

## Commonwealth of Pennsylvania - Campaign Finance Report

			(Note:		·					ole. It sh		d be type					
Filer Identificati Number		L	-4759048	246.55	kepor Mark	t Filed (X)	Ву	Candida	ate		A WAR TO THE	Committe	8		X	Lobb	/ist
Name of Filing C Lobbyist	Comn	nittee, Ca	ndidate or	С	ommi	ttee to	Elect Jac	ck Lee									
Street Address				8	620 H	loneysu	ıckle Dri	ve									
City		Erie		920			10	State	PA		\$ 0.00 M	Zip Code	165	09			
Type of Report (	Place	x under i	report type)														
1- 6 <sup>th</sup> Tuesday Pre-Primary			3-30 Day Pos Primary			uesday ection		Friday lection	100	Day Pos ion	t i	7- Annual	C	cial 2 -Elect	<sup>nd</sup> Friday ion		al 30 Day Election
				104		90 29 100			S	$\overline{X}$				76.17		Ī	
Date Of Election (MM/DD/YYYY)	10.000		11/05/2019	Y	ear			······································	Ame Repo	ndment ort			Ter Rep	minal ort	ion		<u> </u>
Summary of Rec Expenditures	eipts	sand	From Date			To Dat	e		. 186 S 6471 S			For	Office	Use	son with the		10 me (6.0
			10/22/201			11	1/25/2019	9							Š	2019	
A. Amount Brou	ight F	orward F	rom Last Repo	rt	\$		1,207.62									B	
B. Total Moneta (From Schedule	1)		ns and Receipt	S	\$		900.00								-m.13 + } [(1)	+ (	).4
C. Total Funds A (Sum of Lines A	and E	3)			\$		2,107.62										•
D. Total Expendi (From Schedule E. Ending Cash B	III)				\$		1,420.48									 ယ တ	
(Subtract Line D F: Value of In-Kir	from	Line C)	ng Possitived		\$		687.14										
(From Schedule	II)						0.00										
G. Unpaid Debts (From Schedule		Obligatio	ns		\$		0.00										
Part 1- If this is a C	ommi	ittee renor	t transurar sign l	200	If this	ic a Car		davit Sec		cian hara							
I swear (or affirm)												and belief t	rue, co	rrect a	nd comple	ete.	
Sworn to and subse										, , .	/						
<u>47H</u> _day of ]	DECE	MBER	20 /9			. 1			M	nu	<u> </u>	Person Subn	<u>,</u>				
agna In El	Min			_		<b>}</b> -		De	nise A	. Lee	e or	rerson Subn	nitting	report			
10	Signat	ure				. 1			_			Printed Nam					
My Commission ex	pires_	<u>4</u> мо.	/ 202 DAY YR	_				81 	4 rea Coo				2-8107	'alanh	one Numb		
												υd	yanne i	eichill	JIE NUMIO		
Part II- If this is a re I swear (or affirm) t amended.										violated ar	ny p	rovisions of	the Act	of Jur	e 3, 1937	(P.L. 1333	, NO.320) as
Sworn to and subsc	cribed	before me	this							<b>n</b>	_	A		~			Com
47/4 day of_	DEC	EMBER	<u> 20 19 </u>			1				L'		1	حبر	<u> </u>		S	700 P
Quina M.	Signat	Umi		_					ck F. L			ure of Candi inted Name	date (	<u> </u>		Commission Number	nwealth of Penns REGINA & ERBIN - Erie Col
My Commission ex	_	4	1 2023			. 1		81	4		FII	823-9	940			on Nun	f Pennsylva ERBIN - Not Erie County
,	, <u></u>	MO.	DAY YR.					A	rea Cod	e		Dayt	ime Te	lephor	ne Number	nber 12895	Pennsylvania - No RBIN - Notary Pub rie County
																9557	- KA
																	ry Seal

