

Campaign Finance Report

(Note: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification Number:	7900460	Report Filed By:	CANDIDATE	1.	COMMITTEE	2.	X	LOBBYIST	3.
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Name of Filing Committee, Candidate or Lobbyist:
 LOCAL 0500 POLITICAL;ACTION FUND

Street Address:
 3460 N DELAWARE AVE 3460 N DELAWARE AVE

City: PHILADELPHIA	State: PA	Zip Code: 19134
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TYPE OF REPORT	6th Tuesday Pre-Primary	1.	2nd Friday Pre-Primary	2.	30 Day Post Primary	3.	Amendment Report?	YES	NO	X
	6th Tuesday Pre-Election	4.	2nd Friday Pre-Election	5.	30 Day Post Election	6.	Termination Report?	YES	NO	X
	Annual Report	7.	YEAR	2016						

Name of Office Sought by Candidate:	DATE OF ELECTION	District Number:	Office Code:	Party Code:	County Code:
	MO. DAY YEAR				

Summary of Receipts and Expenditures from:	MO. DAY YEAR	To	MO. DAY YEAR	FOR OFFICE USE ONLY
A. Amount Brought Forward From Last Report				
B. Total Monetary Contributions and Receipts (From Schedule I)				\$ 31,684.83
C. Total Funds Available (Sum of Lines A and B)				\$ 1,299.50
D. Total Expenditures (From Schedule III)				\$ 32,984.33
E. Ending Cash Balance (Subtract Line D from Line C)				\$ 638.76
F. Value of In-Kind Contributions Received (From Schedule II)				\$ 32,345.57
G. Unpaid Debts and Obligations (From Schedule IV)				\$ -
				\$ -

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules, on paper or computer diskette, are to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this

_____ day of _____ 20 _____

_____ Signature _____

My commission expires _____ MO. DAY YEAR

_____ Signature of Person Submitting Report _____

_____ Printed Name _____

_____ Area Code _____ Daytime Telephone Number _____

PART II - If this is a report of a Candidate's Authorized Committee, candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the Act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

_____ day of _____ 20 _____

_____ Signature _____

My commission expires _____ MO. DAY YEAR

_____ Signature of Candidate _____

_____ Printed Name _____

_____ Area Code _____ Daytime Telephone Number _____

SCHEDULE I
Contributions And Receipts

Detailed Summary Page

Name of Filing Committee or Candidate LOCAL 0500 POLITICAL;ACTION FUND	Reporting Period From _____ To _____
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ 1,299.50

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)	
Contributions Received from Political Committees (Part A)	\$ -
All Other Contributions (Part B)	\$ -
TOTAL for the Reporting Period (2)	\$ 0

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$ -
All Other Contributions (Part D)	\$ -
TOTAL for the Reporting Period (3)	\$ 0

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)	
TOTAL for the Reporting Period (4)	\$ -

TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.)	\$ 1,299.50
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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 LOCAL 0500 POLITICAL;ACTION FUND	Reporting Period From _____ To _____
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1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ -

2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)	
TOTAL for the Reporting Period (2)	\$ -

3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250 (FROM PART G)	
TOTAL for the Reporting Period (3)	\$ -

TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1, 2 and 3; also enter this amount on Page 1, Report Cover Page, Item F.)	\$ 0
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SCHEDULE III

Statement Of Expenditures

Name of Filing Committee or Candidate LOCAL 0500 POLITICAL;ACTION FUND			Reporting Period From _____ To _____			
To Whom Paid Spectrum Arena Limited Partnership			MO. 11	DAY 7	YEAR 2016	\$ 54.50
Mailing Address 3601 S Broad Street						
City Philadelphia	State PA	Zip Code (Plus 4) 19148-5291				
Description of Expenditure Refund of contributions submitted to wrong local						
To Whom Paid Teamsters Local Union 500			MO. 11	DAY 21	YEAR 2016	\$ 488.26
Mailing Address 3460 N Delaware Ave Suite 301						
City Philadelphia	State PA	Zip Code (Plus 4) 19134				
Description of Expenditure Wages for PAC work						
To Whom Paid Teamsters JC 53 PAC			MO. 11	DAY 21	YEAR 2016	\$ 96.00
Mailing Address 3460 N Delaware Ave Suite 310						
City Philadelphia	State PA	Zip Code (Plus 4) 19134				
Description of Expenditure PAC for November 2016						
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						Schedule III Total \$ 638.76

