### **Campaign Finance Report**

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

| Filer Identificati<br>Number :   | <b>on</b> 20                | 000190       |                |         |            | Repo<br>Filed |              | CAI        | NDII   | DATE     |        | COMMITTEE LOBBYIST |                        |                |              |         |          |          |
|--|-----------------------------|--------------|----------------|---------|------------|---------------|--------------|------------|--------|----------|--------|--------------------|------------------------|----------------|--------------|---------|----------|----------|
| Name of Filing C   | ommittee, Can               | didate or    | Lobbyis        | t:      | P          | PAFT (        | PA FE        | D TEA      | CH)    | СОМ      | SUPT   | P                  |                        |                |              |         |          |          |
| Street Address:  |                             |              |                |         |            |               |              |            |        |          |        |                    |                        |                |              |         |          |          |
| City:  | PHILADELP                   | 'HIA         |                |         |            |               |              | State      | e:     | PA       |        |                    | Zip Cod                | l <b>e:</b> 19 | 103          |         |          |          |
| TYPE OF<br>REPORT  | 6TH TUESDAY<br>PRE-PRIMARY  | 1.           | 2ND F<br>PRIMA |         | PRE-       | 2.            | 30 D<br>PRIM |            | Р      | OST-     | 3.     |                    | AMENDM<br>REPORT?      |                | Yes          | N       | 0        | <b>\</b> |
| (place X to<br>the right of  | 6TH TUESDAY<br>PRE-ELECTION | 4. <b>X</b>  | 2ND F<br>ELECT |         | PRE-       | - 5.          | 30 D<br>ELEC | AY<br>TION | Р      | OST-     | 6.     |                    | TERMINATION<br>REPORT? |                | Yes          | N       | 0        | <b>\</b> |
| report type)   | ANNUAL REPO                 | <b>RT</b> 7. | Year           | 2008    |            |               |              | NG ME      |        | _        |        |                    | PAPER                  |                | $\checkmark$ | DISK    | ETTE     |          |
| Name of Office S   | ought by Cand               | idate:       |                |         |            |               |              | DAT        | E O    | F ELE    | CTIC   | N                  | District<br>Number     | Office<br>Code | Pa           | ty Code | Cour     |          |
|  |                             |              |                |         |            |               |              | МО         |        | DAY      | YI     | EAR                |                        | •              |              |         | •        |          |
|  |                             |              |                |         |            |               |              |            | 11     |          | 4      | 2008               |                        | (SEE INS       | STRUCTI      | ONS FOR | CODES    | )        |
|  | minary of Receipts and      |              |                |         |            |               |              |            |        | EAR      | FO     | R OFFIC            | E USE                  | ONLY           |              |         |          |          |
| Expenditures   | irom:                       |              | 1              | 1       | 20         | 800           | ТО           |            | 9      | :        | 15     | 2008               |                        |                |              |         |          |          |
| A. Amount Bro  | ught Forward F              | rom Last     | Report         |         |            |               | \$           | ;          |        |          | 5,!    | 556.52             |                        |                |              |         |          |          |
| B. Total Monetary Contributions And Receipts (From Schedule I) \$ 640.00 |                             |              |                |         |            |               |              |            |        |          |        |                    |                        |                |              |         |          |          |
| C. Total Funds Available (Sum Of Lines A and B) \$ 6,196.52              |                             |              |                |         |            |               |              |            |        |          |        |                    |                        |                |              |         |          |          |
| D. Total Expend  | ditures (From S             | chedule I    | II)            |         |            |               | \$           | 5          |        |          | 2,5    | 516.78             |                        |                |              |         |          |          |
| E. Ending Cash   | Balance (Subti              | ract Line [  | From           | Line C  | <b>:</b> ) |               | 9            | 5          |        |          | 3,6    | 79.74              |                        |                |              |         |          |          |
| F. Value Of In-  | Kind Contributi             | ons Recei    | ved (Fr        | om Sc   | hedule     | e II)         | 9            | 5          |        |          |        | 0.00               |                        |                |              |         |          |          |
| G. Unpaid Debt   | s And Obligation            | ns (From     | Schedu         | ıle IV  | )          |               | \$           | 5          |        |          |        | 0.00               |                        |                |              |         |          |          |
|  |                             |              |                |         | AFFI       | DAV           | IT SE        | CTIC       | N      |          |        |                    |                        |                |              |         |          |          |
| PART I - If this is  | a Committee i               | eport, tre   | asurer         | sign h  | ere. If    | f this        | is a Ca      | ndidat     | e re   | port, o  | andi   | date sig           | ın here.               |                |              |         |          |          |
| I swear (or affirm) correct and comple                                   |                             | including tl | he attach      | ed sch  | edules     | filed o       | n paper      | or by e    | lectr  | onic m   | edium  | , are to t         | he best of             | my knov        | vledge       | and bel | ief , tr | ue       |
| Sworn to and subs  | cribed before me<br>day of  | this         | 20             |         |            |               |              |            |        |          | S      | Signature          | of Person              | n Submitt      | ing Re       | oort    |          | _        |
|  | Sign                        | ature        |                |         |            |               | _            |            |        |          |        |                    | Print                  | ed Name        |              |         |          |          |
| My Commission Ex   | rpires                      |              |                |         |            |               |              |            | •      |          |        |                    | Emai                   | I              |              |         |          |          |
|  | МО                          |              | DAY            |         | YR         |               |              |            |        | Are      | ea Cod | de                 | Daytim                 | e Teleph       | one Nu       | mber    |          |          |
| Part II- If this is  | a report of a c             | andidate'    | s autho        | rized   | Commi      | ittee,        | Candio       | late sh    | nall s | sign he  | ere.   |                    |                        |                |              |         |          |          |
| I swear (or affirm)<br>No 320) as amende                                 |                             | of my know   | rledge an      | d belie | ef this p  | politica      | l comn       | nittee h   | as no  | ot viola | ted ar | y provis           | ions of the            | e act of Ju    | ine 3,1      | 937 (P. | L. 133   | 3,       |
| Sworn to and subsc   | ribed before me t<br>day of | his          | 20             |         |            |               |              |            |        |          |        | s                  | ignature o             | f Candida      | ite          |         |          | _        |
|  |                             |              | 20             |         |            |               | _            |            |        |          |        |                    | Printe                 | d Name         |              |         |          | -        |
|  | Signatu                     | re           |                |         |            |               | _            |            |        |          |        |                    | Emai                   | 1              |              |         |          | _        |
| My Commission Exp  | ires                        |              |                |         |            |               |              |            |        |          |        |                    | Emai                   |                |              |         |          |          |
|  | МО                          | i            | DAY            |         | YR         |               | _            |            |        | Area     | Code   |                    | Da                     | ytime Te       | elephoi      | ne Numi | ber      | _        |

