Campaign Finance Report

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

						port ed B		CAN	DII	DATE		COM	MITTEE	✓	LOB	BYIST		
Name of Filing C	Committee, Candida	ate or L	.obbyist:		PAF	T (P	A FEC) TEAC	H)	COM S	SUPT							_
Street Address:					_													_
City:	PHILADELPHI <i>i</i>	Α		_		_		State:	_	PA	_		Zip Cod	Je: 1	9103		_	_
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	-	2.	30 DA PRIMA		P	POST-	3.		AMENDM REPORT?		Yes	No		\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- !	5.	30 DA		P	POST-	6. X		TERMINA REPORT?		Yes	No		/
report type)	ANNUAL REPORT	7.	Year 2000		NG MET CHECK					PAPER		\	DISKE	TTE				
Name of Office S	Sought by Candidat	te:			_	_		DATE	0	F ELEC	стіо	N	District Number	Office Code	Pai	rty Code	Coun	
	-						1	МО		DAY	YE	EAR				-	1-	
							1		11		7	2000		(SEE I	NSTRUCTI	IONS FOR C	CODES	5)
	Receipts and	МО	DAY Y	YEAR	Ł			МО		DAY	YE	EAR	FC	OR OFFI	CE USE	ONLY		
Expenditures	; from: 		1 1	_	1		ГО		11	2	27	2000						
A. Amount Bro	ought Forward Fron	n Last R	leport		_	_	\$		_		6,0)59.82						
B. Total Monet	tary Contributions A	And Rec	eipts (From S	Sche	dule	a I)	\$	·	_		8	350.00						
C. Total Funds	Available (Sum Of	Lines A	and B)			_	\$,	_		6,9	909.82						
D. Total Expend	nditures (From Sch	edule II	.I)				\$,			9	950.00						
E. Ending Cash	n Balance (Subtract	t Line D	From Line C)	<u> </u>	_	_	\$		_		5,9	59.82]					
F. Value Of In-	-Kind Contributions	s Receiv	ed (From Sch	ıedu	le II	(1	\$					0.00						
G. Unpaid Debt	ts And Obligations	(From 5	Schedule IV)				\$)				0.00			,			
				AFF	ID/	AVI	T SE	CTIO	N									
PART I - If this is	is a Committee repo	ort, trea	ısurer sign he	ere. I	If th	nis is	a Car	ndidate	re	port, c	andic	date siç	jn here.					
I swear (or affirm) correct and comple	ı) that this report, incl lete.	uding the	e attached sche	dules	s filed	d on	paper	or by ele	ectr	onic me	:dium,	, are to t	the best o	f my kno	wledge	and belie	ef , tr	ue
Sworn to and subs	scribed before me this day of		20		_	_			-		S	ignature	e of Perso	n Submit	tting Re	port		_
	Signatu	ire		_	_	_	_		-				Prin	ted Nam	e			_
My Commission Ex	xpires						_		-				Emai	ii				_
	МО	D/	PAY	YR	_	_			_	Are	ea Cod	e	Daytim	ne Telepi	hone Nu	mber		\sqsubseteq
Part II- If this is	s a report of a cand	didate's	authorized Co	omn	nitte	e, C	andid	ate sha	all s	sign he	re.							
I swear (or affirm) No 320) as amende) that to the best of m	ny knowie	edge and belief	this	polit	tical	commi	ittee ha	s nc	ot violate	ed an	y provisi	ions of the	e act of J	June 3,1	937 (P.L.	. 133	з,
Sworn to and subsc	cribed before me this day of		20									S	Signature o	of Candid	Jate			_
				—		_	-						Printe	ed Name			—	-
My Commission Exp	Signature pires						-		-				Ema	il				-
			DAY	YR			-			Area C					Telepho	ne Numbe		-
			A.	• • • •										-7-			_	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period		
PAFT (PA FED TEACH) COM SUPT	From:	То:	11/27/2000
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			
TOTAL for the Reporting	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)		\$	250.00
All Other Contributions (Part B)	\$	0.00	
TOTAL for the Reporting	\$	250.00	
3. Contributions Received Over \$250.00 (From Part C and Part D)			
Contributions Received From Political Committees (Part C)		\$	600.00
All Other Contributions (Part D)		\$	0.00
TOTAL for the Reporting	Period (3)	\$	600.00
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 ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa		\$	850.00

