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 8000 | 0367 | | | | port ed B | | CANDI | CANDIDATE COMMITTEE V LOBBYIST | | | | | | | | |
|---|--|------------|------------------------|--------|-------|--------------|-----------------------------------|-------------|--------------------------------|--------|------------|----------------------|----------------|----------|-----------|----------|----------|
| Name of Filing C | ommittee, Candid | late or L | obbyist: | • | LOC | CAL (| 0712 | IBEW CO | PE | | | | _ | | | | |
| Street Address: | 217 SASSAFI | RAS LAN | E | | | | | | | | | | | | | | |
| City: | BEAVER | | | | | | | State: | PA | | | Zip Cod | ie: 15 | 5009 | | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDAY PRIMARY | PRE | - | 2. X | 30 DA PRIMA | | POST- | 3. | | AMENDMENT REPORT? | | Yes | No | | / |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDAY ELECTION | PRE | - | 5. | 30 DA ELECT | | POST- | 6. | | TERMINA REPORT | | Yes | No | • | / |
| report type) | ANNUAL REPORT | 7. | Year 2001 | | | | FILING METHOD PAPER () CHECK ONE | | | | | | / | DISKE | TTE | | |
| Name of Office S | - Sought by Candida | ite: | | | | | | DATE 0 | F ELE | СТІО | N | District Number | Office Code | Par | ty Code | Coun | |
| | | | | | | | | МО | DAY | YE | AR | | | | | | |
| | | | | | | | | 11 | | 6 | 2001 | | (SEE IN | STRUCTI | ONS FOR C | ODES) | , |
| | Summary of Receipts and Expenditures from: MO DAY YEAR TO DAY YEAR MO DAY YEAR TO 4 30 | | | | | | | AR | FO | R OFFI | CE USE | ONLY | | | | | |
| expenditures | irom: | | 1 1 | | 1 | Т | 0 | 4 | : | 30 | 2001 | | | | | | |
| A. Amount Bro | ught Forward Fro | m Last R | eport | | | | \$ | | | 41,0 | 74.34 | | | | | | |
| B. Total Monetary Contributions And Receipts (From Schedule I) \$ 1,366.3 | | | | | | | | 366.85 | | | | | | | | | |
| C. Total Funds Available (Sum Of Lines A and B) \$ 42,441.19 | | | | | | | | | | | | | | | | | |
| D. Total Expenditures (From Schedule III) | | | | | | \$ | | | 1,3 | 50.00 | | | | | | | |
| E. Ending Cash Balance (Subtract Line D From Line C) | | | | | | | \$ | | | 41,0 | 91.19 | | | | | | |
| F. Value Of In- | Kind Contribution | s Receiv | ed (From Sc | hedu | le II | [) | \$ | | | | 0.00 | | | | | | |
| G. Unpaid Debt | s And Obligations | (From S | Schedule IV) | 1 | | | \$ | | | | 0.00 | | | 1 | | | |
| | | | | AFF | ΊDΑ | ٩VI | T SE | CTION | | | | | | | | | |
| PART I - If this is | s a Committee rep | ort, trea | surer sign h | ere. 1 | [f th | is is | a Can | ndidate re | eport, o | andio | date sig | ın here. | | | | | |
| I swear (or affirm) correct and comple | that this report, inc ete. | luding the | e attached scho | edules | file | d on | paper (| or by elect | ronic m | edium | , are to t | he best o | f my kno | wledge | and belie | ef , tru | ıe |
| Sworn to and subs | cribed before me thi day of | s | 20 | | | | | | | s | ignature | of Perso | n Submit | ting Rep | ort | | - |
| | Signati | ıre | | | | | - | | | | | Prin | ted Name | e | | | - |
| My Commission Ex | cpires | | | | | | _ | | | | | Ema | il | | | | _ |
| | мо | D. | AY | YR | | | | | Are | ea Cod | le | Daytim | e Teleph | none Nu | mber | | <u>_</u> |
| Part II- If this is | a report of a can | didate's | authorized (| Comn | nitte | ee, C | andida | ate shall | sign he | ere. | | | | | | | |
| I swear (or affirm) No 320) as amende | that to the best of ed. | my knowle | edge and belie | f this | polit | tical | commi | ittee has n | ot viola | ted an | y provis | ions of th | e act of J | une 3,1 | 937 (P.L | . 1333 | 3, |
| Sworn to and subsc | ribed before me this day of | | 20 | | | | | | | | S | ignature o | of Candid | ate | | | - |
| | | | | | | | - | | | | | Printe | d Name | | | | - |
| My Commission Exp | Signature | | | | | | - | | | | | Ema | il | | | | - |
| | | | | | | | - | | | | | | | _ | | | - |
| | МО | D | AY | YR | | | | | Area | Code | | Da | aytime T | 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: | To: | 4/30/2001 |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor | | | |
| TOTAL for the Reporting | g Period (1) | \$ | 1,366.85 |
| 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) | | \$ | 0.00 |
| All Other Contributions (Part D) | | \$ | 0.00 |
| TOTAL for the Reporting | 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 ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa | | \$ | 1,366.85 |

