Commonwealth of Pennsylvania - Campaign Finance Report (Note: This report must be clear and legible. It should be typed)

| Filer Identification Number | | 30014 | 1.00 | ort Filed irk X) | By | Candida | ite | Committee | | X | Lobbyis | |
|--|----------------------------------|--|------------------------|---------------------------|----------------------------|--------------------------|---|-----------------------------|--------------------------------------|----------------------|----------------------|--|
| Name of Filing Comn Lobbyist | nittee, Cai | ndidate or | Friends of Tyler Titus | | | | | | | | | |
| Street Address | | | 840 I | East 40th | 1 | | | - | | | | |
| City | Еле | | | | \$ 9 | State | PA | Zip Code | 16504 | | | |
| Type of Report (Place | | | | | | | | | | | | |
| 1-6 th Tuesday 2-2 Pre-Primary Pre- | nd Friday Primary | 3- 30 Day Pos Primary | | Tuesday lection | | Friday lection | 6-30 Day Post Election | 7- Annual | Special 2 ⁿ Pre-Electi | | Special Post-Ele | 高级自身中华国际各种中华国 |
| | | | | | | | X | | | | | |
| Date Of Election (MM/DD/YYYY) | a, for the | 11/7/23 | Year | | | | Amendment Report | | Terminati Report | on . | | |
| Summary of Receipts Expenditures | and | From Date | 97/35 304/30 | To Da | te | 6 (A) 18 (A) 1944 | a geografia | For | Office Use C | Only | | |
| A. Amount Brought F | orward Fi | 05 02 202 | | 01 | 05/2 | 0,13 | | | | todrībik matrijas | i awan an Kabupat | en e |
| B. Total Monetary Co | | | | 111. | 507. | 12 | | | · | 50 | 202 | |
| (From Schedule I) | | is and receipt | 44 /34 m 14 / 12 m | 1. | 503 | .70 | | | | | 2023 JUN | |
| C. Total Funds Availal (Sum of Lines A and E | 严语表演 医抗乳毒素 | | \$ | 13. | | .82 | | | | m | | |
| D. Total Expenditures (From Schedule III) | ar mark, ga | | \$ | 12 | 78 H | 44 | 1. 1. 1. | .* | | 53 | 12 | |
| E. Ending Cash Baland (Subtract Line D from | OF THE PERSON WITH | H 26 L 1955 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | \$ | | . 38 38 م | <u>'''</u> | r a la l | | ٠. | R | = | |
| F. Value of In-Kind Co (From Schedule II) | | ns Received | \$ | | 0.58 | 5 | | | | STRATION | 8: 28 | |
| G. Unpaid Debts and (From Schedule IV) | Obligation | n s | \$ | 1.1 | | | | | | | | |
| (From Schedule IV) | Park remain 1500 | or to the stage of | rista. | (Q L | 19.7 | idavit Sed | tion | | | | | · |
| Part 1- If this is a Commi | ttee report | , treasurer sign h | ere. If t | his is a Ca | ndidate r | eport, ca | ndidate sign here. | | | | | |
| I swear (or affirm) that the Sworn to and subscribed | | | ched so | hedules c | on paper, | is to the | best of my knowled | dge and belief tr | ue, correct ar | nd complet | e. | Come |
| 12 day of Jun | JE_ | _20 <i>_2</i> 3 | | 1 | | | Back | ~ - | | | | Commonwea PAUL J My Commiss Comm |
| Saule J. | Mu | mella | W | }- | | | VSignature Shrac | of Person Subm (dha. Pra | itting report | | | Commonwealth of Pe PACIL J MONELL Erie My Commission Expl Commission N |
| Signat | | 10 4. | **/ | . 1 | | | | Printed Name | | | | ninsylva A II - No County Tes Dec |
| My Commission expires_ | MO. | /8 20 DAY YR. | 24 | | | A | rea Code | | <u> </u> | | r | ntary Public ember 18, 1377505 |
| Part II- If this is a report of I swear (or affirm) that to amended. | of a Candid the best o | ate's Authorized of my knowledge | Commi and bel | ttee, cand lef this po | didate sha olitical cor | all sign he nmittee l | ere. has not violated an | y provisions of t | he Act of June | e 3, 1937 (F | P.L. 1333, | 10.520) as |
| Sworn to and subscribed day of Jw | before me れし | this 20 23 | _ | 1 | | | Tyler W | A nature of Candid | ista | | | Commonwegalth-of Fe PAUL J MONESA Erie My Commission Expir Commission N |
| Journey. O | wen | ellau | <u>-</u> | | | _ | Tyler | Printed Name | | | _ | the all the control of the country o |
| My Commission expires | 12 | <i>18 202</i> 4 day yr. | <u>4</u> | , 1 | | <u>.</u> { | 314 rea Code | 431 | – 45 <u>f</u> ime Telephon | 5.3 e Number | | isylvania - Notary II - Notary Public ounty is December 18, 2 mber 1377505 |
| | | | | | | | | | | | | <u> </u> |

