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	20001	90			Repo Filed		CA	NDI	DATE		COMM	4ITTEE	✓	LOB	BYIST		
Name of Filing C	ommittee, C	andidat	te or Lo	bbyist:		PAFT (PA FE	D TEA	(CH)	COM	SUPT	PUB E	DU					-
Street Address:	1816 C⊦	HESTNU	JT ST															
City:	PHILADE -	ELPHIA						Stat	e:	PA Zip Code: 19					103			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		1.	2ND FRIDA PRIMARY	Y PRE-	2.3		DAY MARY	Р	POST- 3.			AMENDMENT REPORT?		Yes	No)	\
(place X to the right of	6TH TUESDAY PRE-ELECTIO		1.	2ND FRIDA ELECTION	Y PRE	- 5.	30 E	DAY CTION	Р	OST-	6.		TERMINA REPORT?		Yes	No)	\
report type)	ANNUAL RE	PORT 7	7.					ING MI					PAPER		\	DISK	TTE	
Name of Office S	- Sought by Ca	ndidate	e:					DAT	E O	F ELE	CTIC	N	District Number	Office Code	Pa	rty Code	Cour	
								МО		DAY	ΥI	EAR						
									11		6	2007		(SEE IN:	STRUCT	ONS FOR	CODES)
Summary of		nd	МО	DAY	YEAR			МО		DAY	Y	EAR	FO	R OFFI	E USI	ONLY		
Expenditures	from:			1 1	. 20	007	ТО		4		30	2007						
A. Amount Bro	ught Forward	d From	Last R	eport		·	,	\$		•	13,	740.10	1					
B. Total Monetary Contributions And Receipts (From Schedule I)							:	\$		10,828.00								
C. Total Funds Available (Sum Of Lines A and B)						:	\$			24,	568.10							
D. Total Expenditures (From Schedule III)						:	\$				0.00							
E. Ending Cash Balance (Subtract Line D From Line C)					:	\$			24,5	68.10								
F. Value Of In-	Kind Contrib	utions I	Receive	ed (From S	chedul	e II)	:	\$				0.00						
G. Unpaid Debt	s And Obliga	ations (From S	chedule IV	/)		!	\$				0.00						
					AFF	IDAV	IT S	ECTI	ON									
PART I - If this is		-	•	_								_						
I swear (or affirm) correct and comple		rt, inclu	ding the	attached sc	hedules	filed o	n pape	r or by	electi	ronic m	edium	, are to t	he best of	f my knov	vledge	and bel	ief , tr	ue
Sworn to and subs	cribed before । day of	me this		20							S	Signature	of Persoi	n Submitt	ing Re	port		_
		Signature					_						Print	ted Name	1			-
My Commission Ex		-ignatare											Emai	i I				-
	МО		DA	ΛΥ	YR					Ar	ea Cod	le	Daytim	e Teleph	one Nu	ımber		
Part II- If this is	a report of	a candi	date's	authorized	Comm	ittee,	Candi	date s	hall	sign h	ere.							
I swear (or affirm) No 320) as amende		est of my	/ knowle	dge and beli	ief this	politica	l com	mittee l	has n	ot viola	ted ar	y provis	ions of the	e act of J	ıne 3,1	.937 (P.I	133	3,
Sworn to and subsc		ne this										s	ignature o	f Candida	ate			-
	day of ——						_						Printe	d Name				-
	Sign	nature					_											_
My Commission Exp	_												Emai	il				
		40	D/	λΥ	YR					Area	Code		Da	ytime T	elepho	ne Numb	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
PAFT (PA FED TEACH) COM SUPT PUB EDU	From:	1/1/200	<u>7</u> To:	4/30/2007
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)			\$	414.00
All Other Contributions (Part B)	\$	0.00		
TOTAL for the Reporting	(2)	\$	414.00	
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	10,414.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	J Period	(3)	\$	10,414.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	0.00
			I	
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			\$	10,828.00

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 Candi	Name of Filing Committee or Candidate			Reporting Period						
PAFT (PA FED TEACH) COM SUPT	PUB EDU		Fre	om:	1/1/20	<u>)07</u> To	:	4/30/2007		
			1		DATE			AMOUNT		
Full Name of Contributing Committee				МО	DAY	YEAR				
Mailing Address 420 FERN ST	g Address 420 FERN ST						\$	69.00		
City NEW CASTLE	State PA	Zip Code (Plus	; 4)	4	3	2007				
Full Name of Contributing Committee NEW CASTLE				МО	DAY	YEAR				
Mailing Address 420 FERN ST				4	3	2007	\$	69.00		
City NEW CASTLE	State PA	Zip Code (Plus 16101	s 4)	4		2007				
Full Name of Contributing Committee NEW CASTLE				МО	DAY	YEAR				
Mailing Address 420 FERN ST							\$	69.00		
City NEW CASTLE	State PA	Zip Code (Plus	(4)	4	3	2007				
Full Name of Contributing Committee NEW CASTLE		·		МО	DAY	YEAR				
Mailing Address 420 FERN ST				4	3	2007	\$	69.00		
City NEW CASTLE	State PA	Zip Code (Plus 16101	s 4)	4	3	2007				
Full Name of Contributing Committee NEW CASTLE				МО	DAY	YEAR				
Mailing Address 420 FERN ST							\$	69.00		
City NEW CASTLE	State PA	Zip Code (Plus	3 4)	4	3	2007				

