Campaign Finance Report

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

Filer Identifica Number :	tion 9900	041			Report Filed B		CANDI	DATE		СОМИ	MITTEE	✓	LOB	BYIST	
Name of Filing	Committee, Candid	late or Lo	obbyist:			-	668 COP	E FUND)						-
Street Address	:														
City:	HARRISBURG	i					State:	PA			Zip Co	de: 17	110		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 DA PRIM		POST-	3.		AMENDI REPORT		Yes	No	· 🗸
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	E- 5.	30 D/ ELEC		POST-	6. X		TERMIN REPORT		Yes	No	· 🗸
report type)	ANNUAL REPORT	7.	Year 2021				NG METHO CHECK O				PAPER		\checkmark	DISKI	TTE
Name of Office	Sought by Candida	te:					DATE O	F ELEC	CTIO	N	District Number	Office	Par	ty Code	County
							мо	DAY	YE	AR					100.00
							11		2	2021		(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR	2		мо	DAY	YE	AR	FC	OR OFFIC	E USE	ONLY	
Expenditure	es from:	1	19	2	021 T	0	11	2	22	2021					
A. Amount Bro	ought Forward Fro	m Last Ro	eport			\$			35,9	35.38					
B. Total Mone	B. Total Monetary Contributions And Receipts (From Schedul				dule I)	\$	5	0.00							
C. Total Funds Available (Sum Of Lines A and B)					\$	5			0.00						
D. Total Expe	D. Total Expenditures (From Schedule III)					\$	5		5,1	87.91					
E. Ending Cas	h Balance (Subtrac	t Line D	From Line	C)		\$	5		30,74	47.47	-				
F. Value Of In	-Kind Contribution	s Receive	ed (From S	chedu	le II)	\$	5			0.00	-				
G. Unpaid Deb	ots And Obligations	(From S	chedule IV	/)		\$;			0.00		·			
				AFF	IDAVI	t se	CTION								
	is a Committee rep		-					• •		_					
correct and comp	n) that this report, inc llete.	luding the	attached sc	neaule	s filed on	paper	or by elect	ronic me	eaium,	are to t	the best o	of my knov	viedge	and bei	let , true
Sworn to and sub	oscribed before me thi day of	S	20						Si	gnature	e of Perso	on Submitt	ing Rep	oort	
	Signatu	Ire				-					Prin	ited Name			
My Commission I	-										Ema	il			
	мо	DA	AY	YR				Are	a Code	e	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	s a report of a can	didate's a	authorized	Com	nittee, C	andid	late shall	sign he	ere.						
I swear (or affirm No 320) as amene	ı) that to the best of ı ded.	ny knowle	dge and beli	ief this	s political	comm	nittee has n	ot violat	ed any	/ provis	ions of th	e act of Ju	ine 3,1	937 (P.I	L. 1333,
Sworn to and subs	scribed before me this day of		20							S	ignature	of Candida	ite		
						-					Printe	ed Name			
My Commission Ex	Signature					-					Ema	nil			
						-									
	МО	DA	AY .	YR	ł			Area (Code		D	aytime Te	elephor	e Numl	ber

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
PSSU LOCAL 668 COPE FUND	From:	<u>10/19/20</u>	2 <u>1</u> To:	<u>11/22/2021</u>
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
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 Candidat	e		Reporting Period					
			From:	:		То		
		·			DATE			AMOUNT
Full Name of Contributing Committee			м	10	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	•)					
								PAGE TOTAL
ter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.					\$	0.00		

Use this Part to it	emize all other 50.01 to \$250.0	1 TO \$250.00 contribution 00 in the repo	s wi ortin	ith an ng per	aggreg iod.			rom
Name of Filing Committee or Candida	te		Rep	orting P	eriod			
			Fror	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	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	2.		\$	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		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	lule I, Detailed Sun	nmary Pa	age, Sectio	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			Rep	orting Pe	riod			
			Froi	n:		Т):	
				D	ATE		АМ	IOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Pl	ıs 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page	e, Sectio	on 3.			P#	AGE TOTAL 0.00

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			Report	ing Peric	d				
			From:			То:			
				D	ATE			AMOUNT	r
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 Sched	ule 1, Detailed Sumn	nary 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 Perio	od	
PSSU LOCAL 668 COPE FUND	From:	<u>10/19/2021</u> то:	<u>11/22/2021</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			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address		_				 \$	0.0)0
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	le,	F	AGE TOTAL	_
						\$	0.0	0

