### **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 g	990004	41				Repor Filed I		CA	NDI	DATE		СОМ	4ITTEE	<b>✓</b>	LOB	BYIST		
Name of Filing C	Committee, Ca	ndidat	e or Lo	bbyis	t:	P	SSU L	OCAL	668	COPI	E FUNI	D							
Street Address:																			
City:	HARRISB	URG							State	e:	PA			Zip Cod	le: 17	110			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1	l.	2ND F PRIMA	RIDAY ARY	PRE-	2.	30 D. PRIM		Р	OST-	3.		AMENDM REPORT?		Yes	N	0	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION		١.	2ND F ELECT	RIDAY TION	PRE-	5. <b>X</b>	30 D	AY TION	Р	OST-	6.		TERMINA REPORT?		Yes	N	0	<b>√</b>
report type)	ANNUAL REP	ORT 7	· .	Year	2022					G METHOD HECK ONE				PAPER	<b>√</b>	DISK	ETTE		
Name of Office S	Sought by Can	didate	:				•		DAT	ΈO	F ELE	CTIC	ON	District Number	Office Code	Pai	rty Code	Cour	
									МО		DAY	Y	EAR						
										11		8	2022		(SEE INS	TRUCTI	ONS FOR	CODES	)
Summary of		ıd	МО	DA	Y ,	YEAR			МО		DAY	Y	EAR	FO	R OFFIC	E USE	ONLY		
Expenditures	5 Trom:			9	20	20	22 1	О		10	:	24	2022						
A. Amount Bro	ught Forward	From	Last Re	eport				\$				13,	791.68						
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 0.00																			
C. Total Funds	Available (Su	m Of L	ines A	and B	3)			\$	5			13,	791.68						
D. Total Expend	ditures (From	Sched	iule III	(1)				\$	5				750.00						
E. Ending Cash	Balance (Sub	tract L	_ine D	From	Line C	)		\$	5			13,0	041.68						
F. Value Of In-	Kind Contribu	tions F	Receive	ed (Fr	om Scl	hedule	e II)	\$	5				0.00						
G. Unpaid Debt	ts And Obligat	ions (I	From S	chedu	ıle IV)			\$	5				0.00						
						AFFI	DAVI	T SE	CTI	NC									
PART I - If this is		-	•		_								_						
I swear (or affirm) correct and complete		t, includ	ling the	attach	ed sche	edules	filed on	paper	or by	electr	onic m	ediun	n, are to t	he best of	f my knov	vledge	and be	ief , tr	ue
Sworn to and subs	cribed before m day of	e this		20						,		:	Signature	of Persor	1 Submitt	ing Re	port		
	— ————————————————————————————————————	gnature						<u>-</u>						Print	ted Name				_
My Commission Ex	cpires							_		•				Emai	il				
	МО		DA	lΥ		YR					Are	ea Co	de	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a	candic	date's a	autho	rized (	Commi	ittee, C	Candio	late s	hall s	sign he	ere.							
I swear (or affirm) No 320) as amende		t of my	knowle	dge an	d belie	f this p	oolitical	comn	nittee l	nas no	ot viola	ted a	ny provis	ions of the	e act of Ju	ine 3,1	937 (P.	L. 133	3,
Sworn to and subsc		this		25									s	ignature o	of Candida	ite			-
-	day of —— ——			20 -				_						Printe	d Name				-
	Signa	ture						_											_
My Commission Exp	oires													Emai	il				
	мс	)	DA	λY		YR		_			Area	Code		Da	ytime Te	elephor	ne Num	ber	-

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Detailed Summary ruge				
Name of Filing Committee or Candidate	Reporting	Period		
PSSU LOCAL 668 COPE FUND	From:	9/20/202	<u>2</u> To:	10/24/2022
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 antotals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page			\$	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	R	eporting	Period			
		F	rom:		То	I	
		•		DATE			AMOUNT
Full Name of Contributing Committee			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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

### **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.

Name of Filing Comn	nittee or Candidate	Re	eporting	Period			
		Fr	om:		To	<b>)</b> :	
				DATE			AMOUNT
Full Name of Contribut	or		МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
				1			
	I	I					PAGE TOTAL

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	Period					
			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 Candidate			Rep	orting Pe	riod			
			Fron	n:		т	o:	
				D/	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac	e of Business	City		•	State		Zip	Code (Plus 4)
Enter Grand Total of Part C on Schee	dule I, Detailed Su	ımmary Page,	Section	on 3.			\$	PAGE TOTAL 0.00
							т	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		Report	ing Peri	od			
			From:			To:		
		•		E	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	us 4)					
Receipt Description	<u> </u>	<b>'</b>			•			
Futor Curred Total of Doub	F an Cabadula I Datailad	I Comment Dame Co		4			ı	PAGE TOTAL
Enter Grand Total of Part	e on Schedule I, Detalled	Summary Page, So	ection	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	d							
PSSU LOCAL 668 COPE FUND	From:	<u>9/20/2022</u> <b>To:</b>	10/24/2022						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS 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 Candidate			Reporting Period					
			From:			To:		
				DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address		_				<b> </b>		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:		•	•			•		
Enter Grand Total of Part F on Sche Section 2.	dule II, In-Kind (	Contributions Detai	iled Sum	mary Pag	je,		PAGE TOTAL	
						\$	(	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting	Period				
PSSU LOCAL 668 COPE FUND	From	9/20/2022	То:	10/24/2022		
		DATE		AMOUNT		

				DATE		AMOUNT
To Whom Paid			МО	DAY	YEAR	
DELAWARE COUNTY CLC CO	PE EVENT		MO		ILAK	
Mailing Address			9	21	2022	\$ 500.00
City OXFORD	OXFORD State Zip Code (Plus 4) Description of Expenditure					
	PA	19363	EVENT -	- 5 TICKET	S	
To Whom Paid			мо	DAY	YEAR	
DELAWARE COUNTY CLC CO	PE EVENT		140		ILAK	
Mailing Address			9	28	2022	\$ 250.00
City OXFORD	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure	
	PA	19363	PROGRA	AM ADVITI	SEMENT	
						PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$ 750.00