Full Name of Contributing Committee NEW CASTLE				DAY	YEAR	
Mailing Address 420 FERN ST						\$ 69.00
City NEW CASTLE	State	Zip Code (Plus 4)	4	3	2007	
	PA	16101				

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

PAGE TOTAL
\$ 414.00

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						
F						0:				
					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 Candidate Reporting			Reporting	g Period					
PAFT (PA FED TEACH) COM SUPT PUB E	:DU		From:	1/	<u>/1/2007</u>	То:	4/30/2007		
				DA	TE		AMOUNT		
Full Name of Contributing Committee PFT CSPE				МО	DAY	YEAR			
Mailing Address 1816 CHESTNUT ST							\$ 5,000.00		
City PHILA	State Zip Code (Plus 4) PA 19103			4	3	2007			
Full Name of Contributing Committee NEW CASTLE SCH. DIST. 3975					DAY	YEAR			
Mailing Address							\$ 69.00		
City	State	Zip Code	e (Plus 4)	4	3	2007			
Full Name of Contributing Committee NEW CASTLE SCH. DIST. 3975	<u></u>	<u>'</u>		мо	DAY	YEAR			
Mailing Address									
City	State	Zip Code	e (Plus 4)	4	3	2007	\$ 69.00		
Full Name of Contributing Committee NEW CASTLE SCH. DIST. 3975		<u>!</u>		МО	DAY	YEAR			
Mailing Address							\$ 69.00		
City	State	Zip Code	e (Plus 4)	4	3	2007			
Full Name of Contributing Committee NEW CASTLE SCH. DIST. 3975		<u>.</u>		МО	DAY	YEAR			
Mailing Address							\$ 69.00		
City	State	Zip Code	e (Plus 4)	4	3	2007			

мо	DAY	YEAR	
4	3	2007	\$ 69.00
МО	DAY	YEAR	
4	3	2007	\$ 69.00
МО	DAY	YEAR	
4	3	2007	\$ 5,000.00
	4 MO MO	4 3 MO DAY 4 3	4 3 2007 MO DAY YEAR 4 3 2007

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

PAGE TOTAL \$ 10,414.00

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 Re					Reporting Period						
				Froi	rom: To:						
					D	ATE		AN	MOUNT		
Full Name of Contributor					МО	DAY	YEAR				
Mailing Address								\$	0.00		
City	State	Zi	p Code (Plus	i 4)							
Employer Name	•	•			Occupa	tion	•	•			
Employer Mailing Address/Principal Business	Place of		City			State		Zip Code	e (Plus 4)		
Enter Grand Total of Part C on So	chedule I, Deta	iled Sumr	mary Page,	Section	on 3.			P	AGE 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	Name of Filing Committee or Candidate			Reporting Period						
			From:			To:				
				D	ATE		AM	OUNT		
Full Name				МО	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4)							
Receipt Description	•	•		•	•	•	_			
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			PAG	GE TOTAL		
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	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								
PAFT (PA FED TEACH) COM SUPT PUB EDU	From:	<u>1/1/2007</u> To:	4/30/2007						
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 PART 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 Candid	Name of Filing Committee or Candidate				Reporting Period						
	From:										
				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 S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	ле Г		PAGE TOTAL				
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	, ,		PAGE TOTAL				
						\$	0.00				

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Reporting Period							
					From:			To:	То:		
							DATE			AMOUNT	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address									\$	0.00	
City	State		Zip Code(F	Plus 4)							
Employer of Contributor						Occupation					
Employer Mailing Address/Principal Place of Business		City		State		Zip Code(Plus 4)		Descri	Description of Contribution		
Enter Grand Total of Part G on So Summary Page, Section 3.	hedule II,	In-Kind	Contributi	ons De	taile	ed				PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate				Reporting Period						
	From		То:							
			DATE			AMOUNT				
To Whom Paid			МО	DAY	YEAR					
Mailing Address						\$	0.00			
City	State	Zip Code (Plus 4)	Description of Expenditure							
-		PAGE TOTAL								
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	0.00			