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 800	0367				port		CANDI	DATE		СОМ	4ITTEE	✓	LOB	BYIST		
Name of Filing C	Committee, Candi	date or L	obbyist:		Loca	al 07	712 IE	BEW COP	E								_
Street Address:	217 SASSAF	RAS LAN	E														
City:	BEAVER							State:	PA			Zip Cod	le: 15	5009			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	-	2.	30 DA PRIMA		POST-	3. X		AMENDM REPORT?		Yes	No	•	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDATELECTION	y pri	≣-	5.	30 DA ELECT		POST-	6.		TERMINA REPORT?		Yes	No	•	/
report type)	ANNUAL REPORT	7.	Year 2011					IG METHO				PAPER		/	DISKE	TTE	
Name of Office S	Sought by Candida	ate:	-		_			DATE O	F ELE	CTIO	N	District Number	Office Code	Pai	rty Code	Count	ty
								МО	DAY	YE	AR	Number	code	ļ		couc	
								11		8	2011		(SEE IN	ISTRUCTI	ONS FOR (CODES)	
Summary of Expenditures	Receipts and	МО	DAY	YEAR	ł			МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
Expenditures			1 1	2	011	Т	0	6		6	2011						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			8,1	193.07						
B. Total Moneta	ary Contributions	And Rec	eipts (From	Sche	dule	: I)	\$			2,2	289.02						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			10,4	182.09						
D. Total Expenditures (From Schedule III) \$ 0.00																	
E. Ending Cash	Balance (Subtra	t Line D	From Line	C)			\$			10,4	82.09						
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	le II	()	\$				0.00						
G. Unpaid Debt	s And Obligation	s (From S	Schedule IV)			\$				0.00			'			
				AFF	IDA	۱۷۶	T SE	CTION									
	s a Committee rep		_														
I swear (or affirm)) that this report, inc ete.	cluding the	e attached sci	nedule	s file	d on	paper (or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and beli	ef , tru	e
Sworn to and subs	cribed before me th day of	is	20							S	ignature	of Perso	n Submit	ting Re	port		-
	Signat						- -					Prin	ted Name	e			-
My Commission Ex	_	ui e										Ema	il				-
	мо	D	AY	YR					Ar	ea Cod	le	Daytim	e Telepi	none Nu	mber		_
Part II- If this is	a report of a can	didate's	authorized	Comn	nitte	e, C	andida	ate shall	sign h	ere.							Ī
I swear (or affirm) No 320) as amende	that to the best of	my knowle	edge and beli	ef this	polit	tical	commi	ittee has n	ot viola	ted an	y provis	ions of the	e act of J	une 3,1	937 (P.L	. 1333	,
Sworn to and subsc	ribed before me this	•									s	ignature o	of Candid	ate			-
	day of						_					Printe	d Name				-
	Signature						-										_
My Commission Exp	-											Ema	il				
	МО	D	AY	YR	l		•		Area	Code		Da	aytime T	elephor	ne Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	y Period		
Local 0712 IBEW COPE	From:	1/1/201	<u>1</u> To:	<u>6/6/2011</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) 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	Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	2,289.02
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	2,289.02
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			\$	2,289.02

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Name of Filing Committee or Candidate				ng Period			
			From:		То	:	
		I		DATE			AMOUNT
Full Name of Contribut	ing Committee		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

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 of Candidate					Reporting Period From: To:				
					DATE			AMOUNT	
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4)	1						

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 Period						
Local 0712 IBEW COPE			From:	1/	<u>/1/2011</u>	То:	<u>6/6/2011</u>		
				DA	TE		Α	MOUNT	
Full Name of Contributing Committee Local 0712 IBEW COPE				МО	DAY	YEAR			
Mailing Address 217 Sassafras Lane				_	_		\$	1,307.90	
City Beaver	State PA	Zip Code 15009-17		5	5	2011			
Full Name of Contributing Committee Local 0712 IBEW COPE				МО	DAY	YEAR			
Mailing Address 217 Sassafras Lane							\$	981.12	
City Beaver	State PA	Zip Code 15009-17		6	1	2011	l		
								PAGE TOTAL	
Enter Grand Total of Part C on Sche	dule I, Detailed Sun	nmary Pag	ge, Sectio	n 3.			\$	2,289.02	

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	ame of Filing Committee or Candidate					Reporting Period						
			Fror	n:		To) :					
				D	ATE		А	MOUNT				
Full Name of Contributor				мо	DAY	YEAR						
Mailing Address							\$	0.00				
City	State	Zip Code (Plu	s 4)									
Employer Name		•		Occupa	tion		•					
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Coo	de (Plus 4)				
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary Page	Section .	on 3.			\$	PAGE 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	GE 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	d	
Local 0712 IBEW COPE	From:	<u>1/1/2011</u> To :	<u>6/6/2011</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER 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 Candid	ate		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 S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	ле Г		PAGE TOTAL	
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	, ,		PAGE TOTAL	
						\$	0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candida	Name of Filing Committee or Candidate					porting	Period				
					Fro	m:		То	:		
					<u> </u>		DATE				AMOUNT
Full Name of Contributor						мо	DAY	YEAR	1		
Mailing Address										\$	0.00
City	State		Zip Code(F	Plus 4)							
Employer of Contributor	•		•			Occupa	ation				
Employer Mailing Address/Principal P Business	lace of	City		State		Zip 4)	Code(Plus	Desc	ripti	on of C	ontribution
Enter Grand Total of Part G on S	chedule II, I	In-Kind	Contributi	ons De	taile	ed					PAGE TOTAL
Summary Page, Section 3.											0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or (lame of Filing Committee or Candidate					Reporting Period				
						То:	Го:			
				DATE			AMOUNT			
To Whom Paid			МО	DAY	YEAR					
Mailing Address						\$	0.00			
City	State	Zip Code (Plus 4)	Descri	ption of Ex	penditure					
-							PAGE TOTAL			
Enter Grand Total of Expen	laitures on Page 1, Re	port Cover Page, Item D).			\$	0.00			