### **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 :	<b>on</b> 20	00190				port ed B		CANI	DIC	DATE		COM	1ITTEE	<b>✓</b>	LOB	BYIST		
Name of Filing C	committee, Cand	didate or I	obbyist:		AFT	-PEI	NNSY	LVANIA										
Street Address:																		
City:	PHILADELP	HIA						State:		PA			Zip Cod	l <b>e:</b> 19	103			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	AY PRE	-	2. <b>X</b>	30 DA						AMENDMENT REPORT?		Yes	N	0	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA	AY PRE	E	5.	30 DA		P	OST-	6.		TERMINA REPORT?		Yes	N	0	<b>\</b>
report type)	ANNUAL REPO	<b>RT</b> 7.	<b>Year</b> 2011	-				NG MET CHECK		_			PAPER		$\checkmark$	DISK	ETTE	
Name of Office S	- Sought by Candi	date:						DATE	OF	ELE(	CTIO	N	District Number	Office Code	Pai	ty Cod	Code	
								МО		DAY	YE	AR						
								1	11		8	2011		(SEE INS	TRUCTI	ONS FOR	CODES	)
Summary of		МО	DAY	YEAR	2			МО		DAY	YE	AR	FO	R OFFIC	E USE	ONLY	,	
Expenditures	trom:		1 1	L 2	011	Т	0		5		2	2011						
A. Amount Bro	ught Forward F	rom Last I	Report				\$				10,7	780.49						
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 177.00																		
C. Total Funds Available (Sum Of Lines A and B)											10,9	957.49						
D. Total Expenditures (From Schedule III)							\$				1,0	00.00						
E. Ending Cash Balance (Subtract Line D From Line C)							\$				9,9	57.49						
F. Value Of In-	Kind Contribution	ons Receiv	ved (From S	Schedu	le II	()	\$					0.00						
G. Unpaid Debt	s And Obligatio	ns (From	Schedule I	V)			\$					0.00						
				AFF	ID/	AVI.	T SE	CTIO	N									
PART I - If this is			_									_						
I swear (or affirm) correct and comple		ncluding th	e attached so	chedule	s file	d on	paper	or by ele	ectro	onic me	edium	, are to t	he best of	my knov	vledge	and be	lief , tr	ue
Sworn to and subs	cribed before me	this	20						-		s	ignature	of Persor	n Submitt	ing Re	oort		_
	Signa	ature					- -		-				Print	ted Name				_
My Commission Ex	cpires						_		-				Emai	I				
	МО		PAY	YR						Are	a Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a co	andidate's	authorized	l Comn	nitte	e, C	andid	ate sha	II s	ign he	ere.							
I swear (or affirm) No 320) as amende		of my know	ledge and bel	lief this	polit	tical	comm	ittee has	s no	t violat	ed an	y provisi	ions of the	e act of Ju	ine 3,1	937 (P.	L. 133	з,
Sworn to and subsc		nis	26									Si	ignature o	f Candida	ite			_
-	day of 						_	Printed Name							-			
	Signatu	re					-		_									_
My Commission Exp	ires												Emai	I				
MO DAY YR							-		•	Area	Code		Da	ytime Te	elephor	ne Num	ber	_

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	J Period		
AFT-PENNSYLVANIA	From:	1/1/201	<u>1</u> To:	<u>5/2/2011</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g Period	(1)	\$	177.00
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	y Period	(2)	\$	0.00
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	J Period	(3)	\$	0.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	177.00

#### **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 Commit	lame of Filing Committee or Candidate				Reporting Period							
				From:		То	•					
			<b>'</b>		DATE			AMOUNT				
Full Name of Contributin	g Committee			мо	DAY	YEAR						
Mailing Address							\$	0.00				
City	s	itate	Zip Code (Plus 4)									

PAGE TOTAL
0.00

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

### **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.

(Exclu	de contributions fron	n political comm	itte	es re <sub>l</sub>	oortea	in Part	A)	
Name of Filing Committe	e or Candidate		Rep	orting P	eriod			
			From: To				<b>o</b> :	
		1			DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.0
City	State	Zip Code (Plus 4)	)					
	•	•	•		•	•		PAGE TOTAL

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

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	me of Filing Committee or Candidate			Reporting Period							
			From:			То:					
				DA	TE		А	MOUNT			
Full Name of Contributing Committee				мо	DAY	YEAR	\$		0.00		
Mailing Address							7 *		0.00		
City	State	Zip Cod	e (Plus 4)								
<u> </u>	I	ı			ı	<u> </u>					
		_		_				PAGE TOT	AL		
nter Grand Total of Part C on Schedule I, Detailed Summary			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	ime of Filing Committee or Candidate			Reporting Period						
				Fror	From:				То:	
					DATE			AMOUNT		
Full Name of Contributor					МО	DAY	YEAR	1	<b>*</b>	0.00
Mailing Address										
City	State	Zip	Code (Plus	s <b>4</b> )						
Employer Name	•				Occupation					
Employer Mailing Address/Principal Pla	ace of Business		City		•	State		Zip	Code (Plu	us 4)
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Sect									PAGE 1	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	ing Peri	od			
			From:			To:		
		<b>'</b>			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	<b>'</b>	1					<u> </u>	
	- C		<b>.</b> .:	_				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	d							
AFT-PENNSYLVANIA	From:	<u>1/1/2011</u> <b>To</b> :	5/2/2011						
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 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,		\$	0.00						

## SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

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

Name of Filing Committee or Car	ndidate		Reporting Period					
			From:			To		
				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:	•		•	•		•		
					-			
Enter Grand Total of Part F o	nd Contributions Detai	ailed Summary Page,			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	
	From:	То:

				FIG	m:		10:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address							\$	0.00	
City	State		Zip Code(Plus 4)						
Employer of Contributor				Occupation					
Employer Mailing Address/Principal Place of Business City				State	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.				ed				PAGE TOTAL 0.00	

1,000.00

### STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period			
AFT-PENNSYLVANIA			From	<u>1/</u>	1/2011	То:	5/2/2011
				AMOUNT			
To Whom Paid			МО	DAY	YEAR		
CITIZENS FOR HUGHES							
Mailing Address				5	2011	\$	500.00
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
			CONTRI	IBUTION			
To Whom Paid			МО	DAY	YEAR		
COMMITTEE TO ELECT TIM SOLOBAY			140		LAK		
Mailing Address			5	2	2011	\$	500.00
City State Zip Code (Plus 4			Descrip	tion of Exp	enditure	•	
CONTRIBUTION							
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL	