	TL		

Commonwealth of Pennsylvania - Campaign Finance Report

		(Note: 1	his rep	ort mus	it be clear an	d legible.	It shou	uld be typed	<u>l) </u>			
Filer Identificat Number	tion		Repo	rt Filed B k X)	By Candid	ate		Committee		X	Lobbyis	t
Name of Filing Lobbyist	Committee, Ca	indidate or	94	for Contr	oller			1			<u> </u>	<u> </u>
Street Address			4331 N	Neptune	Drive						-	-
City	Erie	<u> Profite Service (Peur</u>		•	State	PA		Zip Code	16506		-	
Type of Report	(Place x under	report type)	•									
1- 6 th Tuesday Pre-Primary	2- 2 nd Friday Pre-Primary	3- 30 Day Pos Primary	t 4-6 th 7 Pre-El		5- 2 nd Friday Pre- Election		the street of the co	7- Annual	Special 2 Pre-Elect	化油油 化铁矿电池 经直接的	Special Post-Ele	righter a contract of the contract of
	X						<u> </u>					
Date Of Electio (MM/DD/YYYY		05/16/2023	Year		2023	Amenda Report	nent		Terminat Report	ion		
Summary of Re Expenditures	ceipts and	From Date		To Date				For	Office Use	Only		
		01/01/2023	3	05	/01/2023							
A. Amount Bro	ught Forward F	rom Last Repo	t \$	2	1738.08				41 			
B. Total Monet (From Schedule	the way to the state of the sta	ons and Receipt		6	5580.00					•	•	
C. Total Funds A	and B)		\$	2	8318.08							
D. Total Expend (From Schedule	: (11)		\$	1	1497.62					70 2		
E. Ending Cash (Subtract Line I			\$	2	6820.46				ä	2		
F. Value of In-K (From Schedule	医多头皮膜炎 医二氏结肠 医二氏	ons Received	\$		0.00				Z P			•
G. Unpaid Debt (From Schedule		ons	\$		0.00				Ş			
		····			Affidavit S	7						
Part 1- If this is a	Committee report. That this report.	rt, treasurer sign I including the att	nere. If th ached sch	is is a Can ledules or	ididate report, a	andidate sig	n here. knowled	ge and belief t	rue. correct a	and comple	ete.	
I swear (or affirm) Sworn to and sub day of	Signature	20 23 20 23 20 23 20 23 20 23 20 24 20 20 24 20 26 20	olen STF). The Association of the Associ	티오호파트	ue Ellen P	gnature asquale	Printed Nam				
Part II- If this is a	report of a Candi	dato's Authorizo	Commit	0	9 2 2	2070						
I swear (or affirm amended.							lated an	provisions of	the Act of Ju	ne 3, 1937	(P.L. 1333,	NO.320) as
Sworn to and sub day of Over	May Signature	20_02 20_02	<u>l</u> di	Member, Pennsylvania Association	insylvania - iz, Notary F county cpires April imber 1288	Cyle Foust B14 Area Code	Sign	Printed Name 218-		one Numbe		
:				of Notari	Notary S ublic 3, 2027 912						· · · · · · · · · · · · · · · · · · ·	

SCHEDULE I

Contributions and Receipts

Detailed Summary Page

	····	_	
Filer Identification Number			
	Foust for Controller		
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Total for the reporting period	(1)	\$	130.00
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)			
Contributions Received from Political Committees (Part A)		\$	250.00
All Other Contributions (Part B)		\$	700.00
Total for the reporting period	(2)	\$	950.00
3. Contributions Over \$250.00 (From Part C and Part D)	nate (di 1980)		
Contributions Received from Political Committees (Part C)		\$	3000.00
All Other Contributions (Part D)		\$	2500.00
Total for the reporting period	(3)	\$	5500.00
4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)		
Total for the reporting period	(4)	\$	0.00
		1	N Control of the Cont

PART A

Contributions Received From Political Committees

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from Political Committees with an aggregate value from \$50.01 TO \$250.00 in the reporting period.