SCHEDULE 1

Contributions and Receipts

Detailed Summary Page

| | | | |
|-----------------------------|-----------|---|------|
| Filer Identification Number | | | + |
| | 30 37 AAW | • | |
| | 20250014 | | |
| | | | |

| | 11 THE R. P. LEWIS CO. | Sind of the | |
|--|------------------------|---------------------------|----------|
| 1.Unitemized Contributions and Receipts-\$50.00 or Less per Contributor | | | |
| Total for the reporting period | (1) | \$ | 450.70 |
| 2. Contributions of \$50.01 to \$250.00 (From Part A and Part B) | | -1778 Syrisi Seresi | |
| Contributions Received from Political Committees (Part A) | • | \$ | 250,00 |
| All Other Contributions (Part B) | - | \$ | 800.00 |
| Total for the reporting period | (2) | \$ | 1.050.00 |
| 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) | \$ | |
| 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, Re Cover Page, Item B) | eport | \$ | 1,503.70 |

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.

Filer Identification Number

| | //www.wise.com/ 20 | 013001 | 4 | Marine Service Service | | |
|--|---|--------------------------------|---|--|---------------------------|--|
| : . | | | | and the second s | | Amount |
| Full Name Committe | of Contributing | ^ | | Date [MM/DD/YYYY] | \$ | |
| - Juniani (l | LG- | BTQ V | lictory Fund PAC | 05/11/2023 | A Vie | 250,00 |
| House # | Street Address | | | Date [MM/DD/YYYY] | \$ | |
| | | | | | | |
| City | INT. I | State | Zip Code | Date [MM/DD/YYYY] | \$ | |
| maga araba | Washington . | DC | 20005 | | | |
| Full Name Committe | of Contributing | | | Date [MM/DD/YYYY] | \$ | |
| Lummitte | | | | | | |
| House # | Street Address | | | Date [MM/DD/YYYY] | \$ | M-16-17-11-11-11-11-11-11-11-11-11-11-11-11- |
| | | | | | | |
| City | ■ 10.0% (20.0%) (20.0%) (20.0%) (20.0%) | State | Zip Code | Date [MM/DD/YYYY] | \$ | |
| Signatur de de 400 E | | 1 2 m 2 + 82 1 2 7 m 2 + 82 | And the great and the second | | | 4 - 11 - 1, 19 - 1 - 1 |
| the state of the s | of Contributing | · | | Date [MM/DD/YYYY] | \$ | |
| Committe | | | | | | |
| House# | Street Address | | | .Date [MM/DD/YYYY] | S | |
| | | | | ************************************** | 1313 | |
| City | T Service Service Report St. | State | Zip Code | Date [MM/DD/YYYY] | \$ | <u> </u> |
| | | 5.00 | | | | erenta e e e e e |
| Partition of the Control of the Contro | of Contributing | | | Date [MM/DD/YYYY] | \$ | |
| Committe | | | | | | |
| House # | Street Address | | | Date [MM/DD/YYYY] | \$ | |
| | | | in the second | 6 | | |
| City | | State | Zip Codé | Date [MM/DD/YYYY] | \$ | |
| | <u> </u> | | With respect to the state of | The second section of the second section is a second section of the sect | arts arts | |
| | of Contributing | | | Date [MM/DD/YYYY] | \$ | |
| Committe | • | | | | 100 100 100 | |
| House # | Street Address | <u> </u> | | Date [MM/DD/YYYY] | \$ | |
| | | | | <u> </u> | 12.2 2.2 2.4 2.5 | |
| City | | State | Zip Code | Date [MM/DD/YYYY] | \$ | |
| S1026405 | | | | <u>- 1990年 (日本) 東京の</u> はまま <u>い 年</u> (日本) 日本 | | |
| mar - Edward Addison - at | of Contributing | 17.83 | r a congress (Assert Assert) | Date [MM/DD/YYYY] | \$ | · · · · · · · · · · · · · · · · · · · |
| Committee | | | | Andrew Control of the | | |
| House # | Street Address | | | Date [MM/DD/YYYY] | \$ | |
| | | | | | | |
| City | ■ 0.00 = 0.00 ± | State | Zip Code | Date [MM/DD/YYYY] | \$ | |
| | e e e e e e e e e e e e e e e e e e e | | | | 2 Sys | to the two |

