Campaign Finance Report

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

Filer Identificat	tion 99	900041			Repo Filed		/:	CANDI	DATE		СОММ	1ITTEE	✓	LOBI	BYIST		
	Committee, Can	didate or	r Lobbyi	st:		-		L 668 SEIL	J COPE	FUNE)						
Street Address	:																
City:	HARRISBU	RG					State: PA Zip Code: 17110-9602								602		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.					30 DA PRIM		POST- 3.			AMENDM REPORT		Yes	No)	/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.					30 DA Elect		POST- 6. X			TERMIN/ REPORT		Yes	No	D (/
report type)	ANNUAL REPO	RT 7.	Year	2000				IG METHO				PAPER		\checkmark	DISK	TTE	
Name of Office	Sought by Cand	idate:						DATE O	F ELEO	СТІО	N	District Number	Office Code	Par	ty Code	Count	y
								мо	DAY	YE	AR						
								11		7	2000		(SEE INS	STRUCTI	ONS FOR	CODES)	
	Receipts and	мо	DA	AY YEA				мо	DAY	YE	AR	FC	OR OFFIC	E USE	ONLY		
Expenditure	s from:		1	1	1	т)	11	2	27	2000						
A. Amount Bro	ought Forward F	rom Last	t Report	:			\$			1,44	40.52						
B. Total Mone	tary Contributio	ns And R	eceipts	(From Sch	edule I)	\$			5,18	86.09						
C. Total Funds	s Available (Sun	n Of Lines	A and	B)			\$			6,6	26.61						
D. Total Expe	nditures (From S	Schedule	III)				\$			1,15	53.00						
E. Ending Cas	h Balance (Subt	ract Line	D From	Line C)			\$			5,47	73.61	-					
F. Value Of In	-Kind Contribut	ions Rece	eived (F	rom Sched	ule II)		\$				0.00	-					
G. Unpaid Deb	ots And Obligation	ons (Fror	n Sched	ule IV)			\$				0.00						_
				AF	FIDAV	/IT	SE	CTION									
PART I - If this	is a Committee	• •		-					• •		-		f my know	vledae	and hel	ief tru	
correct and comp		including	the attac	lieu seneuun	es med o	, n p	aper	bi by electi		surum,		ine best o		reuge		ier, tru	U,
Sworn to and sub	oscribed before me day of	this	20							Si	gnature	e of Perso	n Submitt	ing Rep	oort		_
		nature				_						Prin	ted Name				-
My Commission I	-											Ema	il				-
	мо		DAY	YI	ર				Are	ea Code	•	Daytim	e Teleph	one Nu	mber		-
Part II- If this is	s a report of a c	andidate	's autho	orized Com	mittee,	Ca	ndid	ate shall :	sign he	ere.							
I swear (or affirm No 320) as amend	ı) that to the best led.	of my kno	wledge a	nd belief thi	is politica	al c	omm	ittee has n	ot violat	ted any	provis	ions of th	e act of Ju	ine 3,1	937 (P.I	L. 1333	,
Sworn to and subs	cribed before me t day of	:his									S	ignature o	of Candida	ite			-
			20									Printe	d Name				-
My Commission Ex	Signati	ıre										Ema	il				-
	-																
	мо		DAY	Y	R				Area	Code		D	aytime Te	elephon	ne Numb	ber	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page Name of Filing Committee or Candidate **Reporting Period** PSSU LOCAL 668 SEIU COPE FUND From: To: 11/27/2000 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor \$ 5,186.09 **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 5,186.09 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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				Reporting Period						
				From: To:						
		·			DATE			AMOUNT		
Full Name of Contributing Committee			м	10	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 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 Candida	te		Rep	orting P	eriod					
			Fror	m:		Тс):			
					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, Detail	ed Summary Pag	je, Se	ection 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			Reporting Period						
			From:			То:			
				DA	TE			AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR		0.00	
Mailing Address							- \$	0.00	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Sect							\$	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 Re				eporting Period					
			Froi	n:		Т):		
				D	ATE		АМ	IOUNT	
Full Name of Contributor				мо	DAY	YEAR	\$	0.00	
Mailing Address									
City	State	Zip Code (Pl	ıs 4)						
Employer Name				Occupation					
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page	e, Sectio	on 3.			P#	AGE TOTAL 0.00	

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				Reporting Period						
			From:			То:				
				D	ATE			AMOUNT		
Full Name				мо	DAY	YEAR	\$		0.00	
Mailing Address										
City	State	Zip Code (Plus 4)							
Receipt Description	·									
		_	.					PAGE TOT	AL	
Enter Grand Total of Part E on Sched	ule 1, Detailed Sumn	nary Page,	Section	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:	То:	<u>11/27/2000</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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 Candidate Re			Reporting	Period	·			
F						То:		
				DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address		_				7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:			1					
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,		PAGE TOTA	AL.
						\$		0.00

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

Name of Filing Committee or Candidate				Reporting Period					
F						То:			
					DATE		AMOUNT		
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$ 0.00		
City	State	Zip Code(Plus 4)							
Employer of Contributor				Occupa	ation				
Employer Mailing Address/Principal Plac	e of Business (City	State	e Zip	Code(Plus 4)	Descri	ption of Contribution		
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-Kind	l Contributions D	etaile	d			PAGE TOTAL 0.00		

SCHEDULE III STATEMENT OF EXPENDITURES

Name	e of Filing Committee or Candidate	l		Reporti	ng Period					
PSSU	PSSU LOCAL 668 SEIU COPE FUND				From			<u>11/27/2000</u>		
					DATE			AMOUNT		
To W	nom Paid			мо	DAY	YEAR				
PSSU										
Mailing Address				10	25	2000	\$	3.00		
City	HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	<u> </u>			
		РА	17110	REFUND	D DUES CK	DEPOSI	TED IN	ERROR		
To W	nom Paid			мо	DAY	YEAR				
FRIEN	NDS OF TOM SCRIMENTI									
Mailin	ng Address			10	25	2000	\$	150.00		
City	ERIE	State	Zip Code (Plus 4)	Description of Expenditure						
		РА	16510	CONTRI	CONTRIBUTION					
To Wł	nom Paid			мо	DAY	YEAR				
RE EL	ECT MIKE GRUITZA COMMITTEE					1 SAN				
Mailin	g Address			11	2	2000	\$	1,000.00		
City	HERMITAGE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
		РА	16150	CONTRI	IBUTION					
_ .				_				PAGE TOTAL		
Enter	r Grand Total of Expenditures (on Page 1, Report C	Cover Page, Item D).			\$	1,153.00		