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

Name of Filing Committee or Candidate			Re	porting I	Period		
			Fro	om:		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 Plac	e of Business	City	Stat	e Zip	Code(Plus 4)	Descri	ption of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-Kind	d Contributions D	etaile	ed			PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidat	e		Reporti	ng Period			
PSSU LOCAL 668 COPE FUND			From	<u>10/19</u>	9/2021	То:	<u>11/22/2021</u>
				DATE			AMOUNT
To Whom Paid			мо	DAY	YEAR		
FRIENDS OF WANDA WILLIAMS			NO				
Mailing Address			10	26	2021	\$	500.00
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	171061062	CAMPA	IGN CONTR	RIBUTION	١	
To Whom Paid			мо	DAY	YEAR		
FRIENDS OF JOYCE MOORE							
Mailing Address			10	26	2021	\$	500.00
City MACUNGIE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	180620175	CAMPA	IGN CONTR	RIBUTION	١	
To Whom Paid			мо	DAY	YEAR		
RIENDS OF KEVIN MADDEN							
Mailing Address		10	26	2021	\$	500.00	
City MEDIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	19063	CAMPA	IGN CONTR	RIBUTION	J	
To Whom Paid			мо	DAY	YEAR		
GAINEY FOR MAYOR / PNC BANK							
Mailing Address			10	26	2021	\$	1,000.00
City PITTSBURGH	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	15222	CAMPA	IGN CONTR	RIBUTION	١	
To Whom Paid			мо	DAY	YEAR		
COMMITTEE TO ELECT TYLER TITUS							
Mailing Address			10	26	2021	\$	500.00
City ERIE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	16508	CAMPA	IGN CONTR	RIBUTION	N	
To Whom Paid			мо	DAY	YEAR		
COPE COLLECTIONS ACCOUNT (SEIU ACCOUNT)	PE COLLECTIONS ACCOUNT (SEIU LOCAL 668 COPE CITIZENS BANK COUNT)						
Mailing Address	ailing Address		7	30	2021	\$	1,000.00
City	State	Zip Code (Plus 4)	4) Description of Expenditure				
			TRANS	ER TO CO	VER FUN	D SHOR	TAGE

								AGL 12
To Wh	om Paid			мо	DAY	YEAR		
PARAG	GON PAYMENT SOLUTIO	NS						
Mailin	g Address			8	31	2021	\$	21.78
City	SCOTTSDALE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
		AZ	85257	PARAGO	ON SERVIC	E CHARG	GE / FEE	
To Wh	om Paid				DAY	YEAR		
COPE ACCO	COLLECTIONS ACCOUN	T (SEIU LOCAL 668 COP	E CITIZENS BANK	мо	DAT	TEAK		
Mailin	g Address			8	31	2021	\$	1,000.00
City		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
				TRANSF	ER TO CO	VER FUN	D SHORT	AGE
To Wh	om Paid			мо	DAY	YEAR		
PARAG	GON PAYMENT SOLUTIO	NS		MO				
Mailin	g Address			8	31	2021	\$	21.78
City	SCOTTSDALE	State	Zip Code (Plus 4)	Descrip	L tion of Exp	ı enditure		
		AZ	85257	PARAGO	ON SERVIC	E CHARG	GE / FEE	
To Wh	om Paid							
PARAG	GON PAYMENT SOLUTIO	NS		мо	DAY	YEAR		
Mailing Address				9	30	2021	\$	21.18
City	SCOTTSDALE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
		AZ	85257	PARAGON SERVICE CHARGE / FEE				
To Wh	om Paid					VEAD		
CITIZ	ENS BANK			мо	DAY	YEAR		
Mailin	g Address			9	30	2021	\$	3.00
City		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
				BANK SERVICE CHARGE FEE				
To Wh	om Paid	·						
PARAG	GON PAYMENT SOLUTIO	NS		мо	DAY	YEAR		
Mailin	g Address			10	31	2021	\$	117.17
City	SCOTTSDALE	State	Zip Code (Plus 4)	Descrip	L tion of Exp	enditure	1	
		AZ	85257	PARAGO	ON SERVIC	E CHARG	GE / FEE	
To Wh	om Paid	•						
CITIZ	ENS BANK			мо	DAY	YEAR		
Mailin	g Address			10	31	2021	\$	3.00
City		State	Zip Code (Plus 4)	Descrip	l tion of Exp	enditure	I	
•				-			E	
		I	1	1				PAGE TOTAL
Enter	Grand Total of Expen	ditures on Page 1, Re	port Cover Page, Item D).			<u> </u>	E 107 01
							\$	5,187.91