			-			_	Amount
ull Name	and the second of the second of the second	ibuting			Date [MM/DD/YYYY]	\$	
ommitte	and the second of the second of the second	LPAC Erie	э 		04/07/2023		250.00
House #	455	Street Address			Date [MM/DD/YYYY]	\$	1
	120	w.	est 10th Street				l
City _		ALL ALL ALL ALL ALL ALL ALL ALL	State	Zip Code	Date [MM/DD/YYYY]	\$	†
Eri	ne 		PA	16501			
Full Name	to the other time of	ibuting			Date [MM/DD/YYYY]	\$	
Committee	to the other time of					A	1
House #		Street Address			Date [MM/DD/YYYY]	\$	
	1					1:1	l
City.		Francisco (Control of Control of	(Choto :	7in Code	Date [MM/DD/YYYY]	\$	
City			State	Zip Code	Pare [INIM/DD/1711]	- *	1
Full Name	of Care	huting	800 BZF.	parties and the	Date [MM/DD/YYYY]	\$	
Full Name Committee		1000 \$11.50 (1)			Sare figuration 1111		1
							<u> </u>
House #		Street Address		_	Date [MM/DD/YYYY]	\$	
							<u> </u>
City			State	Zip Code	Date [MM/DD/YYYY]	\$	
Full Name	Approximately and the second	ibuting			Date [MM/DD/YYYY]	\$	
Committee	:e		-				<u> </u>
House #		Street Address	. 		Date [MM/DD/YYYY]	\$	
	1						1_
City	•	<u>, 190 de e 2020 (l.</u>	State	Zip Code	Date [MM/DD/YYYY]	\$	
57,411 5,745						7	1
Full Name	of Contri	buting	1 11	produce to the second	Date [MM/DD/YYYY]	\$	
Committee						7	1
House #					Date [MM/DD/YYYY]	\$	
H Score	[Street Address			Pere Janahan 1111	3	Ţ
City			State	Zip Code	Date [MM/DD/YYYY]	\$	1
	-		The state of	The state of the s			
	of Contri	ibuting			Date [MM/DD/YYYY]	\$	l
ommittee							<u> </u>
louse #		Street Address		·· ··	Date [MM/DD/YYYY]	 \$	[
	Į.						Ţ
ity		<u> </u>	State	Zip Code	Date [MM/DD/YYYY]	\$	
							Ţ
. T. A. S. A. M			1 2 2	F 2740 20 20 3 T	i i	4 / 4	

PART B

All Other Contributions

\$50.01 TO \$250

Use this Part to itemize all other contributions with an aggregate value from \$50.01 TO \$250 in the reporting period.

(Exclude contributions from political committees reported in Part A.)

Foust for Contr		

Full Name of Contribut			Date [MM/DD/YYYY]	4 %
rus name of Contribut	Lyman Cohen		03/21/2023	5 100.00
House #	Street Address			\$.
4855	W. Ridge Road Apt 1	6		
	State	Zip Code	Date [MM/DD/YYYY]	
City Erie	PA	16506-1213		
Full Name of Contribut	OÎ.		Date [MM/DD/YYYY]	•
establica de la composición dela composición de la composición de la composición de la composición dela composición dela composición dela composición de la composición dela composición	BJ Mackrell		03/21/2023	100.00
House #	Street Address		Date [MM/DD/YYYY]	
633	Montmarc Blvd			
City	State	Zip Code	Date [MM/DD/YYYY]	
Erie	PA PA	16504		
Full Name of Contribut	OF .		Date [MM/DD/YYYY]	
and the second s	Alice Kurpiewski		03/21/2023	100.00
House#	Street Address		Date [MM/DD/YYYY]	X
3019	Hazel Street			
City	State	Zip Code	Date [MM/DD/YYYY]	\$
Erie	PA	16508		
Full Name of Contribut			Date [MM/DD/YYYY]	
	Luigi and Sue Eilen Pasquale		03/21/2023	100.00
House #	Street Address		Date [MM/DD/YYYY]	\$
4331	Neptune Drive			
City	State	Zip Code	Date [MM/DD/YYYY]	\$
Erie	PA PA	16506		
Full Name of Contribut	or		Date [MM/DD/YYYY]	
	David and Fran Skellie		03/25/2023	200.00
House #	Street Address		Date [MM/DD/YYYY]	S
4211	Colonial Avenue			
City	State	Zip Code	Date [MM/DD/YYYY]	
Erie	PA	16506		
Full Name of Contribut	or .		Date [MM/DD/YYYY]	
	Raymond and Paula Reade	04/11/2023	100.00	
House #	Street Address		Date [MM/DD/YYYY]	\$
1132	Chestnut Hill Drive			
City	State	Zip Code	Date [MM/DD/YYYY]	\$
Erie	PA	16509	10 10 10 10 10 10 10 10 10 10 10 10 10 1	
	[2755]	27、表示的主义的特殊的意		200

