

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

Filer Identification Number	Report Filed B ( Mark X)	y Candida	ate 🔀	Committee		Lobbyist
Name of Filing Committee, Candidate or Lobbyist	Russ LaFuria					
Street Address	9747 W. Main Ro	oad				
City North East		State		Zip Code	16428	
Type of Report (Place x under report type)						
1-6 <sup>th</sup> Tuesday 2- 2 <sup>nd</sup> Friday 3-30 Day Post Pre-Primary Pre-Primary Primary	4- 6 <sup>th</sup> Tuesday Pre- Election	5- 2 <sup>nd</sup> Friday Pre- Election	■ A = 1 20 = 0 1 1 1 2 3 1	7- Annual	Special 2 <sup>nd</sup> Friday Pre-Election	Special 30 Day Post-Election
			I was a second	Tall to day, the New York	E. B. Walty E. Waar, F. B. day o	
Date Of Election (MM/DD/YYYY) 05/18	Year	2021	Amendment Report		Termination Report	
Summary of Receipts and From Date	To Date			For	Office Use Only	
Expenditures 03/22/2021	L 05	/03/2021	المستورية في المان	Manager .		
A. Amount Brought Forward From Last Repo	ðt. \$	0				
B. Total Monetary Contributions and Receipt (From Schedule I)	s S	330.72			• • • • • • • • • • • • • • • • • • •	3
C. Total Funds Available	\$				9 5	3
(Sum of Lines A and B)  D. Total Expenditures	\$		-[		mm.	
D. Total Expenditures (From Schedule III)	- A	330.72	_		TO THE	ant.
E. Ending Cash Balance	\$	0			필요	L
(Subtract Line D from Line C)  F. Value of In-Kind Contributions Received	\$	·	-		Ö	7
(From Schedule II)						या -
G. Unpaid Debts and Obligations	\$				= = = = = = = = = = = = = = = = = = = =	Ö
(From Schedule IV)		Affidavit S	ection		25	
Part 1- If this is a Committee report, treasurer sign	here. If this is a Ca	ndidate report.	andidate sign here.	/		
I swear (or affirm) that this report, including the att	ached schedules o	in paper, is to the	e best of my knowled	nge and belief	true, correct and comple	31 <del>2</del> .
Sworn to and subscribed before me this					AZ	•
day of 20 A	- '	_	Signature	of Person Subi	nitting report	
1 TOURS LONGSTON	_	_	RUSCEL	L CAP	FUNIA	
Signature  My Commission expires 03 03 20	24 . 1		814	Printed Nar	449-808	<u> </u>
My Commission expires O. J. C. J. O. V. MO. DAY YI	Commonw	eaith of Pennsy L. Carlstrom.	vania - Notary Sea Notary Public		sytime Telephone Numb	
Part II- If this is a report of a Candidate's Authorize	d Committee, can	didate 19 Cisu	ngre.	a in annulai ana a	the Act of June 3, 1937	(D   1333 N/O 320) ac
I swear (or affirm) that to the best of my knowledg amended.	Con	mission numb	er 1296651	1	the Act or June 3, 1937	(F.L. 1333, NO.320) 85
Sworn to and subscribed before me this						
day of20	- '	-	Sig	gnature of Cano	lidate	
	Printed Name					
Signature	, 1			rintea Najiit	•	
My Commission expires MO DAY YR.	·····	-	Area Code	Da	ytime Telephone Numb	<u></u> er

### SCHEDULE I

## **Contributions and Receipts**

**Detailed Summary Page** 

Filer Identification Number W		 	 
Filer Identification Number is			
Filet identification womber			
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一二元的人。1995年1995年1996年1996年1996年1996年1996年1996年	and the second s		