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

| -  |           |          |              |           |  |  |  |  |  |
|--|-----------|----------|--------------|-----------|--|--|--|--|--|
| Name of Filing Committee or Candidate  | Reporting | g Period |              |           |  |  |  |  |  |
| PAFT (PA FED TEACH) COM SUPT P   | From:     | 1/1/200  | <u>8</u> To: | 9/15/2008 |  |  |  |  |  |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor  |           |          |              |           |  |  |  |  |  |
| TOTAL for the Reporting  | ) Period  | (1)      | \$           | 40.00     |  |  |  |  |  |
| 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)  |           |          |              |           |  |  |  |  |  |
| Contributions Received From Political Committees (Part A)  | \$        | 600.00   |              |           |  |  |  |  |  |
| All Other Contributions (Part B)   | \$        | 0.00     |              |           |  |  |  |  |  |
| TOTAL for the Reporting  | \$        | 600.00   |              |           |  |  |  |  |  |
| 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      |  |  |  |  |  |
|  |           |          |              |           |  |  |  |  |  |
| 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 |           |          | \$           | 640.00    |  |  |  |  |  |

#### **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.

|   |                    |                           |           |        |               | J 1       |           |
|---|--------------------|---------------------------|-----------|--------|---------------|-----------|-----------|
| Name of Filing Committee or Cano                    | didate             |                           | Reporting | Period |               |           |           |
| PAFT (PA FED TEACH) COM SUPT                        | ГР                 |                           | From:     | 1/1/20 | 008 <b>To</b> | :         | 9/15/2008 |
|   |                    |                           |           | DATE   |               |           | AMOUNT    |
| Full Name of Contributing Committee STEEL CENTER    | ee                 |                           | МО        | DAY    | YEAR          |           |           |
| Mailing Address                                     |                    |                           |           | 1.4    | 2000          | <b>\$</b> | 108.00    |
| City JEFFERSON HILLS                                | <b>State</b><br>PA | Zip Code (Plus 4<br>15025 | 5         | 14     | 2008          |           |           |
| Full Name of Contributing Committee NEW CASTLE AREA | ee                 |                           | МО        | DAY    | YEAR          |           |           |
| Mailing Address                                     |                    |                           |           |        |               | \$        | 61.50     |
| City NEW CASTLE                                     | <b>State</b><br>PA | Zip Code (Plus 4          | 6         | 23     | 2008          |           |           |
| Full Name of Contributing Committee NEW CASTLE AREA | ee                 |                           | МО        | DAY    | YEAR          |           |           |
| Mailing Address                                     |                    |                           | 6         | 23     | 2008          | <b>\$</b> | 61.50     |
| City NEW CASTLE                                     | <b>State</b><br>PA | Zip Code (Plus 4          |           |        | 2000          |           |           |
| Full Name of Contributing Committee NEW CASTLE AREA | ee                 | ·                         | МО        | DAY    | YEAR          |           |           |
| Mailing Address                                     |                    |                           | 6         | 23     | 2008          | \$        | 61.50     |
| City NEW CASTLE                                     | <b>State</b><br>PA | Zip Code (Plus 4          |           |        |               |           |           |
| Full Name of Contributing Committee NEW CASTLE AREA | ee                 |                           | МО        | DAY    | YEAR          |           |           |
| Mailing Address                                     |                    |                           | 6         | 23     | 2008          | \$        | 61.50     |
| City NEW CASTLE                                     | <b>State</b><br>PA | Zip Code (Plus 4          | )         |        | 2000          |           |           |
| Full Name of Contributing Committee NEW CASTLE AREA | ee                 |                           | МО        | DAY    | YEAR          |           |           |
| Mailing Address                                     |                    |                           | 6         | 23     | 2008          | \$        | 61.50     |
| City NEW CASTLE                                     | <b>State</b><br>PA | Zip Code (Plus 4          |           |        | 2000          |           |           |
| Full Name of Contributing Committee                 | ee                 | •                         | мо        | DAY    | YEAR          |           |           |
| NEW CASTLE AREA                                     |                    |                           |           |        |               |           | 61.50     |
| Mailing Address  City NEW CASTLE                    | <b>State</b><br>PA | Zip Code (Plus 4          | 6         | 23     | 2008          | <b>\$</b> | 01.50     |
|   |                    |                           |           |        |               |           |           |

| Full Name of Contributing Comr  | nittee |                                | мо          | DAY           | YEAR |                 |
|---------------------------------|--------|--------------------------------|-------------|---------------|------|-----------------|
| NEW CASTLE AREA                 |        |                                |             | 2711          |      |                 |
| Mailing Address                 |        |                                | - 6         | 23            | 2008 | <b>\$</b> 61.50 |
| City NEW CASTLE                 | State  | Zip Code (Plus 4)              | ]           | 23            | 2000 |                 |
|                                 | PA     | 16101                          |             |               |      |                 |
|                                 |        |                                |             |               |      |                 |
|                                 |        |                                |             |               |      |                 |
| Full Name of Contributing Comr  | mittee |                                | MO          | DAY           | VEAD |                 |
| Full Name of Contributing Comm  | mittee |                                | мо          | DAY           | YEAR |                 |
| _                               | nittee | <u>'</u>                       |             |               |      | <b>\$</b> 61.50 |
| NEW CASTLE AREA                 | nittee | Zip Code (Plus 4)              | <b>MO</b> 6 | <b>DAY</b> 23 |      | <b>\$</b> 61.50 |
| NEW CASTLE AREA Mailing Address |        | <b>Zip Code (Plus 4)</b> 16101 |             |               |      | <b>\$</b> 61.50 |

