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 20	00189				port		CANDI	DATE		СОМ	4ITTEE	✓	LOBI	BYIST	
Name of Filing C	Committee, Can	didate or I	obbyist:		PHI	LA F	ED TE	ACH (PF	T) COI	4 SUI	PT PUB	EDU				
Street Address:	1816 CHES	STNUT ST														
City:	PHILADELP	HIA						State:	PA			Zip Cod	ie: 19	9103		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	AY PRE	-	2.	30 DA PRIMA		POST-	3. X		AMENDM REPORT?		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA	AY PRI	E-	5.	30 DA		POST-	6.		TERMINATION Yes REPORT?				~
report type)	ANNUAL REPO	RT 7.	Year 2005					NG METHO CHECK OI				PAPER		/	DISKE	TTE
Name of Office S	- Sought by Candi	idate:						DATE O	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code
								МО	DAY	YE	AR		10000			
								11		8	2005		(SEE IN	ISTRUCTI	ONS FOR O	CODES)
	Summary of Receipts and Expenditures from: MO DAY YEAR MO DAY YEAR									FO	R OFFI	CE USE	ONLY			
			1 1	-	1	I	О	6		6	2005	ļ				
A. Amount Bro	ught Forward F	rom Last I	Report				\$			397,3	317.69					
B. Total Monetary Contributions And Receipts (From Schedule I)									29,082.89							
C. Total Funds	Available (Sum	Of Lines	A and B)				\$			426,4	100.58					
D. Total Expen	ditures (From S	chedule I	II)				\$			7	'50.00					
E. Ending Cash	Balance (Subti	act Line D	From Line	C)			\$		4	125,6	50.58					
F. Value Of In-	Kind Contributi	ons Recei	ved (From S	chedu	le II	[)	\$				0.00					
G. Unpaid Debt	s And Obligation	ns (From	Schedule I\	/)			\$				0.00			1		
				AFF	FID/	٩VI	T SE	CTION								
PART I - If this is	s a Committee i	eport, tre	asurer sign	here.	If th	is is	a Can	ndidate re	port, c	andi	date sig	ın here.				
I swear (or affirm) correct and comple		including th	e attached so	hedule	s file	d on	paper (or by electi	ronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , true
Sworn to and subs	cribed before me day of	this	20							S	ignature	of Perso	n Submit	ting Rep	ort	
							_					Prin	ted Name	e		
My Commission Ex	-	ature						,				Ema	il			
	мо	г	PAY	YR			_		Are	ea Cod	le	Daytim	e Telepi	none Nu	mber	
Part II- If this is	a report of a c	andidate's	authorized	Comr	nitte	e, C	andida	ate shall :	sign he	ere.						
I swear (or affirm) No 320) as amende		of my know	ledge and bel	ief this	s polit	tical	commi	ittee has n	ot viola	ted an	y provisi	ions of the	e act of J	une 3,1	937 (P.L	. 1333,
Sworn to and subsc	ribed before me t	his									Si	ignature o	of Candid	ate		
	day of						_					Drinto	d Name			
	Signatu						_					Finite	Hallie			
My Commission Exp	_											Ema	il			
	мо	Г	DAY	YF	₹		-		Area	Code		Da	aytime T	elephor	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

N. (2011)			
Name of Filing Committee or Candidate	Reporting Period		
PHILA FED TEACH (PFT) COM SUPT PUB EDU	From:	То:	<u>6/6/2005</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			
TOTAL for the Reporting	g Period (1)	\$	21,847.58
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	g Period (4)	\$	7,235.31
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa		\$	29,082.89

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate valu	-			-			
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fro	om:		То	:	
		L			DATE			AMOUNT
Full Name of Contribut	ing Committee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	•	•				-		DAGE TOTAL

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

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 Camulate				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 Repo			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.)

Name of Filing Committee or Candidate	Reporting Period							
	Froi	m:		To	То:			
				D	ATE		АМ	OUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address				\$	0.00			
City	State Zip Code (Plus 4)							
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed S	Summary Page,	Section	on 3.			PA:	GE TOTAL 0.00

7,235.31

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 Perio	d		
PHILA FED TEACH (PFT) COM SUPT PU	3 EDU		From:			To:	<u>6/6/2005</u>
				D.	ATE		AMOUNT
Full Name AMALGAMATED BANK OF NY				МО	DAY	YEAR	
Mailing Address 11 - 15 UNION SQU	ARE						\$ 7,235.31
City NEW YORK	State NY	Zip Code (Plus 4)	5	31	2005	
Receipt Description INT		·					
Enter Grand Total of Part E on Schedu	ıle I, Detailed	Summary Page,	Section	4.			PAGE TOTAL

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		
PHILA FED TEACH (PFT) COM SUPT PUB EDU	From:	То:	<u>6/6/2005</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	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	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 S	chedule II, In-Kir	nd Contributions Deta	iled Sun	nmary Pag	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					Re	Reporting Period					
								To:	То:		
							DATE			AMOUNT	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address								\$	0.00		
City	State		Zip Code(Plus 4)								
Employer of Contributor	•		•			Occupa	tion				
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution	
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, i	In-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candi	late		Reporti	ng Period			
PHILA FED TEACH (PFT) COM SUP	From			То:	6/6/2005		
				DATE			AMOUNT
To Whom Paid CITIZENS FOR BISHOP			мо	DAY	YEAR		
Mailing Address				12	2005	\$	250.00
City	State	Zip Code (Plus 4)	Description of Expenditure CONT				
To Whom Paid FRIENDS OF ROB WONDERLING FO	OR STATE SENATE		МО	DAY	YEAR		
Mailing Address			5	12	2005	\$	500.00
City State Zip Code (Plus 4)				otion of Exp	enditure		
Enter Grand Total of Expenditu	es on Page 1, Re	port Cover Page, Item I). D.				PAGE TOTAL

750.00