1. Uniternized Contributions and Receipts: \$50.00 or Less per Contributor		
· · · · · · · · · · · · · · · · · · ·	1)	\$
2. Contributions of \$50.01 to \$250.00 (From:	大克克 克尔(1)	
Contributions Received from Political Committees (Part A)		\$
All Other Contributions (Part B)		\$ 330.72
Total for the reporting period (	2)	\$
3. Contributions Over \$250.00 (From Part Cand 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)	125°1.	
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, Repo Cover Page, Item B)	rt	\$

# Statement of Expenditures

File Aldentification (lumbers)			

ToWhomPaid	Date (MM/DD/XYYY) \$ 330.72
	04/13/2021  Description of Expenditure 2/1/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2/2
House 学 Street Address 23 South Lake Street	
North East  State PA Code, 2 16428	Campaign Signs
Townom Paid	4Date [MM/DD/XXXVI] \$3
House# Street-Address	Description of Expenditure, Title 17, 30 (1)
(City).	
TOWNom Paid 2	3pate [MM/DD/XXXY] iii \$ 1
House # Street Address	Description of Expenditure (5)
State Zio Gode	
Jo Whom Paid III	Date [MM/DD/YYYY] \$5.3
House # Street Address	Description of Expenditure
City State Code Code	
TOWhom Paid ]	(Date (MM/DD/YYYY) (S
House # Street Address	Description of Expenditure
City State Code	
Tổ Whốm Páid	Date [MM/DD/YYYY] 3
House # Street Address	Description of Expenditure
City State Zip Code C	
To Whom Paid	Date [MM/DD/XXXX] \$
House # Street Address	Description of Expenditure
City State Zip Code	
To Whom Paid	Date (MM/DD/XXXX)
House # Street Address	Description of Expenditure
City State Zip Code	

#### 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.)

Filericentification Number				
				Transfer and
Full:Name of Contributor Ed Sv	·		Date [MIN/DD/YYYY]	100
THE RESERVE OF THE PROPERTY OF			35,50,2022	Settle .
House## Street Ac	ddress 10233 W. Law Road		Date MM/DD/AAAA	
(Constant)	10233 W. Law Road	1571270 X 1 X 400s1	IDate [MM/DD/XXXX]	1559
City North East	State A State PA	Zip Code 14 April 16428	Service Management 12	
Full Name of Contributor			nDate[MM/QD/XXXX]	. 405 PC3
Full Name of Contributor Russ	LaFuria		04/13/21	230.72
House#1 Street Ac	ddress		Date [MM/DD/YYYY]	15.7
House # Street A	9747 W. Main Road	NAME OF TAXABLE PARTY O	M=-7771WW-77-12-12-12	Mark Mark Mark Mark Mark Mark Mark Mark
City North East	State PA	7Zip Code 16428	(Date MM/DD/MYX)	1.5.1 1.6.1
Full Name of Contributor	I ASHEMANGERIC		@Date:[MM/DD/AYXX]#	
House# Street A	ddress		Date [MM/DD/YYYY]	
House # Street A	TO ALL THE TOTAL			
City	State	Zip Code	/Date (MM/DD/YYYY) /2	
26.26		<b>建筑</b>	EXECUTES AND RESPONDED TO PLANT AND RESPONDED TO	
Full Name of Contributor			#Date [MM/DD/XXXX] }	
· · · · · · · · · · · · · · · · · · ·	ddress		Date [MM/DD/YYYY]	
House #1 Street A				
COLY SI	State	Zip €ode	Date [MM/DD/YYYY]	
	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		Topped the Section of	
Full Name of Contributor		•	SDate [MM/DD/YYYY]	
House # Street A	ddress		Date [MM/DD/YYYY] &	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
City	State	Zip Code	Date [MM/DD/YYYY]	\$3
Full Name of Contributor	道德遊戲	winasiname.National	Date [MM/DD/XXXX]	
			And the second s	
House #2 Street A	ddress		Date [MM/DD/YYYY]	
	Dec Trans			7.47 7.47
City 20	State	Zip Code	Date [MM/DD/YYYY]	S
Lings.	1670 875 1670 3 5 4 6			