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 :	5500011						CANDI	DATE		COM	MITTEE	✓	LOBI	BYIST		
Name of Filing	Committee, Candida	ate or Lo	obbyist:		Filed B		668 COP	E FUNI	L							
Street Address:																
City:	HARRISBURG						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. X		AMENDMENT REPORT?		Yes	No	D	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 D/ ELEC		POST-	6.		TERMINATION REPORT?		Yes	No	C	\checkmark
report type)	ANNUAL REPORT	7.	Year 2022				NG METHO			PAPER		\checkmark	DISKI	ETTE		
Name of Office	Sought by Candidat	te:					DATE O	FELE	СТІО	N	District Number	Office Code	Par	ty Code	Cour	
							мо	DAY	YE	AR						
							11		8	2022		(SEE INS	STRUCTI	ONS FOR	CODES)
Summary of Expenditures	Receipts and	мо	DAY	YEAR			мо	DAY	YE	AR	FC	OR OFFIC	E USE	ONLY		
	5 3 2022						6		6	2022						
A. Amount Bro	A. Amount Brought Forward From Last Report								26,4	11.68						
B. Total Monet	B. Total Monetary Contributions And Receipts (From Schedule I					\$				0.00						
C. Total Funds	C. Total Funds Available (Sum Of Lines A and B)					\$			26,4	11.68						
D. Total Expen	ditures (From Scho	edule II	[)			\$			12,6	20.00	4					
E. Ending Cash	n Balance (Subtract	t Line D	From Line	C)		\$			13,79	91.68	-					
	-Kind Contributions		•		le II)	\$				0.00	-					
G. Unpaid Deb	ts And Obligations	(From S	chedule IV	/)		\$				0.00						
				AFF	IDAVI	T SE	CTION									
	is a Committee report, incl	•	-							_		f mv knov	vledae	and bel	ief , tr	ue
correct and compl	lete.	-										•				
Sworn to and sub	scribed before me this day of	i	20						Si	gnature	e of Perso	n Submitt	ing Rep	oort		
	Signatu	re	-			_					Prin	ted Name				-
My Commission E	-										Ema	il				-
	мо	D/	AY	YR				Are	ea Code	e	Daytin	ne Teleph	one Nu	mber		
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nittee, C	andid	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amend) that to the best of n ed.	ıy knowle	dge and beli	ief this	political	comm	ittee has n	ot viola	ted any	/ provis	ions of th	e act of Ju	ine 3,1	937 (P.I	L. 133	з,
Sworn to and subse	cribed before me this day of		20							s	ignature	of Candida	ite			-
						-					Printe	ed Name				-
Signature My Commission Expires						-					Ema	il				_
	мо	D/	AY	YR	2	-		Area	Code		D	aytime Te	elephon	e Numl	per	-

SCHEDULE I **CONTRIBUTIONS AND RECEIPTS**

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
PSSU LOCAL 668 COPE FUND	From:	<u>5/3/202</u>	<u>2</u> To:	<u>6/6/2022</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	(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	g Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	y 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		Repor	rting F				
			From: To:					
				DATE AMOU				
Full Name of Contributing Committee MO DAY YEAR								
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	•)					
								PAGE TOTAL
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.								0.00

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 Candida	te		Rep	orting P	eriod			
			Fror	m:		Тс):	
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address	_	_					\$	0.00
City	ty State Zip Code (Plus 4)							
								PAGE TOTAL
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 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
nter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 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	То:	
				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 Candidat	e		Report	ing Perio	d				
			From:			То:	:		
				DATE					-
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (Plus 4)						
Receipt Description	•				•				
Factor Canad Table 6 Post 5 on Cale date 7. Post-iled Commence Posts Continue 4								PAGE TO	TAL
nter Grand Total of Part E on Schedule I, Detailed 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 COPE FUND	From:	<u>5/3/2022</u> то:	<u>6/6/2022</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	ſF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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				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.	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 C	Candidate		Reporti	ng Period					
PSSU LOCAL 668 COPE FUND			From	<u>5/:</u>	3/2022	То:	<u>6/6/2022</u>		
				DATE			AMOUNT		
To Whom Paid			мо	DAY	YEAR				
RICK FOR PHILLY			no						
Mailing Address			5	5	2022	\$	1,500.00		
City PHILADELPHIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	PA	19139	CONTR	IBUTION					
To Whom Paid FRIENDS OF DAVID MADSEN			мо	DAY	YEAR				
Mailing Address			5	5	2022	\$	1,500.00		
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	Description of Expenditure					
	PA	17106		CONTRIBUTION					
To Whom Paid FRIENDS OF CAROL KAZEEM				DAY	YEAR				
Mailing Address			5	5	2022	\$	1,500.00		
City CHESTER	State	Zip Code (Plus 4)	Descrip	 tion of Exp	 enditure				
	PA	19013	CONTRIBUTION						
To Whom Paid									
DILLION FOR SENATE			мо	DAY	YEAR				
Mailing Address			5	5	2022	\$	4,000.00		
City PHILADELPHIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	PA	19154	CONTR	BUTION					
To Whom Paid			мо	DAY	YEAR				
FRIENDS OF JUSTIN FLEMING							1 500 00		
Mailing Address			5	5	2022	\$	1,500.00		
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	PA 17110			IBUTION					
To Whom Paid			мо	DAY	YEAR				
RIENDS OF IZZY						1 500 00			
lailing Address		5	5	2022	\$	1,500.00			
City LANCASTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	PA	17608	CONTRIBUTION						

To Whom P	Paid			мо	DAY	YEAR		
GREEN FO	R SAFE AND ACCOUNTABL	E COMMUNITIES		MO		TEAK		
Mailing Add	dress			5	5	2022	\$	1,000.00
City PH1	ILADELPHIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA 19129							
To Whom P	To Whom Paid					YEAR		
DELAWARE	E COUNTY CLC COPE			мо	DAY			
Mailing Add	dress						\$	120.00
City PLY	MOUTH MEETING	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	19462	BREAKF	AST WITH	CANDID	ATES	
								PAGE TOTAL
Enter Gra	Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	12,620.00