PART 8

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.)

| Filer Identification Number: | | and the second second | | |
|------------------------------|----------|-----------------------|------|------|
| | 20230014 | , | | |
| | 2027-01 | | | |

| Full Name of Contributors | Date [MM/DD/MYYY] \$ | |
|---|---|--|
| Beau M Whiteman | Section 2 | 00 i co |
| House # Street Address | Date [MM/DD/YYYY] \$ | 001 |
| | | |
| City State Zip Code | Date [MM/DD/YYYY] \$ | |
| Washington DC 20002 | | |
| Full Name of Contributor | Date [MM/DD/YYYY] \$ | |
| Howard Pulchin | 05/07/2023 | 00 , ⁶⁰ |
| House # Street Address | Date [MM/DD/YYYY] \$ | |
| 300 North End Avenue IIC | | |
| City Now York City State NY Zip. Code 10282 | Date [MM/DD/YYYY] \$ | |
| Full Name of Contributor | Date MM/DD/MYYY | |
| | 05/06/2023 | 00.00 |
| House # Street Address | Date [MM/DD/YYYY] \$ | - |
| House # Street Address Warton Road | | |
| City State Zip Code | Date [MM/DD/YYYY] \$ | ·, · · · · · · · · · · · · · · · · · · |
| Waterford PA 16441 | | |
| Full Name of Contributor | Date [MM/DD/YYYY] 5 | |
| Marlo Torrelli | 05/05/2023 | 00.00 |
| House # Street Address | 05/05/2025 0 Date [MM/DD/YYYY] \$ | |
| 4243 Fargo Street | 1 to | |
| City State PA Zip Code 165 10 | Date [MM/DD/YYYY] \$ | · |
| Full Name of Contributor | Date (MM/DD/AYAY) | e terror of the state of |
| Alexander Rose | 05/03/2023 | 50.00 |
| House # Street Address | Daté (MM/DD/YYYY) \$ | |
| 8530 Lewis Rd | | |
| Harborcreek State PA Zip. Code 16421 | Date [MIM/DD/YYYY] \$ | |
| Full Name of Contributor | Date (MM/DD/YYYY) | |
| Caroline Ross | 05/02/2023 | 100.00 |
| House # Street Address | Date [MM/DD/YYYY] \$ | |
| 5110 3rd St NW | | |
| Mashington State DC Zip Code 20011 | Date [MM/DD/YYYY] \$ | |

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.)

| the street of the state of the street of the state of the | | |
|--|-----------------------|--|
| Filer (dentification Number: | | |
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| | みわかつ っしょし | |
| | レ レン 5 (1) (1) | |
| | | |
| | | |

