REPORT	6TH TUES PRE-PRIM		1.	2ND FRIDA PRIMARY	AY PRE	-	2.	30 DA		Р	OST-	3.		AMENDM REPORT?		Yes	N	0	<b>/</b>
(place X to the right of	6TH TUES PRE-ELEC		4.	2ND FRIDA ELECTION	AY PRE	≣-	5.	30 DA		Р	OST-	6. <b>X</b>		TERMINA REPORT?		Yes	N	0	<b>\</b>
report type)	ANNUAL	REPORT	ORT 7. Year 2004 FILING METH ( ) CHECK (									PAPER		<b>\</b>	DISK	ETTE			
Name of Office S	- Sought by	Candidat	e:						DAT	ΕO	F ELE	CTIC	ON	District Number	Office Code	Pa	rty Cod	e Cour Code	
									МО		DAY	Υ	EAR						
										11		2	2004		(SEE IN	STRUCT	ONS FOR	CODES	)
Summary of		and	МО	DAY	YEAR	<b>1</b>			МО		DAY	Y	EAR	FO	R OFFI	E USI	ONLY	,	
Expenditures	rom:			1 1	L	1	Т	0		11		22	2004						
A. Amount Bro	ught Forw	ard Fron	ı Last R	eport				\$				7,	599.85						
B. Total Moneta	ary Contri	butions A	and Rec	eipts (Fron	n Sche	dule	ı)	\$				5,	935.40						
C. Total Funds Available (Sum Of Lines A and B)							\$				13,	535.25							
D. Total Expenditures (From Schedule III)						\$				6,	024.63								
E. Ending Cash	Balance	(Subtract	Line D	From Line	C)			\$				7,5	510.62						
F. Value Of In-	Kind Cont	ributions	Receive	ed (From S	Schedu	le II	()	\$					0.00						
G. Unpaid Debt	s And Ob	ligations	(From S	chedule I\	<b>V</b> )			\$					0.00			•			
					AFF	ID/	٩VI	T SE	CTIO	NC									
PART I - If this is		•	•								•								
I swear (or affirm) correct and complete		eport, incli	uding the	attached sc	chedule	s file	d on	paper	or by e	electr	onic m	edium	ı, are to t	he best of	f my knov	vledge	and be	lief , tr	ue
Sworn to and subs	cribed befo	ore me this		20						,		:	Signature	of Perso	n Submitt	ing Re	port		_
	_	Signatur	'A	_				- -						Print	ted Name	1			_
My Commission Ex	cpires	Olgilatai	-							•				Emai	i I				-
	Ī	мо	D/	AY	YR			_			Are	ea Co	de	Daytim	e Teleph	one Nu	ımber		
Part II- If this is	a report	of a cand	idate's	authorized	l Comn	nitte	e, C	andid	ate sl	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende		e best of m	y knowle	edge and bel	ief this	polit	tical	comm	ittee h	as no	ot viola	ted aı	ny provisi	ions of the	e act of J	ıne 3,1	.937 (P	L. 133	3,
Sworn to and subsc		e me this											Si	ignature o	f Candida	ate			-
	day of							-						Printe	d Name				-
	S	ignature						-											_
My Commission Exp														Emai	il				
	_	мо	D	AY	YR	l		-			Area	Code		Da	ytime T	elepho	ne Num	ber	<sup>-</sup>

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting Period										
PSSU LOCAL 668 SEIU COPE FUND	From:	То:	11/22/2004								
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor											
TOTAL for the Reporting	Period (1)	\$	5,935.40								
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								
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		\$	5,935.40								

#### **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 Candida	Reporting Period						
			From:		То	:	
		•		DATE			AMOUNT
Full Name of Contributing Committee			МО	DAY	YEAR		
Mailing Address	_	_				\$	0.00
City	State	Zip Code (Plus 4)					

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 Filing Committee or Candidate					Reporting Period						
Fi						To	То:				
		I.			DATE			AMOUNT			
Full Name of Contributor				мо	DAY	YEAR					
Mailing Address							\$	0.00			
City	State	Zip Code (Plus 4)									

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						
			From:			То:			
				DA	TE		P	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			0.00
Mailing Address							<b>-</b>   \$		0.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTA	AL
Enter Grand Total of Part C on Sche	dule I, Detailed Sun	nmary P	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	te			Rep	orting Pe	eriod			
				Fror	n:		Т	o:	
					D	ATE		А	MOUNT
Full Name of Contributor					МО	DAY	YEAR	\$	0.00
Mailing Address								7	
City	State	Zi	ip Code (Plus	s 4)					
Employer Name					Occupa	tion			
Employer Mailing Address/Principal F	lace of Business		City		•	State		Zip Cod	de (Plus 4)
Enter Grand Total of Part C on Sc	nedule I, Detaile	ed Sumn	nary 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		Repor	ting Peri	od			
			From:			To:		
				[	DATE		ı	AMOUNT
Full Name				МО	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (	Plus 4)					
Receipt Description		I		1	1	1	ı	
			<b>.</b> .:	_		ſ	P	PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	i 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		
PSSU LOCAL 668 SEIU COPE FUND	From:	То:	11/22/2004
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 Car	Reporting Period							
	From:				То:			
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						<b>7</b> \$		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	ımary 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 Period		
PSSU LOCAL 668 SEIU COPE FUND	From	То:	11/22/2004

							17102 12
To Whom Paid					DAY	YEAR	
SEIU COPE  Mailing Address				МО	<i></i>		
				11	18	2004	\$ 243.89
City	WASHINGTON	State	Zip Code (Plus 4)	Description of Expenditure  COPE CONTRIBUTIONS			
		DC					
							PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							\$ 6,024.63