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 Candidate	Reporting Period		
PAFT (PA FED TEACH) COM SUPT	From:	То:	11/27/2000
	DATE		AMOUNT

Full Name of Contributing Com	мо	DAY	YEAR			
PIPE			МО	DAY	YEAK	
Mailing Address				2	2000	\$ 250.00
City INGOMAR	State	Zip Code (Plus 4)	11		2000	
	PA	151270615				

PAGE TOTAL 250.00

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 co	ontributions fr	om political	commit	tees re _l	oorted	in Part	A)			
Name of Filing Committee or Candidate				Reporting Period						
			F	rom:		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.

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		
PAFT (PA FED TEACH) COM SUPT	From:	То:	11/27/2000
	DATE		AMOUNT

Full Name of Contributing Committee				DAY	YEAR	
COPE CCAC FED OF TEACHERS					12/11	\$ 600.00
Mailing Address				2	2000	,
City	State	Zip Code (Plus 4)	11		2000	

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

PAGE TOTAL \$ 600.00

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				Reporting Period						
			Fron	n:		To):			
				D	ATE			AMOUNT		
Full Name of Contributor				мо	DAY	YEAR	\$	0.00		
Mailing Address							7			
City	State	Zip Code (Plus	s 4)							
Employer Name				Occupation						
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Co	ode (Plus 4)		
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			\$	PAGE 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	Name of Filing Committee or Candidate			Reporting Period						
			From:			To:				
		'			ATE			AMOUNT		
Full Name				мо	DAY	YEAR	\$	0.00		
Mailing Address							7			
City	State	Zip Code (P	Plus 4)							
Receipt Description	'	1					<u> </u>			
	- C		. .:	_				PAGE TOTAL		
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	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									
PAFT (PA FED TEACH) COM SUPT	From:	To:	11/27/2000							
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS 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	TF)									
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 Car	Name of Filing Committee or Candidate R				Reporting Period					
			From:			To	:			
				DATE			AMOUNT			
Full Name of Contributor			МО	DAY	YEAR					
Mailing Address						7 \$		0.00		
City	State	Zip Code (Plus 4)								
Description of Contribution:	•		•	•		•				
					-					
Enter Grand Total of Part F o	n Schedule II, In-Ki	nd Contributions Detai	led Sun	mary Pa	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					Reporting Period					
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period				
PAFT (PA FED TEACH) COM SUPT			From			То:	11/27/2000
				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
FRIENDS OF HAROLD JAMES			140	DA!	ILAN		
Mailing Address			11	1	2000	\$	250.00
City	State	Zip Code (Plus 4)	Description of Expenditure CONT				
To Whom Paid			МО	DAY	YEAR		
COMMITTEE TO ELECT SHIRLEY M KITCHEN			140	DAI	ILAN		
Mailing Address			11	1	2000	\$	250.00
City	State	Zip Code (Plus 4)	Description of Expenditure				
			CONT				
To Whom Paid			мо	DAY	YEAR		
SARA STEELMAN FOR STATE REP							
Mailing Address			11	1	2000	\$	250.00
City	State	Zip Code (Plus 4)	Description of Expenditure CONT				
To Whom Paid			МО	DAY	YEAR		
	PEOPLE FOR NICKOL				TEAN		
PEOPLE FOR NICKOL		Mailing Address				1 .	200.00
			11	9	2000	\$	200.00
	State	Zip Code (Plus 4)	-	9 tion of Exp		\$	

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

950.00