

# Campaign Finance Report

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

<b>Filer Identification Number:</b>	9600254	<b>Report Filed By:</b>	CANDIDATE	1.	<b>COMMITTEE</b>	2.	X	<b>LOBBYIST</b>	3.
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Name of Filing Committee, Candidate or Lobbyist:  
 REINFORCED IRON WORKERS, RIGGERS & MACHINERY MOVERS LOCAL 405

Street Address:  
 2433 REED STREET

City: PHILADELPHIA	State: PA	Zip Code: 19148
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<b>TYPE OF REPORT</b>	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:	<b>DATE OF ELECTION</b>	District Number:	Office Code:	Party Code:	County Code:
	MO. DAY YEAR				

<b>Summary of Receipts and Expenditures from:</b>	MO. DAY YEAR	To	MO. DAY YEAR		<b>FOR OFFICE USE ONLY</b>
A. Amount Brought Forward From Last Report				\$ 42,718.91	
B. Total Monetary Contributions and Receipts (From Schedule I)				\$ 11,551.68	
C. Total Funds Available (Sum of Lines A and B)				\$ 54,270.59	
D. Total Expenditures (From Schedule III)				\$ 3,450.00	
E. Ending Cash Balance (Subtract Line D from Line C)				\$ 50,820.59	
F. Value of In-Kind Contributions Received (From Schedule II)				\$ -	
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	}	_____ Signature of Person Submitting Report
My commission expires _____ MO. DAY YEAR		_____ 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	}	_____ Signature of Candidate
My commission expires _____ MO. DAY YEAR		_____ Printed Name
		_____ Area Code                      Daytime Telephone Number

SCHEDULE I  
**Contributions And Receipts**

Detailed Summary Page

Name of Filing Committee or Candidate REINFORCED IRON WORKERS, RIGGERS & MACHINERY MOVERS	Reporting Period From _____ To _____
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<b>1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR</b>	
TOTAL for the Reporting Period (1)	\$ 11,551.31

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

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

<b>4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)</b>	
TOTAL for the Reporting Period (4)	\$ 0.37

<b>TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD</b> (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.)	\$ 11,551.68
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## 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 REINFORCED IRON WORKERS, RIGGERS & MACHINERY MOVERS L			Reporting Period From _____ To _____			
Full Name M&T BANK			MO. 10	DAY 31	YEAR 2016	\$ 0.37
Mailing Address 1002 NORTH 7TH STREET						
City HARRISBURG		State PA	Zip Code (Plus 4) 17102			
Receipt Description INTEREST						
Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.						<b>Part E Total</b> \$ 0.37

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 REINFORCED IRON WORKERS, RIGGERS & MACHINERY MOVERS L	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)	\$ -

<b>TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD</b> (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 REINFORCED IRON WORKERS, RIGGERS & MACHINERY MOVERS L			Reporting Period From _____ To _____			
To Whom Paid FISCHER DORWART, P.C.			MO.	DAY	YEAR	\$ 500.00
			11	17	2016	
Mailing Address 16 WEST VASSAR ROAD						
City AUDUBON		State NJ	Zip Code (Plus 4) 08106			
Description of Expenditure ACCOUNTANT FEE						
To Whom Paid NEILSON FOR THE NORTHEAST			MO.	DAY	YEAR	\$ 1,000.00
			10	27	2016	
Mailing Address PO BOX 6054						
City PHILADELPHIA		State PA	Zip Code (Plus 4) 19114			
Description of Expenditure CONTRIBUTION						
To Whom Paid FRIENDS OF ROB TEPLITZ			MO.	DAY	YEAR	\$ 250.00
			10	27	2016	
Mailing Address PO BOX 60007						
City HARRISBURG		State PA	Zip Code (Plus 4) 17106			
Description of Expenditure CONTRIBUTION						
To Whom Paid KENNEY 2015			MO.	DAY	YEAR	\$ 1,000.00
			10	27	2016	
Mailing Address P.O. BOX 60065						
City PHILADELPHIA		State PA	Zip Code (Plus 4) 19102			
Description of Expenditure CONTRIBUTION						
To Whom Paid KENNEY 2015			MO.	DAY	YEAR	\$ 200.00
			10	27	2016	
Mailing Address P.O. BOX 60065						
City PHILADELPHIA		State PA	Zip Code (Plus 4) 19102			
Description of Expenditure CONTRIBUTION						
To Whom Paid FRIENDS OF ROHAN HEPKINS			MO.	DAY	YEAR	\$ 500.00
			11	22	2016	
Mailing Address PO BOX 5372						
City YEADON		State PA	Zip Code (Plus 4) 19050			
Description of Expenditure CONTRIBUTION						

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

**Schedule III Total**

\$ 3,450.00