#### SCHEDULE I

## **Contributions and Receipts**

**Detailed Summary Page** 

Filer Identification Number	36-4759048		

	STANZANIA PROS	eret i litter i	
1.Unitemized Contributions and Receipts-\$50.00 or Less per Contributor			
Total for the reporting period	(1)	\$	0.00
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)		L L	
Contributions Received from Political Committees (Part A)		\$	400.00
All Other Contributions (Part B)		\$	0.00
Total for the reporting period	(2)	\$	400.00
3. Contributions Over \$250.00 (From Part C and Part D)			
Contributions Received from Political Committees (Part C)	22-7-1440-0028	\$	500.00
All Other Contributions (Part D)		\$	0.00
Total for the reporting period	(3)	\$	900.00
4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)			
Total for the reporting period	(4)	\$	0.00
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, Recover Page, Item B)	port	\$	900.00

#### 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.

PHEF IGENT	ancation (4	<b>umber</b> 96-475	9048				
							Amount
	ne ef Centr				PRE IMM/95/XXXX	<b>_</b>	
Committe	<b>86</b>		<b>/erkers Losei #9 PA6</b>	3	11/13/2019		250,00
House #	2201	Street Address	Liberty Avenue		Date [MM/DD/YYYY]	5	
Elty	4	THE TEN SHIP WAS AND A SHIP WAS A	State	Zip Code	Bate IMM/BB/YYYY	5	
P	Pitteburgh		PA	15222			
	ne of Contr	libuting		PRE (MM/PP/XXXX)	] 5		
Committe	<b>20</b>	Friends	s of Bob Merski		10/29/2019		150.00
Heuse #		Street Address			Date (MM/DD/XXXX)	\$	
1201.00 To 12			P.O. Box 667	,		100 H	
<b>GHY</b> E	Erie	<del></del>	Sinte PA	<b>219 Code</b> 165012	Pate [MM/DD/YYYY]	\$	
Full Name	e of Contr	leuting	and the Control of Control		Pate IMM/OD/XXXX	5	
Committe	20						
House #	A STANDARD	Street Address			Date (MM/DD/YYYY)	5	
			1				
CHY	4	2.513 x 86.50 353 x 23.43 2344 x 23.43 1	State	Lip Code		5	
						Allene	
Full Name Committe	e ef Centri ee	buting			S JAKE (MM/) SHEE	•	
House #		Street Address			PARE IMM/DD/XXXXI	5	
	# \$ &		1				
GHY	<u></u>	28x 2.0 \$25x 2.15 (45x)	State	Zip Code	Date [MM/DD/YYYY]	\$	
Full Name Committe	e of Contri ee	buting			Bate (MM/SD/XXXX)	5	
House #	<u> विकास कर विकास के जिल्ला</u>	- German Andrews			Date (MM/DD/YYYY)		
Notice of		Street Address			nate fusu(an (*) *)	5	
Elly		TO MAKE ATTACHED AND COME.	State	Zip Cede	Date (MM/DB/YYW)	5	<del></del>
	سيست						
Full Name Committe		buting			Bate (MM/DB/XXXX)	5	
House #	The second second	Street Address	:		Date (MM/DD/YYYY)	•	
			i				
City			State	Zip Code	Pate (MM/DD/YYYY)	5	

# 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.)

<del></del>		
Filer Identification Number:		
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36-4759048		
2		
19909 (1962) 6250 (2001) 63 (40 4 40 62) (2017) 63 (20 62) 63 (20 68) 63 (20 68) 63 (20 68)		•
		•
A 1997		•

Full Name of Co	entributor			Date [MM/DD/YYYY]	
House #	Street Address			Date [MM/DD/YYYY]	
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Full Name of Co	ntributor	Para-Base Service		Date [MM/DD/YYYY]	\$ .
House #	Street Address			Date [MM/DD/YYYY]	
		S-95-00-1			
City	•	State	Zip Code	Date [MM/DD/YYYY]	<b>S</b>
Full Name of Co	ntributor	Contract States and	[1000] [1000] [1000] [1000]	Date [MM/DD/YYYY]	
House #	Street Address			Date [MM/DD/YYYY]	<b>S</b>
City	:	State	Zip Code	Date [MM/DD/YYYY]	\$
Full Name of Co	otributor	grafia (grafia)		Date [MM/DD/YYYY]	₹ <b>\$</b>
					•
House #	Street Address			Date [MM/DD/YYYY]	<b>55</b>
City		State	Zip Code	Date [MM/DD/YYYY]	
Full Name of Co	ntributor		Lave 82.255.457.754.4	Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Full Name of Co	ntelbutor			Date (MM/DD/YYYY)	\$
				Ecara Con/CO/Manass	
House #	Street Address			Date [MM/DD/YYYY]	<b>5</b>
	Harris Comment				
City	2	State	Zip Code	Date [MM/DD/YYYY]	7 <b>5</b>
		7 1961 167 18 19 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			