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.

Filer identification Number:	Foust for Controller			
		 		_

Full Name of			Date [MM/DD/YYYY]	\$	
爱似她的影光,不是一个人的意思的感觉。	JPAT Political Action Together	01/30/2023	C 323	500.00	
「新聞」の記念の記念を表現し、	: Address	Date [MM/DD/YYYY]	\$		
7234	Parkway Drive				
City	State	Zip Code	Date [MM/DD/YYYY]	Ś	
Hanover	MD	21076			
Full Name of	10Ass 25000As 3	The first of the state of the s	Date [MM/DD/YYYY]	\$	
Contributing Committee C	Freater PA Carpenters PEC		04/11/2023	1	00.000
House # Stree	t Address		Date [MM/DD/YYYY]	Š	
1803	Spring Street				
City	State	Zip Code	Date [MM/DD/YYYY]	\$	· · · · · · · · · · · · · · · · · · ·
Philadelphia	PA	19130			
Full Name of	[本總統裝養金]	107-128-74E-08-20-8-23	Date [MM/DD/YYYY]	\$	
学生的情况 电影 电影 经产品的 医二氏管 医二氏管 经产品的	ocal 66 PAC Club		04/17/2023	50000	1000.00
House# Stree	t Address		Date [MM/DD/YYYY]	\$	
111	Zeta Drive				
City	State	Zip Code	Date [MM/DD/YYYY]	\$	
Pittsburgh	PA	15238-2811	Date Ilatal 20/114-11		
Full Name of		□ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	Date [MM/DD/YYYY]	\$	
	heet Metal Workers Local Unio	n 12	04/28/2023		500.00
House # Street	: Address	<u> </u>	Date [MM/DD/YYYY]	\$	
1200	Gulf Lab Road				
City	State	Zip Code	Date [MM/DD/YYYY]	\$	
Pittsburgh	PA	15238			
Full Name of			Date [MM/DD/YYYY]	\$	
Contributing Committee					
House # Street	Address	, · · · · · · · · · · · · · · · · · · ·	Date [MM/DD/YYYY]	\$	
City	State	Zip Code	Date [MM/DD/YYYY]	\$	
	AN. TO SEE		make a surface of the Control of the	15.2	
Full Name of	For 17-800 (A. 1977)	n - 10 (04) +00/20 1 (0/2 to 0)	Date [MM/DD/YYYY]	\$	
Contributing Committee					
House # Stree	t Address	- AND - PARK - Market - In	Date [MM/DD/YYYY]	\$	

City	State	Zip Code	Date [MM/DD/YYYY]	S	
	1907 N. 1908	10岁的原数医现代表现的数		22000	
	12 00 A A				

PART D

All Other Contributions

Over \$250.00

Use this Part to itemize all other contributions with an aggregate value over \$250.00 in the reporting period. (Exclude contributions from political committees reported in Part C)

