# **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 :	ion 2000	190			Report Filed B		CANDI	DATE	СОМ	MITTEE	✓	LOBI	BYIST		
Name of Filing C	Committee, Candida	ate or Lo	obbyist:		AFT-PEI	-	LVANIA								
Street Address:	1816 CHESTN	IUT ST													
City:	PHILADELPHI	4					State:	PA		<b>Zip Code:</b> 19103					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. <b>X</b>	2ND FRIDA PRIMARY	Y PRE	- 2.	30 D/ PRIM		POST-	3.	AMENDI REPORT		Yes	No	$\checkmark$	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.				30 D/ ELEC		POST-	6.	TERMIN REPORT		Yes	No	$\checkmark$	
report type)	ANNUAL REPORT	7.	<b>Year</b> 2011				NG METHO			PAPER		$\checkmark$	DISKE	TTE	
Name of Office S	Sought by Candidat	te:					DATE O	F ELEC	TION	District Number		Par	ty Code	County Code	
							мо	DAY	YEAR						
							11		8 2011		(SEE INS	STRUCTI	ONS FOR	CODES)	
	Receipts and	мо	DAY	YEAR	2		мо	DAY	YEAR	FC	OR OFFIC	E USE	ONLY		
Expenditures	s from:		1 1	2	011 <b>T</b>	0	3	2	8 2011						
A. Amount Bro	ught Forward Fron	n Last R	eport			\$			10,152.49						
B. Total Monet	ary Contributions	And Reco	eipts (Fron	1 Sche	dule I)	\$			628.00						
C. Total Funds	Available (Sum Of	Lines A	and B)			\$			10,780.49						
D. Total Expen	ditures (From Scho	edule II	[)			\$			0.00						
E. Ending Cash	Balance (Subtract	t Line D	From Line	C)		\$			10,780.49						
F. Value Of In-	Kind Contributions	Receive	ed (From S	chedu	le II)	\$			0.00						
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV	()		\$			0.00						
				AFF	IDAVI	T SE	CTION								
	s a Committee repo		-					• •		-					
I swear (or affirm) correct and comple	) that this report, incl ete.	uding the	attached sc	hedules	s filed on	paper	or by elect	ronic me	dium, are to	the best o	of my knov	vledge	and beli	ef , true	
Sworn to and subs	cribed before me this day of	5	20						Signatur	e of Perso	on Submitt	ing Rep	oort		
						-				Prir	nted Name	1			
My Commission E	Signatu xpires	re								Ema	ail				
	мо	DA	AY	YR		_		Are	a Code	Daytin	ne Teleph	one Nu	mber		
Part II- If this is	a report of a cand	lidate's a	authorized	Comn	nittee, C	andid	ate shall	sign he	re.						
I swear (or affirm) No 320) as amende	that to the best of ned.	ny knowle	edge and beli	ef this	political	comm	ittee has n	ot violat	ed any provis	sions of th	e act of Ju	une 3,1	937 (P.L	. 1333,	
Sworn to and subscribed before me this Signature of Candidate day of 20															
						-				Printe	ed Name				
My Commission Exp	Signature					-				Ema	ail				
	мо	DA	AY	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** AFT-PENNSYLVANIA From: <u>1/1/2011</u> **To:** <u>3/28/2011</u> 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 160.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 468.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 468.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 0.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 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 \$ 628.00 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.