#### **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:		
36-4759048		

Full Name of		·		Date [MM/DD/YYYY]	<b>\$</b>
Contributing Co	mmittee Road Spr	inkler Fitters Local	#669 PAC	11/14/2079	500.00
House # 7050	Street Addres	os Oakland Mills Ro	ad	Date [MM/DD/YYYY]	\$
<b>City</b> Columbi	ia	State MA	Zip Code 21046	Date [MM/DD/YYYY]	
Full Name of Contributing Co	mmittee	[		Date [MM/DD/YYYY]	\$
House #	Street Addres	<b>Š</b>		Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Full Name of Contributing Co	mmittee:	[1.459ga 75.75]	P- ( 100 A 1	Date [MM/DD/YYYY]	\$
House #	Street Addres	<b>S</b>		Date [MM/DD/YYYY]	\$
City	[2000] [2000] [2000] [2000] [2000] [2000] [2000] [2000] [2000] [2000] [2000] [2000] [2000] [2000] [2000] [2000]	State	Zip Code	Date [MM/DD/YYYY]	\$
Full Name of Contributing Co	mmittee		·	Date [MM/DD/YYYY]	\$
House #	Street Addres	Ś		Date [MM/DD/YYYY]	S
City	Kentak (00% stated on	State	Zip Code	Date [MM/DD/YYYY]	<b>\$</b>
Full Name of Contributing Co	mmitteë			Date [MM/DD/YYYY]	<b>/\$</b>
louse#	Street Addres	<b>s</b>		Date [MM/DD/YYYY]	\$
City	First Assessmenting (12.2) that is	State	Zip Code	Date [MM/DD/YYYY]	\$

## 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 Identificatio	n Number: 36-4759048			
Full Name of Co	ontributor			Date [MM/DD/YYYY] \$
House #	Street Address	<del></del>	1 ha - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	Date [MM/DD/YYYY] \$
City		State	Zip Code	Date [MM/DD/YYYY] \$
Employer Nam	en de la companya de			Occupation
Employer Maili Principal Place		•		
Full Name of Co	ontributor			Date [MM/DD/YYYY] \$
House #	Street Address			Date [MM/DD/YYYY] \$
City		State	Zip Code	Date [MM/DD/YYYY] \$
Employer Name				Occupation
Employer Maili Principal Place		,		
Full Name of Co	intributor:			Date [MM/DD/YYYY] \$
House #	Street Address			Date [MM/DD/YYYY] \$
City		State	Zip Code	Date [MM/DD/YYYY] \$
Employer Name		Property of	10 10 10 10 10 10 10 10 10 10 10 10 10 1	Occupation
Employer Mailli Principal Place		··· /·		
Full Name of Co	intributor			Date [MM/DD/YYYY] \$
House #	Street Address			Date [MM/DD/YYYY] \$
City		State	Zip Code	Date [MM/DD/YYYY] \$
Employer Name				Occupation
Employer Mailir	ng Address /			point supplies not out

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 Nur	nber:	36-4759048		
Full Name			·	
House #	Stre	et Address		
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description				
Full Name				
House #	Stre	et Address		
City		State	Zip Gode	Date [MM/DD/YYYY] \$
Receipt Description		[ [ [ ] A A A A A A A A A A A A A A A A	(2000) (2000)	F 240L
Full Name				
House #	Stre	et Addréss		
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description			[2570]25/27/27	
Full Name				
House #	Stre	et Address		
City City City City City City City City		State	Zip Gode	Date [MM/DD/YYYY] \$
Receipt Description				
Full Name				
House #	Stree	et Address		
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description		1 de section de la constant de la co		1 *****I
Full Name				
House #	Stree	et Address		
Clty		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description		110 - 110		