Filer Identification Number:	Foust for Con	troller			
					_
Full Name of Contributor				Date [MM/DD/YYYY]	\$
	Mark Wright			04/11/2023	1000.00
House # St	reet Address			Date [MM/DD/YYYY]	\$
9010	R	oute 98			
City	400,000 pagy 10000	State	Zip Code	Date [MM/DD/YYYY]	\$
Girard		PA	16417-8308		
Employer Name		PER SERVE SERVE	The thousand an other el	Occupation	Princepose
Employer Mailing Address Principal Place of Busines					
Full Name of Contributor	THE PARTY OF THE PARTY AND ADDRESS OF THE PARTY OF THE PA		.'' "-	Date [MM/DD/YYYY]	\$
	Roger Richar	rds		04/28/2023	1000.00
900960890089600 X 69	reet Address		., , , , , , , , , , , , , , , , , , ,	Date [MM/DD/YYYY]	\$
230	W	est 6th Street			
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Erie		PA	16507-1319		
Employer Name			1. 6. 14. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	Occupation	
Employer Mailing Address Principal Place of Busines					
Full Name of Contributor	2, 112,000 pt 255, 1,000 pt 00.			Date [MM/DD/YYYY]	\$
	James Walcz	zak		04/28/2023	500.00
D00909040004	reet Address			Date [MM/DD/YYYY]	S
11804	ol	d Lake Road			
City	380 5 3 6 4 5 5 6 5 5 1	State	Zip Code	Date [MM/DD/YYYY]	Single
North East		PA	16428-3342		
Employer Name			Processor approximation of the state of the	Occupation	of a second
Employer Mailing Address Principal Place of Busines					
Full Name of Contributor				Date [MM/DD/YYYY]	
	105 105 105			Service 32 (80.2)	
House # St	reet Address			Date [MM/DD/YYYY]	S
City.		State	Zip Code	Date [MM/DD/YYYY]	8
Employer Name	tistie rekonster son			Occupation	20 100 1

Employer Mailing Address / Principal Place of Business

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.

Filer Identification Numi	ber:	Foust for Controller
:		
Full Name		
House#	Stre	et Address
City		State Zip Date [MM/DD/YYYY] \$. Code
Receipt Description		
Full Name		
House #	Stre	et Address
City		State Zip Date [MM/DD/YYYY] \$
Receipt Description		
Full Name	ngwagaya Tabbakka	
House #	Stre	et Address
City		State Zip Date [MM/DD/YYYY] \$
Receipt Description		
Full Name		
House #	Stre	et Address
City		State Zip. Date [MM/DD/YYYY] \$ Code
Receipt Description		
Full Name	# - 77 - 17 14 15 15 15 15 15 15 15	
AT PER AND SEC.	Stre	et Address
City	i i i i i i i i i i i i i i i i i i i	State Zip Date [MM/DD/YYYY] \$ Code
Receipt Description		[
Full Name	7.6	
House #	Stree	et Address
City	404	State Zip Date [MM/DD/YYYY] \$ Code
Receipt Description		

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

Filer Identification Number:	Foust for Controller		
1. UNITEMIZED IN-KIND	D CONTRIBUTIONS RECEIVED-VALUE OF SE	50.00	OB LESS DER CONTRIBUTOR
TOTAL for the reporting period		Š	0.00
2. IN-KIND CONTRIBUTI	IONS RECEIVED-VALUE OF \$50.01 TO \$250).00 (F	ROM PART F)
TOTAL for the reporting period	d (2)	\$	0.00
3: IN-KIND CONTRIBUTI	ION RECEIVED-VALUE OVER \$250.00 (FRO	M PAI	₹T.G)
TOTAL for the reporting period	d (3)	\$	0.00
	ITRIBUTIONS DURING THIS REPORTING nt totals from boxes 1, 2, and 3; also enter Item F)	\$	0.00