| Full Name of Contributor | A . | Date (MW/90/xxxx) | |
|-------------------------------|---|-------------------------------------|--------|
| Virg | ina Burger | 05/07/2023 | 50.00 |
| House # Street Address | ina Burger East 36th | Date [MM/DD/YYYY] \$ | |
| City | State Zin Code | Date [MM/DD/MYM] S | |
| | 16504 | | |
| Full Name of Contributor Step | nanie Sedor | Date [MM/DD/YYYY] \$ | 100,00 |
| House # Street Address | | 05/31/2023 Date [MM/DD/YYYY] \$ | |
| 373 | Mingo Road | | |
| City. Wexford | State PA Zip Code 15222 | Date (MM/DD/YYY) \$ | |
| Full Name of Contributor | | Date [MM/DD/MAM] \$ | |
| Kara | Crannell | 05/02/2013 | 100.00 |
| | Meyfour Orive | Date [MM/DD/YYYY] \$ | , |
| Giv 1 | State Zip Code | Date:[MM/DD/YYYY] \$ | |
| Mikean | PA 16426 | | |
| Full Name of Contributor | | Date (MM/DD/MM) \$ | |
| House # Street Address | | Date [MM/DD/XXXX] \$ | |
| | State Zip Code | Date [MM/DD/YYYY] // \$ | |
| | | 1 | |
| Full Name of Contributor | | Date [MM/DD/XYYY] \$ | |
| House # Street Address | | Date [MM/DD/YYYY] | |
| | | | |
| City | State Zip Code | Date [MM/DD/YYYY] \$ | |
| Full Name of Contributor | Telephone (Control of Control of | Date (MIV/DD/YYYY) \$ | |
| | | | |
| House # Street Address | | Date [MM/DD/YYYY] \$ | |
| <u>City</u> | State Zip Code | Date [MM/DD/YYYY] \$ | |
| | | | |

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.

| File: identification Number: 20230014 | to the second of | |
|--|--|--------------|
| | | · |
| Full Name of Contributing Committee | -Date [MM/DD/YYYY] \$ | |
| House # Street Address | Date [MM/DD/YYYY] \$ | |
| City State Zip Code | Date [MM/DD/YYYY] \$ | |
| Full Name of Contributing Committee | Date (MM/DD/\\\) | |
| House # Street Address | Date [MM/DD/YYYY] \$ | |
| City State Zip Code | Date [MM/DD/YYYY] \$ | |
| Full Name of Contributing Committee | Date [MM/DD/WYY] \$ | |
| House #. Street Address | Date [MM/DD/YYYY] \$ | |
| City State Zip.Code. | Date [MM/DD/YYYY] \$ | |
| Full Name of Contributing Committee | Date [MM/DD/AYYY] \$ | . 14 |
| House # Street Address | Date [MM/DD/WYY] \$. | |
| City State Zip Code | Date [MM/DD/YYYY] \$ | |
| Full Name of Contributing Committee | Date [MM/DD/YYYY] \$ | |
| House # Street Address | Date [MM/DD/WYY] \$ | |
| City State Zip:Code | Date [MM/DD/YYYY] \$. | |
| Full Name of Contributing Committee | Date [MM/DD/XYYY] S | |

Date [MM/DD/YYYY]

Date [MM/DD/YYYY]

House #

City

Street Address

State

Zip Code

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: | | | |
| Filer Identification Number: | energy and a second | and the second second second | |
| | (17) ma 111 | | |
| · · · · · · · · · · · · · · · · | ~^50014 | | |
| (金属の大学などの大学の大学には、1年の後には正確ないのできない。 - 1987年 - | | | |
| | | | |

| | | | | <u> </u> |
|--|--|--|-------------------------------|--------------|
| Full Name of Contributor | | | Date (MM/DD/YYYY) \$ | |
| And the second s | en e | e version de la company | | entro di man |
| House # Street Addres | \$ | | Date (MM/DD/VVYY) \$ | |
| | | | | ž. |
| City | State | Zip Code | Date [MM/DD/MYY] S | |
| | (M. 1977) | | Occupation | |
| Employer Name | | | | |
| Employer Mailing Address / Principal Place of Business | | er 👟 🗀 sa | All the desired to the second | |
| Full Name of Contributor | | | Date [MM/DD/MYYY] \$ | |
| | | | | |
| House # Street Addres | \$ \$ | | Date [MM/DD/YYYY] S | |
| | | · · · · · · · · · · · · · · · · · · · | | |
| City | State | Zip Code | Date [MM/DD/YXYY] \$ | |
| | | | Occupation | |
| Employer Name | | | Company (| |
| Employer Mailing Address / Principal Place of Business | | | | |
| Full Name of Contributor | | | Date [MM/DD/YYYY] \$ | |
| a after communication and successive | | Control of the Contro | | |
| House # Street Addres | X | | Date [MM/DD/YYYY] \$ | |
| | 71 24 24 | | | 4: |
| City | State | Zip Code | Date [MM/DD/YYYY] \$ | |
| Employer Name | | | Occupation | |
| Employer Mailing Address / Principal Place of Business | | , | Taran February and Control | |
| Full Name of Contributor | | | Date [MM/DD/YYYY] \$ | : |
| | | | | |
| House # Street Addres | S | | Date [MM/DD/YYYY] \$ | |
| | | | New Control | |
| City | State | Zip Code | Date (MM/DD/YYYY) \$ | |
| Employer Name | | 750 W Z 25 | Occupation | |
| A Commence of the Commence of | | | | · . |
| Employer Mailing Address / Principal Place of Business | | | | 4 |