#### **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: 36-4759048			
1, UNITEMIZED IN-KIND CONTRIBUTION	NS RECEIVED-VALUE OF \$5	0.00 (	OR LESS PER CONTRIBUTOR
TOTAL for the reporting period	(1)	\$	
2, IN-KIND CONTRIBUTIONS RECEIVED-	VALUE OF \$50.01 TO \$250	.00 (F	ROM PART F)
TOTAL for the reporting period	(2)	\$	
3. IN-KIND CONTRIBUTION RECEIVED-V	ALUE OVER \$250,00 (FROM	A PAR	T.G)
TOTAL for the reporting period	(3)	\$	
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DU	RING THIS REPORTING	\$	
PERIOD (Add and enter amount totals from bo on Page 1, Report Cover Page, Item F)	xes 1, 2, and 3; also enter		0.00
		—	

## SCHEDULE II PART F

### **In-Kind Contributions Received**

VALUE OF \$50.01 TO \$250

Filer identification Number:			
36-4759048			
30-77 030-70			

Full Name of Contrib	outor			Date [MM/DD/YYYY]	<b>\$</b>
7 AV					
House #	Street Address			Date [MM/DD/YYYY]	
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Description of Contr	lbution	20.000.000.000 <u>1</u>	Property Control of the Tail		
Full Name of Contrib	utor			Date [MM/DD/YYYY]	
House #	Street Address			Date [MM/DD/YYYY]	\$
City	**************************************	State	Zip Code	Date [MM/DD/YYYY]	
Description of Contr	graph of the state				
Full Name of Contrib	utor			Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	
Description of Contri	bution				
Full Name of Contrib	utor			Date [MM/DD/YYYY]	<b>(\$</b>
House #	Street Address	· · · · · · · · · · · · · · · · · · ·	, p. 100 miles	Date [MM/DD/YYYY]	<b>S</b>
City		State	Zip Code	Date [MM/DD/YYYY]	*
Description of Contri	bution				
Full Name of Contrib	utor			Date [MM/DD/YYYY]	<b>\$</b>
House #	Street Address			Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	
Description of Contri	bution	9.0. ⊃ 98 S · · . ▶	Barton, Co. Co. Chilaretta II	· · · · · · · · · · · · · · · · · · ·	27 to 2011 1