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

| | nis Part to itemize onl with an aggregate valu | | | | | | | |
|---------------------------|---|------------------|----|---------|--------|------|---------------|--------|
| Name of Filing Commit | ttee or Candidate | | Re | porting | Period | | | |
| | | From: | | | То | То: | | |
| | | 1 | | | DATE | | | AMOUNT |
| Full Name of Contributing | g Committee | | | МО | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Code (Plus 4 |) | | | | | |
| | • | • | | | • | | $\overline{}$ | |

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 or Cand | idate | | Rep | Reporting Period | | | | | | |
|----------------------------------|-------|------------------|----------|------------------|------|------|----|------|--|--|
| | | | From: To | | | |): | | | |
| | | | | | DATE | | АМ | OUNT | | |
| 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 Candi | me of Filing Committee or Candidate | | Reporting Period | | | | | |
|-----------------------------------|-------------------------------------|---------------|------------------|------|-----|------|----|------------|
| | | | From: | | | То: | | |
| | | | | DA | TE | | Α | MOUNT |
| Full Name of Contributing Commit | tee | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Cod | e (Plus 4) | | | | | |
| | | | | | | | | PAGE TOTAL |
| Enter Grand Total of Part C on S | Schedule I, Detail | ed Summary Pa | 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.)

| me of Filing Committee or Candidate | | | Reporting Period | | | | | | | |
|--|-----------------|----------|------------------|------------|--------|-------|------|-------|-----------|-----------------|
| | | | | Fror | n: | | To | o: | | |
| | | | | | D | ATE | | | AMOUNT | |
| Full Name of Contributor | | | | | мо | DAY | YEAR | | | |
| Address State Zin Code (Plus 4) | | | | | | | | \$ | | 0.00 |
| City | State | Zi | p Code (Plus | 4) | | | | | | |
| Employer Name | | • | | | Occupa | tion | • | • | | |
| Employer Mailing Address/Principal Pla Business | ce of | | City | | | State | | Zip C | ode (Plus | 4) |
| Enter Grand Total of Part C on Scho | edule I, Detail | led Sumr | mary Page, | Section | on 3. | | | \$ | PAGE TO | TAL 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 Co | andidate | | Report | ting Perio | bd | | | |
|--------------------------------|-----------------------|------------------|---------|------------|-----|------|----|----------|
| | | | From: | | | То: | | |
| | | | | D | ATE | | AN | 10UNT |
| Full Name | | | | МО | DAY | YEAR | | |
| Mailing Address | | | | | \$ | 0.00 | | |
| City | State | Zip Code (| Plus 4) | | | | | |
| Receipt Description | · | • | | | | | | |
| Enter Grand Total of Part E or | Schedule T Detaile | d Summary Page | Section | 4 | | | PA | GE TOTAL |
| Lines Grana Fotal of Fair 2 of | r benedule 1/ betanet | z Sammary r age, | Section | •• | | | \$ | 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: | To: | <u>4/30/2001</u> | | | | | | | |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P | 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 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 | me of Filing Committee or Candidate | | | | Re | porting l | Period | | | | |
|---|-------------------------------------|------|------------|---------|-----|------------|------------------------|-------|-----------|-----------------|--|
| | | | | | Fro | om: | | To: |): | | |
| | | | | | • | | DATE | | | AMOUNT | |
| Full Name of Contributor | | | | | | МО | DAY | YEAR | | | |
| Mailing Address | | | | | | | | \$ | 0.00 | | |
| City | State | | Zip Code(I | Plus 4) | | | | | | | |
| Employer of Contributor | | | | | | Occupation | | | | | |
| Employer Mailing Address/Principal Plac Business | ce of | City | | State | | Zip 4) | Code(Plus | Descr | iption | of Contribution | |
| Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3. | | | | | | | PAGE TOTAL 0.00 | | | | |