AFT-PENNSYLVANIA     From:     1/1/2011     To:     3/2       DATE     DATE     AMOU       Full Name of Contributing Committee NEW CASTLE AREA SCHOOL DIST     MO     DAY     YEAR	8/2011 NT
Full Name of Contributing Committee MO DAY YEAR	NT
I MO I DAY I YEAR I	
Mailing Address   3   9   2011   \$	52.00
City     NEW CASTLE     State     Zip Code (Plus 4)       PA     PA	
Full Name of Contributing Committee     MO     DAY     YEAR       NEW CASTLE AREA SCHOOL DIST     MO     DAY     YEAR	
Mailing Address 3 9 2011 \$	52.00
City     NEW CASTLE     State     Zip Code (Plus 4)       PA	
Full Name of Contributing Committee     MO     DAY     YEAR       NEW CASTLE AREA SCHOOL DIST     MO     DAY     YEAR	
	52.00
City     NEW CASTLE     State     Zip Code (Plus 4)       PA     PA	
Full Name of Contributing Committee     MO     DAY     YEAR       NEW CASTLE AREA SCHOOL DIST     MO     DAY     YEAR	
3 9 2011	52.00
City     NEW CASTE     State     Zip Code (Plus 4)       PA	
Full Name of Contributing Committee     MO     DAY     YEAR       NEW CASTLE AREA SCHOOL DIST     MO     DAY     YEAR	
	52.00
City     NEW CASTE     State     Zip Code (Plus 4)       PA	
Full Name of Contributing Committee     MO     DAY     YEAR       NEW CASTLE AREA SCHOOL DIST     MO     DAY     YEAR	
Mailing Address 1 21 2011 \$	52.00
City     NEW CASTE     State     Zip Code (Plus 4)       PA	
Full Name of Contributing Committee     MO     DAY     YEAR       NEW CASTLE AREA SCHOOL DIST     MO     DAY     YEAR	
Mailing Address     1     21     2011	52.00
City     NEW CASTLE     State     Zip Code (Plus 4)       PA     PA	

Full Name of Contributing Committee NEW CASTLE AREA SCHOOL DIST				DAY	YEAR		
Mailing Address	1	21	2011	\$	52.00		
City NEW CASTLE	State PA	Zip Code (Plus 4)		21	2011		
Full Name of Contributing Committee NEW CASTLE AREA SCHOOL DIST				DAY	YEAR		
Mailing Address			1	21	2011	\$	52.00
City NEW CASTLE	State PA	Zip Code (Plus 4)		21	2011		
		PAGE TOTAL					
nter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.							468.00

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 Candidate Reporting Period										
			From: 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	\$	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		A	MOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR		0.00	
Mailing Address							- \$	0.00	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.							\$	0.00	

## 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:				m:			To:		
				D	ATE		AM	IOUNT	
Full Name of Contributor				мо	DAY	YEAR	\$	0.00	
Mailing Address									
City	State	Zip Code (Plu	s 4)						
Employer Name				Occupation					
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip Code	e (Plus 4)	
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.							P/ \$	<b>AGE TOTAL</b> 0.00	

### 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 Candidate			Report	ing Peric	d			
			From:			То:		
				D	ATE		AMOUNT	r
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (	Plus 4)					
Receipt Description								
		-	a .:				PAGE TO	TAL
Enter Grand Total of Part E on Sched	ule 1, Detailed Sumr	mary Page,	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										
AFT-PENNSYLVANIA	From:	<u>1/1/2011</u> <b>To:</b>	<u>3/28/2011</u>								
. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR											
TOTAL for the Reporting Pe	riod (1)	\$	0.00								
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)										
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 R			Reporting Period					
				From:			То:	
				DATE		AMOUNT		
Full Name of Contributor				DAY	YEAR			
Mailing Address		_				<b>7</b> \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:			1					
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Su Section 2.					je,		PAGE TOTA	AL.
						\$		0.00

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#### SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate	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 Place of Business City			Stat	e Zip	Code(Plus 4)	Descri	ption of Contribution			
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.					<b>PAGE TOTAL</b> 0.00					

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate				Reporting Period					
				From						
		DATE		AMOUNT						
To Whom Paid	мо	DAY	YEAR							
Mailing Address						\$	0.00			
City	Zip Code (Plus 4)	) Description of Expenditure								
Enter Grand Tatal of Evnanditures	<u> </u>				PAGE TOTAL					
Enter Grand Total of Expenditures of				\$	0.00					