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 80	00367			Repor Filed I		CAND	IDATE	СОМ	MITTEE	✓	LOBE	BYIST			
Name of Filing C	Committee, Cand	lidate or L	obbyist:		Local 0	712 I	BEW COP	PE								
Street Address:	217 SASSA	FRAS LAN	NE													
City:	BEAVER						State:	PA		Zip Co	Zip Code: 15009					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIE PRIMARY		- 2.	30 D PRIM	AY 1ARY	POST-	3.	AMENDI REPORT		Yes	No	\checkmark		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.					0 DAY POST- 6.			TERMIN REPORT		Yes	No	\checkmark		
report type)	ANNUAL REPOR	RT 7. X	Year 200)8			NG METH			PAPER		\checkmark	DISKE	TTE		
Name of Office S	bought by Candi	date:	-		•		DATE C	OF ELEC	TION	District Number		Par	ty Code	County Code		
							мо	DAY	YEAR							
							11	-	4 2008	3	(SEE INS	TRUCTIO	ONS FOR (CODES)		
	Receipts and	мо	DAY	YEAR	L I		мо	DAY	YEAR	FC	OR OFFIC	E USE	ONLY			
Expenditures	s from:		1	1 20	008 1	0	12	2 3	1 2008	3						
A. Amount Bro	ught Forward Fi	om Last F	Report			4	5		7,200.82	2						
B. Total Monet	ary Contribution	s And Re	ceipts (Fro	om Sche	dule I)	5	5		1,289.38							
C. Total Funds	Available (Sum	Of Lines A	A and B)			9	\$		8,490.20)						
D. Total Expen	ditures (From S	chedule I	II)			9	5		0.00	-						
E. Ending Cash	Balance (Subtr	act Line D	From Lin	e C)		4	5		8,490.20							
F. Value Of In-	Kind Contributio	ons Receiv	/ed (From	Schedu	le II)		\$		0.00							
G. Unpaid Deb	ts And Obligatio	ns (From	Schedule	IV)		5	5		0.00							
				AFF	IDAVI	IT SI	ECTION									
PART I - If this is	s a Committee r	eport, trea	asurer sig	n here. I	If this is	s a Ca	ndidate r	eport, ca	andidate si	gn here.						
I swear (or affirm) correct and comple		ncluding th	e attached	schedules	s filed on	paper	or by elect	tronic me	dium, are to	the best o	of my knov	vledge	and beli	ef , true		
Sworn to and subs	cribed before me t day of	his	20						Signatu	re of Perso	n Submitt	ing Rep	oort			
	Signa	ture				_				Prin	ited Name					
My Commission Ex	-									Ema	nil					
	мо	D	AY	YR				Are	a Code	Daytin	ne Teleph	one Nu	mber			
Part II- If this is	a report of a ca	ndidate's	authorize	ed Comm	nittee, C	Candio	date shall	sign he	re.							
I swear (or affirm) No 320) as amende		f my know	ledge and b	elief this	political	comr	nittee has r	not violato	ed any provi	sions of th	e act of Ju	ine 3,19	937 (P.L	. 1333,		
Sworn to and subso	ribed before me th day of	is	20						:	Signature	of Candida	ite				
						_				Printe	ed Name					
Mu Corrector 5	Signatu	e				-				Ema	ail					
My Commission Exp	nres 					_										
	мо	C	DAY	YR				Area C	Code	D	aytime Te	elephon	e Numb	er		

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** Local 0712 IBEW COPE From: <u>1/1/2008</u> **To:** 12/31/2008 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **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)** 1,289.38 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 1,289.38 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 \$ 1,289.38 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					
Fro					From: To:					
					DATE			AMOUNT		
Full Name of Contributing Committee				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.

PAGE 3

\$

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			orting P	eriod				
			Fro	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 S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	2.		\$	0.00	

PAGE 5

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 Candid	Reporting Period							
Local 0712 IBEW COPE	From:	<u>1/</u>	<u>′1/2008</u>	То:	<u>12</u>	<u>12/31/2008</u>		
				DA	TE		A	MOUNT
Full Name of Contributing Committe	e			мо	DAY	YEAR		
Mailing Address 217 Sassafras L	ane						\$	1,289.38
City Beaver	State PA	Zip Cod 15009-	e (Plus 4) 170	12	2	2008	3	
Enter Grand Total of Part C on S	chedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	PAGE TOTAL 1,289.38

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, 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 C	Name of Filing Committee or Candidate			Reporting Period					
	From: To				1				
			I	D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$	i	0.00
City	State	Zip Code (Plus 4)						
Receipt Description	I			1	1				
Enter Grand Total of Part E o	- Schodulo I. Dotailoc		Section	4				PAGE TOT	AL
	i Schedule 1, Detailet	i Summaly Paye,	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		
Local 0712 IBEW COPE	From:	<u>1/1/2008</u> To:	<u>12/31/2008</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	Reporting Period						
	From:			То:			
				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 Schedule II, In-Kind Contributions Detaile Section 2.				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 Candidate						Reporting Period				
					Fro	From: To:				
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(P	Plus 4)						
Employer of Contributor					Occupation					
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip 4)	Code(Plus	Descri	otion o	of Contribution
Enter Grand Total of Part G on Sch	edule II, 1	In-Kind	Contributio	ons De	taile	d				PAGE TOTAL

Summary Page, Section 3.

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate							
	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	an Pago 1. Poport C	over Dage Item F	`				PAGE TOTAL	
	on rage 1, Report C	over rage, Item L				\$	0.00	