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 200	5226				port ed B		CANDI	DATE		СОМ	4ITTEE	✓	LOB	BYIST	
Name of Filing C	Committee, Candi	date or L	obbyist:		Loca	al 00)32BJ	PA Amei	ican D	ream	Fund					
Street Address:	101 AVE OF	THE AME	RICAS													
City:	NEW YORK							State:	NY			Zip Code: 10013				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA' PRIMARY	Y PRE	-	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA' ELECTION	y pre	≣- !	5. X	30 DA		POST-	6.		TERMINA REPORT		Yes	No	~
report type)	ANNUAL REPOR	T 7.	Year 2009					NG METHO				PAPER		V	DISKE	TTE
Name of Office S	Sought by Candid	ate:						DATE 0	F ELE	CTIC	N	District Number	Office Code	Pai	ty Code	County Code
	,							МО	DAY	YI	AR	Number	Code			code
								11		3	2009		(SEE IN	STRUCTI	ONS FOR (CODES)
Summary of Expenditures	Receipts and	МО	DAY	YEAR	ł			МО	DAY	YI	EAR	FO	R OFFI	CE USE	ONLY	
Expenditures			1 1	2	009	Т	0	10	:	19	2009					
A. Amount Bro	ught Forward Fro	om Last R	eport				\$			14,	126.82					
B. Total Moneta	ary Contributions	And Rec	eipts (From	Sche	dule	e I)	\$			10,0	00.00					
C. Total Funds	Available (Sum (Of Lines A	and B)				\$			24,:	126.82					
D. Total Expend	ditures (From Sc	hedule II	I)				\$			3,5	500.00					
E. Ending Cash	Balance (Subtra	ct Line D	From Line (C)			\$			20,6	26.82					
F. Value Of In-	Kind Contributio	ns Receiv	ed (From Se	chedu	le II	[)	\$				0.00					
G. Unpaid Debt	s And Obligation	s (From S	Schedule IV)			\$				0.00			1		
				AFF	IDA	٩VI	T SE	CTION								
PART I - If this is			_						-		_					
I swear (or affirm) correct and comple) that this report, in ete.	cluding the	e attached scl	hedule	s filed	d on	paper	or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , true
Sworn to and subs	cribed before me the	nis	20							5	ignature	of Perso	n Submit	ting Re	ort	
							-					Prin	ted Name	e		
My Commission Ex	Signat opires	ture										Ema	il			
	мо	D	AY	YR			_		Are	ea Cod	le		e Telepi	none Nu	mber	
Part II- If this is	a report of a ca	ndidate's	authorized	Comn	nitte	e, C	andid	ate shall	sign he	ere.						
I swear (or affirm) No 320) as amende		my knowl	edge and beli	ef this	polit	tical	comm	ittee has n	ot viola	ted an	y provisi	ions of th	e act of J	une 3,1	937 (P.L	. 1333,
Sworn to and subsc	ribed before me thi	s									Si	ignature o	of Candid	ate		
	day of		_ 20				_									
	e:t						-					Printe	d Name			
My Commission Exp	Signature ires	=										Ema	il			
	мо	D	AY	YR	ł		•		Area	Code		Da	aytime T	elephor	ne Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
Local 0032BJ PA American Dream Fund	From:	1/1/200	<u>)9</u> To:	10/19/2009
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g 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)			\$	0.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	g Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	10,000.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	g Period	(3)	\$	10,000.00
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			\$	10,000.00

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 o	r Candidate		Rep Fro	oorting P	eriod	To	o:	
			l		DATE			AMOUNT
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 Per	iod		
Local 0032BJ PA American Dream Fund	From:	1/1/2009	То:	10/19/2009

DATE AMOUNT

Full Name of Contributing Committee Local 32BJ SEIU American Dream Fund			МО	DAY	YEAR	
Mailing Address 101 Avenue of the Americas					\$ 10,000.00	
City New York	State NY	Zip Code (Plus 4) 10013	10	1	2009	

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

PAGE TOTAL \$ 10,000.00

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			
			Froi	m:		To):	
				D	ATE		АМ	OUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plu	5 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed S	Summary Page,	Section	on 3.			PA:	GE 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 or	Candidate		Report	ting Perio	bd			
			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. Detaile	d Summary Page	Section	4			PAG	E TOTAL
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	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 0032BJ PA American Dream Fund	From:	<u>1/1/2009</u> To:	<u>10/19/2009</u>
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 Candidat	:e		Reporting	g Period			
			From:			То:	
				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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Reporting	Period			
					From:		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 Plad Business	ce of	City	Sta	ite	Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, I	n-Kind	Contributions	Deta	ailed				PAGE TOTAL
Summary Page, Section 3.									0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Car	ndidate		Reporti	ng Period			
Local 0032BJ PA American Drea	am Fund		From	<u>1/</u>	1/2009	То:	10/19/2009
				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
CTE Joseph DiGirolamo Mayor							
Mailing Address 2400 Byberry	y Road		9	24	2009	\$	500.00
City Bensalem	State	Zip Code (Plus 4)	Descrip	tion of Exp	penditure	<u> </u>	
	PA	19020		l Contribut			
To Whom Paid	-		мо	DAY	YEAR		
Upper Moreland Democratic Cm	te 						
Mailing Address 2305 Compu	ter Avenue		9	24	2009	\$	250.00
City Willow Grove	State	Zip Code (Plus 4)	Descrip	tion of Exp	penditure	<u>'</u>	
	PA	19090	Politica	l Contribut	ion		
To Whom Paid Friends of Frank Farry			мо	DAY	YEAR		
Mailing Address PO Box 231			9	30	2009	\$	500.00
City Langhorne	State	Zip Code (Plus 4)	Descrip	tion of Exp) penditure	•	
	PA	19047	Politica	l Contribut	ion		
To Whom Paid Neighbors for Michalow			мо	DAY	YEAR		
Mailing Address 213 S. Birmi	ngham Avenue		9	30	2009	\$	2,000.00
City Pittsburgh	State	Zip Code (Plus 4)	Descrip	tion of Exp) penditure	<u> </u>	
J	PA	15202	Politica	l Contribut	ion		
To Whom Paid Friends of Ed Pawlowski			мо	DAY	YEAR		
Mailing Address PO Box 9366	i		9	30	2009	\$	250.00
City Allentown	State	Zip Code (Plus 4)	Descrip	tion of Exp) penditure	<u> </u>	
, .	PA	18105		l Contribut			
		•	•				PAGE TOTAL
Enter Grand Total of Expendi			_			1	