

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:	2002299	Report Filed By:	CANDIDATE	1.	COMMITTEE	2.	X	LOBBYIST	3.
-------------------------------------	---------	-------------------------	-----------	----	------------------	----	---	-----------------	----

Name of Filing Committee, Candidate or Lobbyist:
Local 592 Cement Masons & Plasterers

Street Address:
2843 Snyder Avenue

City: Philadelphia	State: PA	Zip Code: 19145
-----------------------	--------------	--------------------

TYPE OF REPORT	6th Tuesday Pre-Primary	1.	2nd Friday Pre-Primary	2.	30 Day Post Primary	3.	X	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			OTH	51

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)				\$ 35,266.22
C. Total Funds Available (Sum of Lines A and B)				\$ 10,963.62
D. Total Expenditures (From Schedule III)				\$ 46,229.84
E. Ending Cash Balance (Subtract Line D from Line C)				\$ 8,189.60
F. Value of In-Kind Contributions Received (From Schedule II)				\$ 38,040.24
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 _____ Printed Name
My commission expires _____ MO. DAY YEAR		_____ 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 _____ Printed Name
My commission expires _____ MO. DAY YEAR		_____ Area Code Daytime Telephone Number

SCHEDULE I
Contributions And Receipts

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
Local 592 Cement Masons & Plasterers	From _____ To _____

1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ -

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)	\$ 7,175.95
All Other Contributions (Part D)	\$ 3,787.67
TOTAL for the Reporting Period (3)	\$ 10,963.62

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.)	\$ 10,963.62
--	--------------

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 over \$250.00 in the reporting period.

Name of Filing Committee or Candidate Local 592 Cement Masons & Plasterers			Reporting Period From _____ To _____			
Full Name of Contributing Committee Cement Masons Local 592 Benefit Fund			MO. 4	DAY 20	YEAR 2016	\$ 1,958.73
Mailing Address 2315 S 22nd Street						
City Philadelphia	State PA	Zip Code (Plus 4) 19145				
Full Name of Contributing Committee Cement Masons Local 592			MO. 4	DAY 27	YEAR 2016	\$ 361.47
Mailing Address 2843 Snyder Avenue						
City Philadelphia	State PA	Zip Code (Plus 4) 19145				
Full Name of Contributing Committee Cement Masons Local 592 Benefit Fund			MO. 4	DAY 27	YEAR 2016	\$ 4,855.75
Mailing Address 2315 S 22nd Street						
City Philadelphia	State PA	Zip Code (Plus 4) 19145				
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.						Part C Total \$ 7,175.95

Part D

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 Local 592 Cement Masons & Plasterers		Reporting Period From _____ To _____			
Full Name of Contributor Plasterers Local 8 Benefit Fund		MO. 4	DAY 29	YEAR 2016	\$ 3,787.67
Mailing Address 20 Brace Road suite 114 C/O Benefit Processing, Inc					
City Cherry Hill	State NJ	Zip Code (Plus 4) 08034			
Employer Name		Occupation			
Employer Mailing Address/Principal Place of Business					
Enter Grand Total of Part D on Schedule I, Detailed Summary Page, Section 3.				Part D Total \$ 3,787.67	

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 592 Cement Masons & Plasterers	Reporting Period From _____ To _____
---	---

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
---	------

SCHEDULE III

Statement Of Expenditures

Name of Filing Committee or Candidate Local 592 Cement Masons & Plasterers			Reporting Period From _____ To _____			
To Whom Paid Zappala for PA			MO. 4	DAY 12	YEAR 2016	\$ 1,500.00
Mailing Address P.O. Box 183						
City Bethel Park	State PA	Zip Code (Plus 4) 15102				
Description of Expenditure political contribution						
To Whom Paid Donald Norcross for Congress			MO. 4	DAY 14	YEAR 2016	\$ 5,000.00
Mailing Address 499 S capitol Street, SW Suite 422						
City Washington	State DC	Zip Code (Plus 4) 20003				
Description of Expenditure political contribution						
To Whom Paid Friends of the 65th Ward			MO. 4	DAY 26	YEAR 2016	\$ 500.00
Mailing Address 4521 Aubrey Avenue						
City Philadelphia	State PA	Zip Code (Plus 4) 19114				
Description of Expenditure political contribution						
To Whom Paid Bobby 11			MO. 4	DAY 26	YEAR 2016	\$ 500.00
Mailing Address C/O Pond Lehocky Stern Giordano 2005 Market Street, 18th Floor						
City Philadelphia	State PA	Zip Code (Plus 4) 19103				
Description of Expenditure political contribution						
To Whom Paid Wayne Deangelo for Assembly			MO. 4	DAY 26	YEAR 2016	\$ 300.00
Mailing Address 105 Limewood Drive						
City Hamilton	State NJ	Zip Code (Plus 4) 08690				
Description of Expenditure political contribution						
To Whom Paid Ken Woods fro County Council			MO. 4	DAY 26	YEAR 2016	\$ 200.00
Mailing Address 1727 Robbins Place						
City Wilmington	State DE	Zip Code (Plus 4) 19805				
Description of Expenditure political contribution						

SCHEDULE III

Statement Of Expenditures

Name of Filing Committee or Candidate Local 592 Cement Masons & Plasterers		Reporting Period From _____ To _____			
To Whom Paid Benefit Processing		MO. 4	DAY 29	YEAR 2016	\$ 189.60
Mailing Address 20 Brace Road, Suite 114					
City Cherry Hill	State NJ	Zip Code (Plus 4) 08034			
Description of Expenditure administration fees					

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

Schedule III Total
\$ 8,189.60