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.

| | | 19.5 | | | |
|---|-------------------|----------|------|--------------------------|--|
| Filer Identification Number: | | | | | |
| | | | | | |
| | 2023 <i>0</i> 014 | | | | |
| to the second contract of the second | W W 70017 | 5 | | The second second second | |
| | ·············· | | | | |

| Full Name | 10.75 | | | | | |
|---|--------|--|---------------------------------------|--|---------------------------------------|------------|
| | | | · · · · · · · · · · · · · · · · · · · | e de la companya de l | * * * * * * * * * * * * * * * * * * * | |
| House # | Stree | et Address | | | | |
| City | | AVARATE | State | Zip | Date [MM/DD/YYYY] | \$ |
| parene establica de la Angle | | | | Code | | |
| Receipt Description | | | Out 5 00 30-00004 | 1 State Control 1 | | 學際網 |
| Full Name | end en | | | | | |
| House # | Stree | et Address | | | | |
| City (2) | | AN PORTRACTO LIGITATION CONTRACTOR CONTRACTO | State | Zip Code | Date [MM/DD/YYYY] | * |
| Receipt Description | | | Approximation and | ANSTRUM ANSTRUM | <u> </u> | |
| Full Name | | | | | | |
| House # | Stree | et Address | · · · · · · · · · · · · · · · · · · · | | | |
| City | | and the second s | State | Zip Code | Date [MM/DD/XYXY] | 5 |
| | | | | Loue | | |
| Receipt Description | | | | | | 1.0002.1 |
| Full Name | | | | | | |
| House # | Stree | et Address | | | <u> </u> | |
| City | | 関節では、AAPENTO DIVANT | State | Zip Code | Date [MM/DD/YYYY] | * |
| Receipt Description | | | | | | |
| Full Name | | | | | | |
| House # | Stree | rt Address | | | | |
| City | | in the second se | State | Zip Code | Date [MM/DD/YYYY] | \$ |
| Receipt Description | | | 20 Carrier 1990 | | | |
| | | | | | | |
| Full Name | | | | | | |
| House # | Stree | t Address | | | | |
| Chy | | The Local Control of Spirit | State | Zip Code | Date [MM/DD/YYYY] | 5 |
| Receipt Description | 2000 | | 100 V 164 09 10 V 104 1 | PROPERTOR AND ASSESSED ASSESSE | 1 | [PA/262] |

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: | 2023 0014 | | |
|--|-----------------------------|-------------------------------|--|
| 22 Modes Consept of Group of the Section Consequence of the Section Consequ | | | |
| 1. UNITEMIZED IN-KIND CON | TRIBUTIONS RECEIVED-VA | LUE OF \$50.00 OR LESS PER CO | NTRIBUTOR |
| TOTAL for the reporting period | (1) | \$ | |
| 2. IN-KIND CONTRIBUTIONS F | 1-4-141-244VIIII 4401-44-14 | 01 TO \$250.00 (FROM PART F) | |
| TOTAL for the reporting period | (2) | \$ | |
| TOTAL for the reporting period | \2/ | - | |
| 3. IN-KIND CONTRIBUTION RI | ECEIVED-VALUE OVER \$25 | 0.00 (FROM PART G) | Company of the Compan |
| TOTAL for the reporting period | (3) | \$ | |
| TOTAL VALUE OF IN-KIND CONTRIBL | ITIONS DURING THIS REPO | DRTING \$ | |
| PERIOD (Add and enter amount tota on Page 1, Report Cover Page, Item | ls from boxes 1, 2, and 3; | | · |