STATEMENT OF EXPENDITURES

| Name of Filing Commit | ttee or Candidate | | | | Reportir | ng Period | | | | | |
|---|-----------------------------|--------------|----|-------------------|--|-------------|----------|-----|-----------|--|--|
| LOCAL 0712 IBEW CO | PE | | | | From | | | То: | 4/30/2001 | | |
| | | | | | | DATE | | | AMOUNT | | |
| To Whom Paid BEAVER COUNTY DEM | OCRATIC COMMI | TTEE | | | мо | DAY | YEAR | | | | |
| Mailing Address P.C |). BOX 71 | | | | 4 | 6 | 2001 | \$ | 500.00 | | |
| City BEAVER | | State | | Zip Code (Plus 4) | Description of Expenditure | | | | | | |
| 22/11/2/11 | | PA | | 15009 | | KETS TO F | | | | | |
| To Whom Paid KNAFELC FOR JUDGE COMMITTEE | | | | | мо | DAY | YEAR | | | | |
| Mailing Address 200 | - Z000 RIDGE ROAD EXTENSION | | | | | 6 | 2001 | \$ | 300.00 | | |
| City AMBRIDGE | | State | | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | |
| PA 15003 | | | | | | ETS-FUND | | | | | |
| To Whom Paid FRIENDS OF ED FOSNA | AUGHT | | | | МО | DAY | YEAR | | | | |
| Mailing Address R.D | D. 1 BOX 358 | | | | 4 | 6 | 2001 | \$ | 100.00 | | |
| City ELLWOOD CITY | | State | | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | |
| | | PA | | 16117 | Description of Expenditure 1 TICKET FUNDRAISER-04/22/01 | | | | | | |
| To Whom Paid ARONSON 2001 | | | | | МО | DAY | YEAR | | | | |
| Mailing Address 470 | 00 PINE RIDGE R | OAD | | | 4 | 12 | 2001 | \$ | 250.00 | | |
| City HARRISBURG | | State | | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | |
| | | PA | | 17110 | | IGN CONT | | | | | |
| To Whom Paid BEAVER COUNTY DEMOCRATIC COMMITTEE | | | мо | DAY | YEAR | | | | | | |
| Mailing Address P.O. BOX 71 | | | 4 | 12 | 2001 | \$ | 100.00 | | | | |
| City BEAVER State Zip Code (Plus 4) | | | | Descrin | tion of Exp | enditura | <u> </u> | | | | |
| DEAVER | | l <u>.</u> . | | .= | Descrip | | | | | | |

15009

BANQUET PROGRAM AD

PΑ

| | | | | | | | PAGE 12 |
|---------------------------------------|---------------------|--------------------|-----------------------------------|----|----------------------------|------|----------------|
| To Whom Paid COMMITTEE TO R | RE-ELECT MARK DIVE | ССНІО | | мо | DAY | YEAR | |
| Mailing Address | 2428 BIRD DRIVE | | | 4 | 12 | 2001 | \$ 100.00 |
| City ERIE | | State PA | Zip Code (Plus 4) 16510 | | otion of Exp ETS 4/22 F | | |
| Enter Grand Tot | tal of Expenditures | on Page 1, R | eport Cover Page, Item D. | • | | | \$ 1,350.00 |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |