#### **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 8	30003	67				port		CANDI	DATE		СОМ	<b>4ITTEE</b>	✓	LOB	BYIST				
Name of Filing C	Committee, Ca	ndida	te or Lo	bbyist:		Loca	al 07	712 IE	BEW COP	Έ										
Street Address:	217 SASS	SAFRA	S LANE																	
City:	BEAVER								State:	PA			Zip Cod	de: 15	5009					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	-	1.	2ND FRIDA' PRIMARY	Y PRE	-	2.	30 DA PRIMA					AMENDM REPORT		Yes	No	<b>~</b>			
(place X to the right of	6TH TUESDAY PRE-ELECTION		1.	2ND FRIDA' ELECTION	y pre	≣-	5.	30 DA	• •	POST-	6. <b>X</b>			TERMINATION Yes REPORT?		No	<b>~</b>			
report type)	ANNUAL REP	ORT	7.	<b>Year</b> 2006					IG METH				PAPER		<b>V</b>	DISKE	TTE			
Name of Office S	Sought by Can	didate	e:						DATE C	F ELE	CTIO	N	District Number	Office Code	Pai	ty Code	County Code			
									МО	DAY	YE	AR	Number	Code			couc			
									11		7	2006		(SEE IN	STRUCTI	ONS FOR (	CODES)			
Summary of Expenditures		d	МО	DAY	YEAR				МО	DAY	YI	AR		R OFFI	CE USE	ONLY				
				1 1		1	I	О	11		27	2006								
A. Amount Bro	ught Forward	From	Last Re	eport				\$			7,3	394.20								
B. Total Monet	ary Contribution	ons A	nd Rece	eipts (From	Sche	dule	<b>I</b> )	\$			1,5	570.04	4							
C. Total Funds	Available (Sur	m Of L	ines A	and B)				\$			8,9	964.24								
D. Total Expend	ditures (From	Sche	dule III	1)				\$			7	700.00								
E. Ending Cash	Balance (Sub	tract	Line D I	From Line (	C)			\$			8,2	64.24								
F. Value Of In-	Kind Contribut	tions	Receive	ed (From Se	chedu	le II	[)	\$				0.00								
G. Unpaid Debt	s And Obligati	ions (	From S	chedule IV	)			\$				0.00			'					
					AFF	IDA	٩VI	T SE	CTION											
PART I - If this is		-	•							-										
I swear (or affirm) correct and comple		t, inclu	ding the	attached sci	nedule	s file	d on	paper (	or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and beli	ef , true			
Sworn to and subs	cribed before me	e this		20							S	Signature	of Perso	n Submit	ting Re	ort				
								<b>-</b>					Prin	ted Name	<u> </u>					
My Commission Ex	-	nature	•										E	:						
rry commission Ex	—— мо		DA	Υ	YR			-		Ar	ea Cod	le	Ema Daytim	ie Telepl	none Nu	mber				
Part II- If this is	a report of a	candi	date's a	authorized	Comn	nitte	e, C	andida	ate shall	sian h	ere.									
I swear (or affirm) No 320) as amende	that to the best						•			_		y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333,			
Sworn to and subsc	ribed before me	this										s	ignature o	of Candid	ate					
-	day of							_												
	C! :	h						_					Printe	d Name						
My Commission Exp	Signat ires	ure											Ema	il						
	мо	)	DA	ΛΥ	YR	1		-		Area	Code		Da	aytime T	elephor	ie Numb	er			

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting Period		
Local 0712 IBEW COPE	From:	То:	11/27/2006
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			
TOTAL for the Reporting	Period (1)	\$	1,570.04
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		\$	1,570.04

#### **PART A**

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

\$50.01 TO \$250.00

Name of Filing Committee or Candidate				eporting	Period			
			Fr	om:		То	:	
					DATE			AMOUNT
Full Name of Contributing	g Committee			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 Cand	idate		Rep	oorting P	eriod			
			Fro	m:		To	):	
					DATE		АМ	OUNT
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.

Name of Filing Committee or Candi	date		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary 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	<b>)</b> :	
				D	ATE		А	MOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupa	tion		•	
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Coo	de (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary 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 Candid	ate		Report	ting Perio	od		
			From:			To:	
				D	ATE		AMOUNT
Full Name				МО	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code (	Plus 4)				
Receipt Description		·					
Enter Grand Total of Part E on Sch	edule I. Detaile	d Summary Page	Section	4			PAGE TOTAL
The stand rotal of rare E on och	caale 1, betallet	a cammary rage,	5000001	••			\$ 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		
Local 0712 IBEW COPE	From:	To:	11/27/2006
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 Candidat	:e		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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y 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 l	Period			
					Fro	om:		To:		
					•		DATE			AMOUNT
Full Name of Contributor						МО	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupa	ition		•	
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iption	of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, I	in-Kind	Contributi	ons De	etaile	ed				<b>PAGE TOTAL</b> 0.00

### STATEMENT OF EXPENDITURES

Name of Filing Committee or C	Candidate		Reporti	ng Period			
Local 0712 IBEW COPE			From			То:	11/27/2006
				DATE			AMOUNT
To Whom Paid Committee to Elect Uhric			МО	DAY	YEAR		
Mailing Address P.O. Box 9	46		10	26	2006	\$	100.00
<b>City</b> Coraopolis	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15108	1	otion of Exp			
<b>To Whom Paid</b> Committee to Elect Judy R. Er	slen, Clerk of Courts		МО	DAY	YEAR		
Mailing Address 1400 15th	Street		10	26	2006	\$	100.00
<b>City</b> Conway	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15027	<b>Descrip</b> Fundra	otion of Exp	penditure		
<b>To Whom Paid</b> Beaver County Democratic Co	mmittee		мо	DAY	YEAR		
Mailing Address P.O. Box 7	1		11	8	2006	\$	500.00
State Zip Code (Plus 4) PA 15009				otion of Exp			
Enter Grand Total of Expen	ditures on Page 1, Re	port Cover Page, Item I	).				PAGE TOTAL

700.00