### **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 81	00155				Rep File			CAND	DATE		СОМ	<b>4ITTEE</b>	✓	LOB	BYIST		
Name of Filing C	Committee, Can	didate or	Lobbyi	ist:		DIS	T C	OUNC:	IL 47 PA	С								
Street Address:	1606 WALN	NUT ST																
City:	·								State:	PA			Zip Cod	ie: 19	9103			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.		FRIDA` ⁄IARY	Y PRE	- :	2.	30 DA		POST-	3.		AMENDM REPORT		Yes	No	`	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.		FRIDA'	y pre	-	5.	30 DA		POST-	6. <b>X</b>		TERMINA REPORT		Yes	No	`	
report type)	ANNUAL REPO	<b>RT</b> 7.	Year	r 2005					NG METH CHECK O				PAPER		<b>/</b>	DISKE	TTE	
Name of Office S	ought by Candi	date:	-						DATE C	F ELE	CTIC	N	District Number	Office Code	Par	ty Code	Count Code	у
									МО	DAY	YI	AR		100.0			300	
									11		8	2005		(SEE IN	ISTRUCTI	ONS FOR (	CODES)	
Summary of Expenditures	Receipts and from:	МО		AY	YEAR		_	•	МО	DAY		EAR	FO	R OFFI	CE USE	ONLY		
-			1	1		1		O	11		28	2005						
	ught Forward F		•		C-l			\$			-	097.41 341.68						
	ary Contribution				Scne	auie	1)	\$				041.00						
	Available (Sum			В)				\$				139.09						
D. Total Expenditures (From Schedule III)							\$			1,0	)53.34							
E. Ending Cash Balance (Subtract Line D From Line C)							\$			3,3	85.75							
F. Value Of In-	Kind Contribution	ons Recei	ved (F	rom So	chedu	le II	)	\$				0.00						
G. Unpaid Debt	s And Obligation	ns (From	Sched	lule IV	)			\$				0.00						
					AFF	IDA	١٧٧	T SE	CTION									
PART I - If this is				_						-								
I swear (or affirm) correct and comple		including ti	ne attac	ched sch	nedules	s filed	d on	paper	or by elect	tronic m	edium	, are to t	the best o	f my kno	wledge	and belie	ef , tru	e,
Sworn to and subs	cribed before me	this	20								S	ignature	of Perso	n Submit	ting Re	ort		-
			_					- -					Prin	ted Name	e			-
My Commission Ex	-	ature											Ema	il				-
	мо	ı	DAY		YR			_		Ar	ea Coo	le	Daytim	e Telepi	none Nu	mber		-
Part II- If this is	a report of a c	andidate'	s autho	orized	Comn	nitte	e, C	andid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende		of my know	ledge a	and beli	ef this	polit	ical	comm	ittee has r	not viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333,	
Sworn to and subsc		nis										s	ignature o	of Candid	ate			-
	day of —— ———		20					_					Printe	d Name				-
	Signatu	re						-										╻┃
My Commission Exp	-												Ema	il				
	МО	ı	DAY		YR			-		Area	Code		Da	aytime T	elephor	ne Numb	er	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting Period		
DIST COUNCIL 47 PAC	From:	To:	11/28/2005
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			
TOTAL for the Reporting	g 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	g Period (2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)			
Contributions Received From Political Committees (Part C)		\$	340.26
All Other Contributions (Part D)		\$	0.00
TOTAL for the Reporting	Period (3)	\$	340.26
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)			
TOTAL for the Reporting	g Period (4)	\$	1.42
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		\$	341.68

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	Part to itemize on n an aggregate val	-			•			
Name of Filing Committee	or Candidate		Re	porting	Period			
			Fr	om:		То	:	
					DATE			AMOUNT
Full Name of Contributing Co	mmittee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	4)					
							$\overline{\Box}$	PAGE 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 Filing Committee or Candidate  Rep			Reporting Period					
			Fro	m:		To	):	
					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.

**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.

**Reporting Period** 

DIST COUNCIL 47 PAC		From:			То:	11/28/2005		
			DA	TE		AMOUNT		
Full Name of Contributing Committee AFSCME LOCAL 54 PAC			МО	DAY	YEAR			
Mailing Address 1606 WALNUT STRE	ET		10	20	2005	\$	340.26	
City PHILADELPHIA	State	Zip Code (Plus 4)	10	20	2005			

191035482

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PΑ

Name of Filing Committee or Candidate

PHILADELPHIA

PAGE TOTAL \$ 340.26

### 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:		То	То:		
				D	ATE		АМО	DUNT	
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plu	s 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 Su	ummary Page,	Section	on 3.			PAC	<b>GE TOTAL</b> 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 Perio	d		
DIST COUNCIL 47 PAC			From:			To:	11/28/2005
				D	ATE		AMOUNT
Full Name CITIZWNS BANK				МО	DAY	YEAR	
Mailing Address 2001 MARKET STRE	ET						\$ 1.42
City PHILADELPHIA	<b>State</b> PA	<b>Zip Code (</b> 19103	Plus 4)	10	31	2005	
Receipt Description INTEREST							
Enter Grand Total of Part E on Schedu	ıle I. Detailed Sumn	narv Page.	Section	4.		ſ	PAGE TOTAL
	<b>,</b>	,					\$ 1.42

#### **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		
DIST COUNCIL 47 PAC	From:	To:	11/28/2005
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	<b>\$</b>	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)	<b>\$</b>	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	ate		Reporting	g Period			
			From:			То:	
				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 S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	те Г		PAGE TOTAL
Section 2.	ciicadic 11, 111 Kii	ia contributions beta	nea Sam	iiiiai y i aş	,		PAGE TOTAL
						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate				Re	eporting F	Period			
				Fr	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	tion			
Employer Mailing Address/Principal Plac Business	ee of Ci	ity	State	•	Zip 4)	Code(Plus	Descri	ption o	of Contribution
Enter Grand Total of Part G on Scho Summary Page, Section 3.	edule II, In-l	Kind (	Contributions [	etail	led				PAGE TOTAL 0.00

### STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	ndidate		Reportir	ng Period	Reporting Period					
DIST COUNCIL 47 PAC			From			То:	11/28/2005			
				AMOUNT						
To Whom Paid CITIZENS BANK			МО	DAY	YEAR					
Mailing Address 2001 MARKET STREET				17	2005	\$	32.56			
City PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19103	Description of Expenditure BANK FEE (SERVICE CHARGE)							
To Whom Paid AFSCME DISTRICT COUNCIL 47			МО	DAY	YEAR					
Mailing Address 1606 WALNU	JT STREET		10	28	2005	\$	1,020.78			
City PHILADELPHIA	State	Zip Code (Plus 4)	Descrip	otion of Exp	penditure					
	PA	19103		URSEMENT OR G.O.T.		NCIL FOR	R PAYMENT OF			
							PAGE TOTAL			

1,053.34