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 810	0155				port ed B		CANDI	DATE		СОМ	4ITTEE	✓	LOBI	BYIST		
Name of Filing C	Committee, Candi	date or L	obbyist:		DIS	ST CO	DUNC	IL 47 PA									
Street Address:	1606 WALNU	IT ST															
City:	PHILADELPH:	IA						State:	PA			Zip Cod	le: 19	9103			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	/ PRE	-	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No	•	/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	/ PRE	≣-	5.	30 DA ELECT	• •	POST-	6.		TERMINA REPORT	TERMINATION Yes REPORT?				
report type)	ANNUAL REPORT	7. X	Year 2006					NG METHO				PAPER	PAPER DISI				
Name of Office S	Sought by Candida	ate:	•					DATE 0	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Coun	ty
								МО	DAY	YE	AR		12222	•			
								11		7	2006		(SEE IN	STRUCTI	ONS FOR C	ODES)	
Summary of Expenditures	Receipts and	МО	DAY	YEAR	ł			МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
			1 1		1	Т	0	12		31	2006						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			1,5	28.42						
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule	e I)	\$				0.47						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			1,5	28.89						
D. Total Expen	ditures (From Scl	nedule II	I)				\$			2	58.81						
E. Ending Cash	Balance (Subtra	t Line D	From Line C	:)			\$			1,2	70.08						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sc	hedu	le II	I)	\$				0.00						
G. Unpaid Debt	s And Obligation	s (From S	Schedule IV)			\$				0.00			'			
				AFF	·ID/	AVI	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign h	nere.	If th	nis is	a Can	ndidate re	eport, o	candi	date sig	ın here.					
I swear (or affirm) correct and comple) that this report, inc ete.	cluding the	e attached sch	edules	s file	ed on	paper (or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , tru	ie,
Sworn to and subs	cribed before me th day of	is	20							S	ignature	of Perso	n Submit	ting Rep	ort		_
	Signat	ure					- -					Prin	ted Name	e			-
My Commission Ex	cpires											Ema	il				_
	мо	D	AY	YR					Are	ea Cod	e	Daytim	e Telepl	none Nu	mber		
Part II- If this is	a report of a car	didate's	authorized (Comn	nitte	ee, C	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and belie	ef this	poli	itical	commi	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L.	. 1333	,
Sworn to and subso	ribed before me this	•									s	ignature o	of Candid	ate			-
	day of —— ————						-					Printe	d Name				-
	Signature						-										_
My Commission Exp	ires											Ema	11				
	МО	D	AY	YR	ł		-		Area	Code		Da	ytime T	elephon	e Numbe	er	1

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period		
DIST COUNCIL 47 PAC	From:	To:	12/31/2006
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)		\$	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	g Period (4)	\$	0.47
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		\$	0.47

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate val							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fr	om:		То	:	
		•			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
	•	•		•	•	•	$\overline{}$	PAGE TOTAL

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 Filling Committee of Candidate				Reporting Period From: To:				
			l		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.

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			
			Froi	m:		To):	
				D	ATE		АМ	OUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plu	5 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 S	Summary Page,	Section	on 3.			PA:	GE 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 Perio	d			
DIST COUNCIL 47 PAC			From:			To:	1	12/31/2006
				D	ATE		А	MOUNT
Full Name CITIZENS BANK				МО	DAY	YEAR		
Mailing Address 2001 MARKET STRE	ET						\$	0.47
City PHILADELPHIA	State PA	Zip Code (19103	Plus 4)	12	29	2006		
Receipt Description INTEREST								
Enter Grand Total of Part E on Schedu	ile T. Detailed Sumn	narv Page.	Section	4.			P	AGE TOTAL
The state of the state of state and	2, Detailed Outline	, 1 ug c,					\$	0.47

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:	То:	12/31/2006
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	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 Candidat	:e		Reporting	g Period			
			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						\$	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 Candidat	e				Re	porting F	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor	•		•			Occupa	tion		•	
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, I	In-Kind	Contributi	ons De	taile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	indidate		Reporti	ng Period			
DIST COUNCIL 47 PAC			From			То:	12/31/2006
				DATE			AMOUNT
To Whom Paid FRIENDS OF DENNIS O'BRIEN			мо	DAY	YEAR		
Mailing Address 9811 ACADE	EMY ROAD		10	31	2006	\$	100.00
City PHILADELPHIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	19114	1	_			AL ELECTION
To Whom Paid COMMITTEE TO ELECT WILLIAM	1 KELLER		мо	DAY	YEAR		
Mailing Address 1935 S. WO	LF STREET		11	1	2006	\$	100.00
City PHILADELPHIA	State	Zip Code (Plus 4)	Descrit	otion of Exp	enditure		
	PA	19148	- I	_			AL ELECTION
To Whom Paid CITIZENS BANK			МО	DAY	YEAR		
Mailing Address 2001 MARKE	ET STREET		12	22	2006	\$	58.81
City PHILADELPHIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	l	
HITADELIHA	PA	19103	1 -	EE (SERVI			
	<u> </u>	I					PAGE TOTAL
Enter Grand Total of Expend	itures on Page 1, Re	port Cover Page, Item [).				

258.81