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 9900	041				port		CAND	IDATE		СОМ	4ITTEE	✓	LOBE	SYIST		
Name of Filing C	Committee, Candida	ate or L	obbyist:		PSS	SU LO	OCAL	668 SE	SEIU COPE FUND								
Street Address:	2589 INTERS	TATE DE	₹														
City:	HARRISBURG							State:	PA			Zip Code: 17110-9602					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	RE- 2. 30 DAY PO PRIMARY			POST-	3.		AMENDM REPORT		Yes	No	~			
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	≣-	5.	30 DA		POST-	6. X		TERMINA REPORT		Yes	No	~	
report type)	ANNUAL REPORT	7.	Year 2000					NG METH CHECK (PAPER DISKET			TTE		
Name of Office S	- Sought by Candidat	te:			_			DATE	OF ELE	CTIC	N	District Number	Office Code	Par	ty Code	County Code	
								МО	DAY	Υ	EAR	rumber	Touc			Couc	
								1	1	7	2000		(SEE IN	ISTRUCTIO	ONS FOR C	ODES)	
	Receipts and	МО	DAY	YEAR	ł			МО	DAY	Y	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	from:		1 1		1	T	0	1	1	27	2000						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$			1,	440.52						
B. Total Monet	ary Contributions /	And Rec	eipts (Fron	Sche	dule	e I)	\$			5,	186.09						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			6,	626.61						
D. Total Expen	ditures (From Sch	edule II	I)				\$			1,	153.00						
E. Ending Cash	Balance (Subtract	Line D	From Line	C)			\$			5,4	173.61]					
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedu	le II	I)	\$				0.00						
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV	')			\$				0.00			•			
				AFF	·ID/	AVI	T SE	CTION									
PART I - If this is	s a Committee repo	ort, trea	surer sign	here.	If th	nis is	a Car	ndidate	report,	candi	date sig	ın here.					
I swear (or affirm) correct and comple) that this report, incl ete.	uding the	attached sc	hedule	s file	ed on	paper	or by ele	tronic n	nediun	ı, are to t	he best o	f my kno	wledge a	and belie	ef , true	
Sworn to and subs	cribed before me this day of	;	20							;	Signature	of Perso	n Submit	ting Rep	ort		
	Signatur						- -					Prin	ted Nam	e			
My Commission Ex	Signatu kpires	·										Ema	il				
	мо	D	AY	YR					A	rea Co	de	Daytim	e Telepi	none Nui	mber		
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nitte	ee, C	andid	ate shal	l sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of med.	ny knowle	edge and beli	ef this	poli	itical	comm	ittee has	not viol	ated a	ny provis	ions of th	e act of J	une 3,19	937 (P.L.	1333,	
Sworn to and subso	ribed before me this										s	ignature o	of Candid	ate			
	day of						_					Drinto	d Name				
	Signature						-					riiite	ы наше				
My Commission Exp	_											Ema	il				
	МО	D	AY	YR	ł		-		Area	Code		Da	aytime 1	elephon	e Numbe	er	

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			
TOTAL for the Reporting	Period (1)	\$	5,186.09
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
		1	
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		\$	5,186.09

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize onl with an aggregate val	-			•			
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		1			DATE			AMOUNT
Full Name of Contribution	ng Committee			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

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 Candidate			Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary 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.)

					eporting Period			
		Fron	1 :		То	:		
			D/	ATE			AMOUNT	
			МО	DAY	YEAR			
						\$	0.00	
Ziţ	p Code (Plus	4)						
			Occupat	tion				
	City			State		Zip Co	ode (Plus 4)	
d Sumn	nary Page,	Section	n 3.				PAGE TOTAL 0.00	
		City		Zip Code (Plus 4) Occupat	Zip Code (Plus 4) Occupation City State	Zip Code (Plus 4) Occupation City State	MO DAY YEAR \$ Zip Code (Plus 4) Occupation City State Zip Co	

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	ting Perio	od			
			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. Detailer	d Summary Page	Section	4			PA	GE TOTAL
	,,,	. Junimary 1 ago,	5000.011				\$	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:	11/27/2000
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,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candi	date		Reportin	g Period			
			From:			To:	
				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	Schedule II, In-Kir	nd Contributions Deta	iled Sun	nmary Pag	ge,		PAGE TOTAL
Section 2.						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting P	Period			
				Fro	om:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occupa	tion			
Employer Mailing Address/Principal Plac Business	ce of Cit	ity	State		Zip 4)	Code(Plus	Descri	ption o	f Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-K	(ind (Contributions De	etaile	ed				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Cano	didate		Reporti	ng Period			
PSSU LOCAL 668 SEIU COPE FUI	ND		From			То:	11/27/2000
				DATE			AMOUNT
To Whom Paid PSSU			мо	DAY	YEAR		
Mailing Address 2589 INTERS	TATE DRIVE		10	25	2000	\$	3.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17110	1	otion of Exp			ERROR
To Whom Paid FRIENDS OF TOM SCRIMENTI			МО	DAY	YEAR		
Mailing Address 2204 BERNWO	OOD DRIVE		10	25	2000	\$	150.00
City ERIE	State PA	Zip Code (Plus 4) 16510		otion of Exp IBUTION	enditure		
To Whom Paid RE ELECT MIKE GRUITZA COMMI	TTEE		МО	DAY	YEAR		
Mailing Address 229 FAIRMON	T DRIVE		11	2	2000	\$	1,000.00
City HERMITAGE	State PA	Zip Code (Plus 4) 16150		tion of Exp IBUTION	enditure		
Enter Grand Total of Expendit	ures on Page 1, Re	port Cover Page, Item D).			\$	PAGE TOTAL 1,153.00