SCHEDULE II PART F

In-Kind Contributions Received

VALUE OF \$50.01 TO \$250

	<u> </u>	
Filer Identification Number:	1	
- Filer inentification Wilmoer	1	
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	1	
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Full Name of Contribu	itor			Date [MM/DD/YYYY]	\$.
House #				Date [MM/DD/YYYY]	\$
riouse #	Street Address			soate (MM/OD/M111)	
City	Later to the second	State	Zip Code	Date [MM/DD/YYYY]	\$
(Control of the Control of the Contr					
Description of Contrib	oution				[xii)%()
	grafite of a side of				
Full Name of Contribu	itor			Date [MM/DD/YYYY]	\$
Market Market Barbara Barbara B					
House #	Street Address			Date [MM/DD/YYYY]	.
City		State	Zip Code	Date [MM/DD/YYYY]	5
				Promotive and the production of the control of the	#4260 6 200 1 200
A Paras				1	
Description of Contrib	ution				
Full Name of Contribu	itor			Date [MM/DD/YYYY]	\$
				<u> </u>	
House #	Street Address			Date [MM/DD/YYYY]	\$
City	The second secon	State	Zip Code	Date [MM/DD/YYYY]	
		40000			
	1982 - • 在外域的现在分词,以为1000-1000。				
Description of Contrib	JUTION				
Full Name of Contribu	itor			Date [MM/DD/YYYY]	
	En Se we de la Contrare del				
House #	Street Address			Date [MM/DD/YYYY]	
City	PARAGONIA CANADOS PROPERTOS	State	Zip Code	Date [MM/DD/YYYY]	\$
				26 (4.37.74.) (4.57.755) (6.37.65) (4.66.1 (4.66.755)) (4.67.755)	
Description of Contrib	ution				
Take the second of the second					
Full Name of Contribu	itor			Date [MM/DD/YYYY]	\$
					\$25 G
Marica #	2		- 141	Date [MM/DD/YYYY]	S
House #	Street Address			Date (MAN/OD/1611)	
City	**************************************	State	Zip Code	Date [MM/DD/YYYY]	\$
				1	
Description of Contrib	ution	8000886683 .	The state of the s	<u> </u>	[Pa/6/8]

SCHEDULE II Part G

In-Kind Contributions Received

VALUE OVER \$250

Filer Identification Number:	
riiei identification raunbei.	
Foust for Controller	
Additional administration of the Conference of t	
GEOGRAPHIC STANCE SECTION AND SECTION AND AND ASSESSED THE SECTION OF THE SECTION	

Full Name of Con	tributor		Date [MM/DD/YYYY] \$
	\$161 × 3.82		
House #	Street Address		Date [MM/DD/YYYY] \$
State of the			
2000243224		Francis Constitution The Constitution of the	
City		State Zip Code	Date [MM/DD/YYYY] \$
Employer Name	TAST CAST CAST AND DE VICE DE CAST DE C		Occupation (
i improyer warne	teritoria (nacional)		Occupation
Employer Mailing	Address / Principal		Description
Place of Business			of
			Contribution
Full Name of Con	tributor 1	(777.)	Date [MM/DD/YYYY] \$
House#	Street Address		Date [MM/DD/YYYY] \$
	Commission (Allert Art)		
City	To a get the spect of the getting of the	State Zip Code	Date [MM/DD/YYYY] \$
Employer Name			Occupation
	; Address / Principal		Description
Place of Business		er (2) 2012 2013	of
Maring to the Paris of the Control o	and the second s		Contribution
Full Name of Con	tributor		Date [MM/DD/YYYY] \$
	310 J. (10 J		
18.48 (\$25.5 F.) \$2.5 F.			
House #	Street Address		Date [MM/DD/YYYY] \$
Street Corp.			
Circles	FAIR SOLDER	The second secon	Secretary Inches
City		State Zip Code	Date [MM/DD/YYYY] \$
Employer Name			Occupation
Lingibyer Ivanic		N 63 N 64 N 64	Occupation:
Employer Mailing	Address / Principal		Description
Place of Business			of
	Park District	(1) 1 (1) 1	Contribution
Full Name of Con	tributor		Date [MM/DD/YYYY] \$
			13.23 25.55
House #	Street Address		Date [MM/DD/YYYY] \$
第3名は2条付割			
			1 1 2 5 5 1
, A. 144			
City		State Zip Code	Date [MM/DD/YYYY] \$
City		State Zip Code	Date [MM/DD/YYYY] \$
		State Zip Code	y reg
City Employer Name		State Zip Code	Date [MM/DD/YYYY] \$ Occupation
Employer Name	Address / Principal	State Zip Code	Occupation
Employer Name Employer Mailing	Address / Principal	State Zip Code	Occupation Description
Employer Name		State Zip Code	Occupation