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

**PAGE TOTAL** 600.00

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)

| (Exclude cont                    |       | r ponticui conni |          | .03 .01   | Joi tea | in i di c | ~,         |            |
|----------------------------------|-------|------------------|----------|-----------|---------|-----------|------------|------------|
| Name of Filing Committee or Cand | date  |                  | Rep      | oorting P | eriod   |           |            |            |
|                                  |       |                  | From: To |           |         |           | <b>)</b> : |            |
|                                  |       |                  |          |           | 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 | ame of Filing Committee or Candidate |          | Reporting Period |      |     |      |     |            |  |
|---------------------------------------|--------------------------------------|----------|------------------|------|-----|------|-----|------------|--|
|                                       | From:                                | n: To:   |                  |      |     |      |     |            |  |
|                                       |                                      |          |                  | DA   | TE  |      | A   | AMOUNT     |  |
| Full Name of Contributing Committee   |                                      |          |                  | мо   | DAY | YEAR | \$  | 0.0        |  |
| Mailing Address                       |                                      |          |                  |      |     |      | 7 * | 0.0        |  |
| City                                  | State                                | Zip Cod  | e (Plus 4)       |      |     |      |     |            |  |
|                                       |                                      |          |                  |      |     |      | •   | PAGE TOTAL |  |
| Enter Grand Total of Part C on Schee  | dule 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.)

| Name of Filing Committee or Candidate  |                     |                | Rep     | orting Pe | riod  |      |        |                    |  |
|--|---------------------|----------------|---------|-----------|-------|------|--------|--------------------|--|
|  |                     |                | 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                          |                     |                |         | Occupa    | tion  |      |        |                    |  |
| Employer Mailing Address/Principal Pla | 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<br>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 Candidate              |                  | Report     | ing Peri | od  |      |    |            |
|----------------------------|---------------------------|------------------|------------|----------|-----|------|----|------------|
|                            |                           |                  | From:      |          |     | To:  |    |            |
|                            |                           | •                |            | C        | ATE |      |    | AMOUNT     |
| Full Name                  |                           |                  |            | мо       | DAY | YEAR | \$ | 0.00       |
| Mailing Address            |                           |                  |            |          |     |      | 7  |            |
| City                       | State                     | Zip Code (Plu    | us 4)      |          |     |      |    |            |
| Receipt Description        | •                         | •                |            |          | •   | •    | •  |            |
| Futor Curred Total of Bout | Fan Cabadula I. Datailad  | Summer Base S    | <b>!</b> ! | 4        |     |      |    | PAGE TOTAL |
| Enter Grand Total of Part  | E ON Schedule 1, Detalled | Summary Page, Se | ection     | 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 P   | From:            | <u>1/1/2008</u> <b>To:</b> | 9/15/2008 |  |  |  |  |  |  |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P  | ER CONTRIBUTOR   |                            |           |  |  |  |  |  |  |
| TOTAL for the Reporting Pe   | eriod (1)        | \$                         | 0.00      |  |  |  |  |  |  |
| . 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, 1 |                  | \$                         | 0.00      |  |  |  |  |  |  |

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

| Name of Filing Committee or Candidate                                   |       |                   | Reporting Period |          |      |             |           |      |
|---|-------|-------------------|------------------|----------|------|-------------|-----------|------|
|   |       |                   | From:            |          |      | То:         |           |      |
|   |       |                   |                  | DATE     |      |             | AMOUNT    |      |
| Full Name of Contributor  |       |                   | МО               | DAY      | YEAR |             |           |      |
| Mailing Address   |       |                   |                  |          |      | <b>7</b> \$ |           | 0.00 |
| City  | State | Zip Code (Plus 4) |                  |          |      |             |           |      |
| Description of Contribution:  | -     | <b>-</b>          | •                | •        | •    |             |           |      |
|   |       |                   |                  |          |      |             |           |      |
| Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detai |       |                   | iled Sum         | mary Pag | ge,  |             | PAGE TOTA | L    |
| Section 2.  |       |                   |                  |          |      | \$          |           | 0.00 |

