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 99	900041				Repo			CAN	NDII	DATE		СОМ	4ITTEE	✓	LOB	BYIST		
Name of Filing C	ommittee, Can	didate or	Lobb	yist:		PSSU	J LC	DCAL	668 S	EIU	COPE	FUN	ID						
Street Address:																			
City:	HARRISBU	RG							State	:	PA			Zip Cod	l e: 17	110-9	602		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. X		ID FRIDAY IMARY	/ PRE-	2		30 DA		POST- 3.			AMENDMENT REPORT?		Yes	√ N	0		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.		ID FRIDAY ECTION	/ PRE	- 5		30 DA		Р	OST-	6.		TERMINATION REPORT?		Yes	N)	√
report type)	ANNUAL REPO	RT 7.	Ye	ear 2023					NG ME					PAPER		√	DISK	ETTE	
Name of Office S	ought by Cand	idate:				•			DATI	E O	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Cour	
									МО		DAY	YE	AR		•				
										11		7	2023		(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of		МО		DAY	YEAR				МО		DAY	YI	EAR	FO	R OFFIC	E USE	ONLY		
Expenditures	Trom:		1	1	20	023	T	<u> </u>		3	:	27	2023						
A. Amount Brought Forward From Last Report \$							8,0	041.00											
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 0.00																			
C. Total Funds Available (Sum Of Lines A and B)							\$				8,0	041.00							
D. Total Expenditures (From Schedule III)							\$				1	50.00							
E. Ending Cash	Balance (Subti	act Line	D Fro	m Line C	C)			\$				7,8	91.00						
F. Value Of In-	Kind Contributi	ons Rece	ived ((From Sc	hedul	e II)		\$					0.00						
G. Unpaid Debt	s And Obligation	ns (From	1 Scho	edule IV)			\$					0.00						
					AFF:	IDA	VI٦	ΓSE	CTIC	N									
PART I - If this is				_									_						
I swear (or affirm) correct and comple		including t	ine att	acned scr	ieauies	Tilea	on I	paper	or by e	iectr	onic m	eaium	, are to t	ne best o	тту кпоч	vieage	and bei	ier , tr	ue
Sworn to and subs	cribed before me day of	this	20)						•		S	ignature	of Perso	n Submitt	ing Re _l	ort		
	Sign	ature	_					-						Prin	ed Name				
My Commission Ex	rpires							_		-				Emai	I				
	МО		DAY		YR						Are	ea Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a c	andidate'	's aut	thorized	Comm	ittee	, Ca	andid	ate sh	alls	sign he	ere.							
I swear (or affirm) No 320) as amende		of my knov	wledge	e and belie	ef this	politio	cal	comm	ittee ha	as no	ot viola	ted an	y provis	ions of the	e act of Ju	ine 3,1	937 (P.	L. 133	3,
Sworn to and subsc	ribed before me t day of	his	20	,									S	ignature o	f Candida	ite			_
				, <u> </u>				-						Printe	d Name				-
	Signatu	re						-		-				Ema	1				_
My Commission Exp	ires													Ema	•				_
	МО		DAY		YR			-			Area	Code		Da	ytime Te	lephor	ne Numi	er	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
PSSU LOCAL 668 SEIU COPE FUND	From:	1/1/202	<u>3</u> To:	3/27/2023
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) Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	J 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 Car	Name of Filing Committee or Candidate			Reporting Period					
			Fr	om:		То	•		
					DATE			AMOUNT	
Full Name of Contributing Commit	tee			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

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	orting P	eriod			
			Fro	m:		To):	
					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, 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	ne of Filing Committee or Candidate		Reporting Period						
			From:			То:			
				DA	TE		А	MOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR	\$		0.00
Mailing Address							7 *		0.00
City	State	Zip Cod	e (Plus 4)						
<u> </u>	I	ı			ı	<u> </u>			
		_		_				PAGE TOT	AL
Enter Grand Total of Part C on Scheo	lule 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			Rep	orting Pe	riod			
			Fror	n:		To	o :	
				D	ATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR	\$	0.00
Mailing Address							1	
City	State	Zip Code (Plu	s 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip C	Code (Plus 4)
Enter Grand Total of Part C on Schee	dule I, Detailed Su	ımmary Page	Section	on 3.			\$	PAGE TOTAL 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:			То:		
		•		D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	ıs 4)					
Receipt Description	<u>'</u>	<u>'</u>			•			
Futor Curred Total of Bout	For Cabadula I Batailad	I Comment Page Co		4				PAGE TOTAL
Enter Grand Total of Part	E on Schedule 1, Detailed	Summary Page, Se	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 Period		
PSSU LOCAL 668 SEIU COPE FUND	From:	<u>1/1/2023</u> To:	<u>3/27/2023</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, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Car	ndidate		Reporting Period					
			From:			То:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•		•	•		•		
					-			
Enter Grand Total of Part F o	n Schedule II, In-Ki	nd Contributions Detai	led Sun	ımary Pa	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				Rep	porting	Period			
				Fro	m:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address				-				\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occup	ation			
Employer Mailing Address/Principal Plac	e of Business	City	у	State	e Zip	Code(Plus 4)	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, In-Kin	nd C	Contributions D	etaile	ed				PAGE TOTAL
Summary Page, Section 3.									0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period						
PSSU LOCAL 668 SEIU COPE FUND	From	1/1/2023	То:	<u>3/27/2023</u>			

					DATE			AMOUNT
To Wi	nom Paid			мо	DAY	YEAR		
Ted K	Copas			1-10				
Mailin	ng Address			9	15	2023	\$	150.00
City	Greensburg	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure		
		PA	15601	donatio	n			
								PAGE TOTAL
Ente	nter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							150.00