Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificat Number :	ion 8200	581			Repo Filed			CANDI	DATE		СОМ	MITTEE	✓	LOB	BYIST		
Name of Filing	Committee, Candid	ate or L	obbyist:				-	≠98 IBEW	/ COPE	[
Street Address:	1719 SPRING	GARDE	N ST														
City:	PHILADELPHI	A						State:	PA			Zip Co	de: 19	130			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	2ND FRIDAY PRE- PRIMARY 2. 30 DA PRIMA					POST- 3.			AMENDMENT REPORT?		Yes	N	0	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.					30 DA ELEC		POST- 6. X			TERMINATION REPORT?		Yes	Ν	0	\checkmark
report type)	ANNUAL REPORT	7.	Year 2006					NG METHO				PAPER			DISK	ETTE	\checkmark
Name of Office	L Sought by Candida	te:						DATE O	F ELE	CTI	ON	District Number	Office Code	Pa	ty Cod	Cou	
								мо	DAY	Y	EAR	Number	coue	OT	+	51	-
								11		7	2006		(SEE INS	TRUCTI	ONS FOR	CODES	5)
Summary of	Receipts and	мо	DAY	YEAF	2			мо	DAY	Y	EAR	FC	R OFFIC	E USE	ONLY		
Expenditure	s from:		1 1		1	T	0	11		27	2006						
A. Amount Bro	ought Forward From	n Last R	eport				\$		1,	959,	470.57	1					
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sche	dule I)	\$			19,	213.60						
C. Total Funds Available (Sum Of Lines A and B) \$ 1,978,684.17																	
D. Total Expen	ditures (From Sch	edule II	I)				\$				0.00						
E. Ending Cash	n Balance (Subtrac	t Line D	From Line	C)			\$		1,	978,6	584.17						
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	le II)		\$				0.00						
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	/)			\$				0.00						
				AFF	IDA	/I7	Γ SE	CTION									
PART I - If this i	s a Committee rep	ort, trea	surer sign	here.	If this	is	a Car	ndidate re	eport,	candi	idate sig	gn here.					
I swear (or affirm correct and comp) that this report, inc lete.	luding the	e attached sc	hedule	s filed (on p	oaper	or by elect	ronic m	ediun	n, are to i	the best o	f my knov	/ledge	and be	ief , tı	ue
Sworn to and sub	scribed before me this day of	5	20							:	Signature	e of Perso	n Submitt	ing Re	port		-
	Signatu	re					-					Prin	ted Name				-
My Commission E	-											Ema	il				_
	мо	D	AY	YR					Ar	ea Co	de	Daytim	e Teleph	one Nu	mber		
	a report of a can								-								
I swear (or affirm No 320) as amend) that to the best of n ed.	ny knowle	edge and beli	ief this	s politic	al	comm	ittee has n	ot viola	ted a	ny provis	ions of th	e act of Ju	ine 3,1	937 (P.	L. 133	.3,
Sworn to and subs	cribed before me this day of		20								s	ignature o	of Candida	te			-
							-					Printe	d Name				-
My Commission For	Signature						-					Ema	il				_
My Commission Ex	pires																
	МО	D	AY	YR	2				Area	Code		D	aytime Te	lepho	ne Num	ber	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period		
Local Union #98 IBEW COPE	From:	То:	<u>11/27/2006</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			
TOTAL for the Reporting	g Period (1)	\$	19,213.60
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)	\$	0.00
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		\$	19,213.60

PAGE 3

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 Candidate					Period			
			From	n:		То	:	
					DATE			AMOUNT
Full Name of Contributing Committee			1	мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
							Γ	PAGE TOTAL

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

0.00

\$

PART B 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 Candidat	e		Rep	orting P	eriod					
	From: 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. \$ 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 R				g Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Comm	nittee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C or	n Schedule I, Detaile	ed Summary Pa	age, Sectio	n 3.			\$	0.00

PART D 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	Reporting Period	
	From:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

PART E **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	2		Report	ing Perio	od				
			From:			То:			
				D	ATE			AMOUNT	ſ
Full Name				мо	DAY	YEAR			
Mailing Address							\$	5	0.00
City	State	Zip Code (Plus 4)						
Receipt Description	·					•	•		
Enter Grand Total of Part E on Sched	ule T. Detailed Sum	mary Page	Section	4				PAGE TO	TAL
			20000				\$		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 Union #98 IBEW COPE	From:	То:	<u>11/27/2006</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, 3		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	Reporting	g Period					
	From:						
				DATE		АМО	UNT
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 Sched Section 2.	iled Sum	mary Pag	je,	PAGE	TOTAL		
					4	6	0.00

0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or C		Reporting P	Period						
					From:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus	4)					
Employer of Contributor			1		Occupa	l tion			
Employer Mailing Address/Prin Business	cipal Place of	City	Sta	te	Zip 4)	Code(Plus	Descri	ption of	Contribution
Enter Grand Total of Part G	Con Schedule II	In-Kind	Contributions	Dota	iled				PAGE TOTAL

Enter Grand T Summary Pag	Total of Part G on Schedu ge, Section 3.	ule II, In-Kind Co	ontributions Det	ailed	PAGI

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				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
						\$	0.00