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

| Name of Filing Committee or Candidate   |                  |      |                  | Rep    | porting | Period       |        |       |                 |
|---|------------------|------|------------------|--------|---------|--------------|--------|-------|-----------------|
|   |                  |      |                  | Fro    | m:      |              | То:    |       |                 |
|   |                  |      |                  |        |         | DATE         |        |       | AMOUNT          |
| Full Name of Contributor                |                  |      |                  |        | мо      | DAY          | YEAR   |       |                 |
| Mailing Address                         |                  |      |                  | -      |         |              |        | \$    | 0.00            |
| City                                    | State            |      | Zip Code(Plus 4) |        |         |              |        |       |                 |
| Employer of Contributor                 |                  |      |                  |        | Occup   | ation        |        |       |                 |
| Employer Mailing Address/Principal Plac | e of Business    | City | у                | State  | e Zip   | Code(Plus 4) | Descri | ption | of Contribution |
| Enter Grand Total of Part G on Sch      | edule II, In-Kin | nd C | Contributions D  | etaile | ed      |              |        |       | PAGE TOTAL      |
| Summary Page, Section 3.                |                  |      |                  |        |         |              |        |       | 0.00            |

## SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate | g Committee or Candidate Reporting Period |      |            |        |     |           |
|---------------------------------------|---|------|------------|--------|-----|-----------|
| PAFT (PA FED TEACH) COM SUPT P        |   | From | <u>1/1</u> | L/2008 | To: | 9/15/2008 |
|                                       |   |      | DATE       |        |     | AMOUNT    |
| To Whom Paid                          |   |      |            |        |     |           |

|   |                     |                          |                            | DATE | AMOUNT                     |    |            |  |
|---|---------------------|--------------------------|----------------------------|------|----------------------------|----|------------|--|
| To Whom Paid SENATOR PAT BROWNE Mailing Address |                     |                          | мо                         | DAY  | YEAR                       |    |            |  |
|   |                     |                          |                            |      |                            |    |            |  |
|   |                     |                          | 6                          | 1    | 2008                       | \$ | 500.00     |  |
| City  | State               | State Zip Code (Plus 4)  |                            |      | Description of Expenditure |    |            |  |
|   |                     |                          |                            |      | CONTRIBUTION               |    |            |  |
| To Whom Paid                                    |                     |                          | мо                         | DAY  | YEAR                       |    |            |  |
| SENATE REPUBLICAN CAMPAIGN COMM                 |                     |                          | MO                         |      | ILAK                       |    |            |  |
| Mailing Address                                 |                     |                          | 6                          | 1    | 2008                       | \$ | 1,000.00   |  |
| City  | State               | Zip Code (Plus 4)        | Description of Expenditure |      |                            |    |            |  |
|   |                     |                          | CONTRIBUTION               |      |                            |    |            |  |
| To Whom Paid                                    |                     |                          | мо                         | DAY  | YEAR                       |    |            |  |
| FRIENDS OF SENATOR PILEGGI                      |                     |                          | М                          |      | ILAK                       |    |            |  |
| Mailing Address                                 |                     |                          | 8                          | 22   | 2008                       | \$ | 1,000.00   |  |
| City  | State               | Zip Code (Plus 4)        | Description of Expenditure |      |                            |    |            |  |
|   |                     |                          | CONTRIBUTION               |      |                            |    |            |  |
| To Whom Paid                                    |                     |                          | мо                         | DAY  | YEAR                       |    |            |  |
| AMALGAMETED BANK                                |                     |                          | PIO                        |      | ILAK                       |    |            |  |
| Mailing Address                                 |                     |                          |                            |      |                            | \$ | 16.78      |  |
| City  | State               | Zip Code (Plus 4)        | Description of Expenditure |      |                            |    |            |  |
|   |                     |                          | SERVICE CHARGES            |      |                            |    |            |  |
| Futor Consul Tatal of Free 19                   | <b>n</b> 1 <b>n</b> |                          |                            |      |                            |    | PAGE TOTAL |  |
| Enter Grand Total of Expenditu                  | res on Page 1, R    | eport Cover Page, Item D | -                          |      |                            | \$ | 2,516.78   |  |