Statement of Expenditures

E Cilau Idanaidianaian Alixadaan	1			
Filer Identification Number:	1			
	1			
reconstruction in the control of the	Carrat fan Camtuallan			
District (14 Table 2014)	l Foust for Controller			
	,, odor 101 00110101101			
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· 医基础性原因的现在分词,如果有关是自己的特别的变性。但是由于自己的对象。自己的自己的。	l .			
Control of the contro		 		

To Whom Paid	Harborcreek Town	shin	·····	Date [MM/DD/YYYY]	\$ 100.00	
The second		.		02/15/2023		
House # 5601	Street Address B	uffalo Road		Description of Expendi	ture	
City Erie		State PA	Zip Code 16421	deposit for picnic rental		
To Whom Paid	Harborcreek Towns	ship	Process and Section Deposit	Date [MM/DD/YYYY]	\$ 425.00	
				02/15/2023		
House # 5601	Street Address B	uffalo Road	• • •	Description of Expendit	ture	
City Erie		State PA	Zip Code 16421	rental for picnic		
To Whom Paid		- 1 day and 22 2000	1.35mm (A.m., A. Corn.)	Date [MM/DD/YYYY]	\$	
	Kyle Foust			03/16/2023	274.12	
House # 4376	Street Address D	epot Road		Description of Expendit	ure	
City Erie		State PA	Zip Code 16510	reimburse filing fees, fish	dinners, parade candy	
To Whom Paid			14 - 15 - 15 - 15 - 15 - 15 - 15 - 15 -	Date [MM/DD/YYYY]	S.	
	Kyle Foust			03/26/2023	150.00	
House # 4376	Street Address D	epot Road		Description of Expendit	ure	
City Erie	ty Erie State PA Zip 16510			reimburse Act Blue Erie Co Democratic Party		
To Whom Paid	United Way of Erie	County		Date [MM/DD/YYYY] 03/27/2023	\$ 40.00	
House # 650	Street Address	ast Avenue Suite 20	0	Description of Expendit	ure	
City Erie		State PA	Zip Code 16503	5/11/2023 annual luncheo	n meeting	
To Whom Paid		2 8 4 4 8 5 6		Date [MM/DD/YYYY]	\$	
	Kyle Foust			04/11/2023	220.00	
House # 4376	Street Address D	epot Road		Description of Expenditure		
City Erie	Land Control of the Control	State PA	Zip Code 16510	reimburse tickets for vario	us dinners	
To Whom Paid	F-1- 0 (10 1			Date [MM/DD/YYYY]	\$	
B C	Erie Crawtord Cent	ral Labor Council AF	L-CIO	04/17/2023	50.00	
House # 32	Street Address V	Vest 8th Street Suite	502	Description of Expendit	ure	
City Erie	Erie State PA Zip Code 16501			ticket for 5/11/23 Awards I	Banquet	
To Whom Paid	Biroscak Printing Co	ompany Incorporated	1	Date [MM/DD/YYYY]	\$	
	Diroscak Finding C(ompany meorporated	J	04/28/2023	238.50	
House # 1919	Street Address	each Street		Description of Expenditure		
City Erie		State PA	Zip Code 16502	handouts	and the second of the second seco	

SCHEDULE IV

Statement of Unpaid Debts

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period.

Filer Identification Number:	oust for Controller		

Name of Creditor			Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]	\$
City	State	Zip Code	
Description of Debt			
Name of Creditor	7.7		Outstanding Balance of Debt
House #	Street Address	DATE DEBT-INCURRED [MM/DD/YYYY]	\$
City	State	Zip Code	
Description of Debt			
Name of Creditor			Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED [IMM/DD/YYYY]	\$
City	State	Zip Code	
Description of Debt		- WI 1830/C/C-0/C/RC-0/T	F.2
Name of Creditor			Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]	\$
		20, 12 m 20 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
City	State	Zip Code	(1996) 3 April 1997)
Description of Debt			
Name of Creditor			Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]	
City	State	Zip Code	
Description of Debt			Jan 19 19 19 19 19 19 19 19 19 19 19 19 19
Name of Creditor			Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]	
City	State	Zip Code	
Description of Debt	78 (***)	[10] [10 0.00 (10.0 4 (00.00)]	[156.3]
	2021 - Table - Table		