SCHEDULE II PART F

In-Kind Contributions Received

VALUE OF \$50.01 TO \$250

| Filer Identification Number: | | | |
|------------------------------|-----------|--|--|
| | 2023 0014 | | |

| | SNC20 82 584 | | | | |
|------------------------|--|---|---------------------------------------|-------------------|-------------------------|
| Full Name of Contribu | itor | - | | Date [MM/DD/YYYY] | \$ |
| House # | Street Address | , | - | Date [MM/DD/XXXX] | \$ |
| City | | State | Zip Code | Date [MM/DD/YYYY] | 5 |
| Description of Contrib | bution | 在影片的程度 | | <u> </u> | |
| Full Name of Contribu | -tay | | | Date [MM/DD/YYYY] | (m/K)(g) |
| epito 1935-anno accomo | | | · · · · · · · · · · · · · · · · · · · | | |
| | Street Address | | | Date [MM/DD/\\\) | ** |
| City. | 13491544824542444444444444444444444444444444 | State | Zip Code | Date [MM/DD/YYYY] | \$ |
| Description of Contrib | oution | | | [Market 1977] | |
| a Credit | | | <u> </u> | | |
| Full Name of Contribu | Kor | | | Date [MM/DD/YYYY] | \$ |
| House # | Street Address | | | Date [MM/DD/YYYY] | \$. |
| City | | State | Zip Code | Date [MM/DD/YYYY] | |
| Description of Contrib | -netan | | | | |
| | | 1 | | | |
| Full Name of Contribu | tor | | | Date [MM/DD/YYYY] | |
| House # | Street Address | | | Date [MM/DD/YYYY] | . |
| City | | State | Zip Code | Date (MM/PD/MM) | (S) |
| Description of Contrib | iution | | | <u>.</u> | |
| Full Name of Contribu | | | · · · · · · · · · · · · · · · · · · · | | ₹ 2 ./g j |
| | | | | Date [MM/DD/YYYY] | \$ |
| House # | Street Address | <u></u> | | Date [MM/DD/YYYY] | \$ |
| City | Į. | State | Zip Code | Date [MM/DD/YYYY] | \$ |
| Description of Contrib | ütion | Property and the second | <u> </u> | 100 | |

SCHEDULE II Part G

Part

In-Kind Contributions Received

VALUE OVER \$250

| Filer Identification Number: | | The state of the s | the second of th |
|---|------------|--|--|
| | | | |
| erika (j. 1816) Hariada (j. 1816) - Albanda (j. 1816) Hariada (j. 1816) - Albanda (j. 1816) | スピスろじのしは | | • |
| | V 7 30 014 | | |

| Full Name of Contrib | itor | · | | Date [MM/DD/YYYY] | 5 2 |
|---|--|----------------------|-----------------------|--|------------|
| | | | | | |
| House # | Street Address | | | Date [MM/DD/YYYY] | \$ |
| | | | | With the second | |
| City | | State | Zip Code | Date [MM/DD/YYYY] | \$ |
| | | | | 100 A C C C C C C C C C C C C C C C C C C | |
| Employer Name | | | | Occupation | |
| Employer Mailing Ad | dress / Principal | | | Description | |
| Place of Business | 2 - 146 - 1 Topicos | | | of Contribution | |
| Full Name of Contrib | itor | | | Date (MM/DD/YYYY) | |
| | | | | | |
| House# | Street Address | | | Date [MM/DD/YYYY] | 8 |
| | | | | 200 | |
| Gity | 17 (3 th) W (2 th) (3 th) | State | Zip Code | Date [MM/DD/YYYY] | |
| | | | | | |
| Employer Name | | | | Occupation | |
| Employer Mailing Ad | dress / Principal_ | | | Description of | |
| Place of Business | | | | Contribution | |
| Full Name of Contrib | itor | | , | Date [MM/DD/YYYY] | \$ |
| | 5 | | | No. | |
| House # | Street Address | | | Date [MM/DD/YYYY] | |
| | | | | 100 May 200 Ma | |
| City | | State | Zip Code | Date [MM/DD/YYYY] | |
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| Employer Name | | | | Occupation | |
| Employer Mailing Ad | dress / Principal | | M-70 | Description of | |
| Place of Business | | | | Contribution | |
| Full Name of Contrib | utor | | er van de la de la de | Date (MM/DD/AYYY) | |
| Park Control of the Colored Co. Control of the Control of the Cont | | · | | | |
| House # | Street Address | | | Date [MM/DD/YYYY] | |
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| Place of Dusiness | energia de la composition della composition dell | | | Contribution | |

Statement of Expenditures

| STATE OF THE PARTY | ···· | | | | | وورجين | |
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| Frier identification Number: | and the second second second | * | and the second of the | | A | 100 | |
| Filer identification Number: | 20130014 | | | | | | |
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| To Whom Paid | | | Date [MM/DD/MYY] \$ | |
|------------------------|-------------|--------------------|----------------------------|----------|
| House # Street Address | Strategies | LLC | 05/23/2023 | 6,151.94 |
| House # Street Address | P.O. BOX | 100970 | Description of Expenditure | |
| Arlington | State. VA | Zip Code 22210 | Mailer | |
| To Whom Paid | . 61 1 | A | Date [MM/DD/M/X) S | |
| House # Street Address | Strategies | , LL- | 06/03/2023 | 6,500.00 |
| | | 100970 | Description of Expenditure | |
| eity Brie | State PA | Zip Code 22310 | Mailer | |
| To Whom Paid | 1010 | | Date [MM/DD/YYYY] \$ | 100 00 |
| House # Street Address | | | 05/12/2023 | 125.00 |
| 32 | West 8th | Ste 502 | Description of Expenditure | |
| city Erre | State PA | Zip Code 1650 | Sponsorship A | -d |
| To Whom Paid. PNC Ba | (A | | Date [MM/DD//Y/Y/] S | — |
| Charles Inc. | | | 05/26/2023 | 7,50 |
| 300 | Fifth Avenu | | Description of Expenditure | |
| Pitsburgh | State PA | Zip Code \5223 | Bank Fee | |
| To Whom Paid | | | Date [MM/DD/YYYY] \$ | |
| House # Street Address | | | Description of Expenditure | |
| Сну | State | Zip Code | | |
| To Whom Paid | | | Date [MM/DD/YYY] \$ | |
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| Gity | State | Zip Code | | |
| To Whom Paid | | | Date (MM/DD/YYYY) \$ | |
| House # Street Address | | | Description of Expenditure | |
| City | State | Zip Code | | |
| To Whom Paid | | <u>-</u> | Date [MM/DD/YYYY] S | |
| House # Street Address | | | Description of Expenditure | |
| City | State | Zip Code | | |

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.

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| Name of Creditor | Deliver Strategies, LLC | Outstanding Balance of Debt |
|---------------------|--|-----------------------------|
| House # Stre | et Address P.O. BOX 100970 [MM/DD/YYY] 06/03/3023 | 629.75 |
| Chy | Arlington State YA Code 23210 | |
| Description of Debt | Arlington YA code 123210 Balance of Mailer Services | |
| Name of Creditor | : | Outstanding Balance of Debt |
| House # Stre | et Address DATE DEBT INCURRED [MM/DD/YYYY] | |
| City 3 | State Zip Gode | |
| Description of Debt | | |
| Name of Greditor | DATE DEBT INCURRED | Outstanding Balance of Debt |
| House# Stre | et Address DATE DEBT INCURRED [MM/DD/YYYY] | |
| City | State Zip Code | |
| Description of Debt | 「中央公司 「日本の日本の日本日本の日本日本の日本日本の日本日本日本日本日本日本日本日本日本 | 100 CO |
| Name of Creditor | | Outstanding Balance of Debt |
| House # Stre | et Address DATE DEBT INCURRED [MM/DD/XYYY] | \$ |
| City | State Zip Code ** | |
| Description of Debt | | |
| Name of Creditor | | Outstanding Balance of Debt |
| House # Stre | et Address [MM/DD/YYYY] | \$ |
| City | State Zip Code | |
| Description of Debt | | |
| Name of Creditor | | Outstanding Balance of Debt |
| House # Stre | et Address DATE DEBT INCURRED [MM/DD/YYYY] | |
| City | State Zip Code | |
| Description of Debt | December 1 | Populari |