# Statement of Expenditures

Filer Identification Number 36-4759048

Te Whom Paid Kimkopy			Date [MM/DD/YYYY]	209.88
Housest Street Acare			10/18/2019  Description of Expenditu	
2040	vest our Street			
<b>City</b> Erie	<b>State</b> PA	Zip Code 16505	Campaign Door Hangers	
To Whom Paid Wegman's Cate	ering		Date [MM/DD/YYYY]	68.37
House # Street Addres			11/05/2019 Description of Expenditur	
6143	Peach Street	<b>经编制</b> 经验的基础		
City Erie	<b>State</b> PA	Zip Code 16509	Lunch for Poll Worker's	
To Whom Paid Home Depot			Date [MM/Øb/WYY] 10/22/2019	41.98
House # 7451 Street Addres	S Peach Street		Description of Expenditur	e
City Erie	State PA	<b>Zip</b> 16509	Sign Supplies	
ZatWhomiPaid		Code 16509	RPACAMMVIDDVAAVAISE	
Staples			11/05/2019	142.83
House # 1902 Street Addres	Keystone Drive		Description of Expenditur	e
City Erie	State) PA	<b>7/p</b> <b>code</b> 16509	Sign Supplies	
To Whom Paid Trevor Vogt Vid	leo	NEW CONTROL OF THE CO	Date (MM//DB/AYAY)	75.00
Trevor Vogt Vid House # 5603  Street Addres	<b>V</b>	1 SOOL 4 Controlled to Section 201	Date [MM//DD/YYYY] 10/29/2019 Description of Expenditur	
Trevor Vogt Vid		<b>Zip</b> 16509	10/29/2019	
House # 5603 Street Addres  City Erie  To Whom Paid	Zauneggar Street State PA	Zip Code 16509	10/29/2019 Description of Expenditure	<b>i</b>
Flouse # 5603 Street Addres  City Erie  To Whom Paid Churchill's Bour	Zauneggar Street  State PA  rbon and Brew		10/29/2019 Description of Expenditur  Campaign Video  Date [MM/DD/YYYY] \$ 11/08/2019	<b>249.19</b>
House # 5603 Street Addres  City Erie  To Whom Paid Churchill's Bour  House # 8199 Street Addres	Zauneggar Street  State PA  rbon and Brew  Perry Highway	Code 16509	10/29/2019 Description of Expenditur  Campaign Video Date [MM/DD/YYYY]	<b>249.19</b>
Trevor Vogt Vid  Flouse # 5603 Street Addres  City Erie  To Whom Paid Churchill's Bour  House # 8199 Street Addres  City Erie	Zauneggar Street State: PA rbon and Brew		10/29/2019 Description of Expenditur  Campaign Video  Date [MM/DD/YYYY] \$ 11/08/2019	<b>249.19</b>
Trevor Vogt Vid   House	Zauneggar Street  State PA  rbon and Brew  Perry Highway	Code 16509	10/29/2019 Description of Expenditure  Campaign Video  Date [MM/DD/YYYY] 11/08/2019 Description of Expenditure	249.19
Trevor Vogt Vid  Flouse # 5603 Street Addres  City Erie  To Whom Paid Churchill's Bour  House # 8199 Street Addres  City Erie	Zauneggar Street  State PA  rbon and Brew  Perry Highway  State PA	Code 16509	10/29/2019  Description of Expenditure  Campaign Video  Date [MM/DD/YYYY] \$ 11/08/2019  Description of Expenditure  Poll Watcher's Dinner	249.19
Trevor Vogt Vid  House # 5603 Street Addres  City Erie  To Whom Paid Churchill's Bour  House # 8199 Street Addres  Erie  To Whom Paid	Zauneggar Street  State PA  rbon and Brew  Perry Highway  State PA	Code 16509  Zip Code 16509	Description of Expenditure  Campaign Video  Date [MM/DD/YYYY]  11/08/2019  Description of Expenditure  Poll Watcher's Dinner  Date [MM/DD/YYYY]  S	249.19
Trevor Vogt Vid  Flouse # 5603 Street Addres  City Erie  To Whom Paid Churchill's Bour  House # 8199 Street Addres  City Erie  To Whom Paid  House # Street Addres	Zauneggar Street  State: PA  rbon and Brew  Perry Highway  State: PA	Code   16509	Description of Expenditure  Campaign Video  Date [MM/DD/YYYY]  11/08/2019  Description of Expenditure  Poll Watcher's Dinner  Date [MM/DD/YYYY]  S	249.19
Trevor Vogt Vid   House #   5603   Street Addres   City   Erie	Zauneggar Street  State PA  rbon and Brew  State PA  State PA  State State	Code 16509  Zip Code 16509	Description of Expenditure  Campaign Video  Date [MM/DD/YYYY]  11/08/2019  Description of Expenditure  Poll Watcher's Dinner  Date [MM/DD/YYYY]  Description of Expenditure  Date [MM/DD/YYYY]  Date [MM/DD/YYYY]	249.19
Trevor Vogt Vid   House #   5603   Street Addres   City   Erie	Zauneggar Street  State PA  rbon and Brew  State PA  State PA  State State	Code 16509  Zip Code 16509	Description of Expenditure  Campaign Video  Date [MM/DD/YYYY]  11/08/2019  Description of Expenditure  Poll Watcher's Dinner  Date [MM/DD/YYYY]  S  Description of Expenditure	249.19

# Statement of Expenditures

Filer Identification Number: 36-4759048		

To Whom Paid	D 11 D1 D					Date [MM/DD/YYYY] \$	
age (d) (d) (d) In Canada (d) (d)	Doubl D's Restaura	nτ				11/15/2019	143.95
House #	Street Address Ri	27				Description of Expenditure	
<b>City</b> Garland		State	PA	Zip Code	16416	Poll Worker's Dinner	
To Whom Paid	The Brewerie					Date [MM/DD/YYYY] \$	123.25
		<del>:</del>				11/13/2019	
House # 123	Street Address W	est 14th St	reet			Description of Expenditure	
City Erie		State	PA	Zip Code	16501	Poll Worker's Dinner	
To Whom Paid	Personalization Mail					Date [MM/DD/YYYY] \$ 366.03	
						11/12/2019	
House # 51	Street Address Sh	ore Drive				Description of Expenditure	
City Burr Ridge		State	IL	Zip Code	60527	Campaign Poll Handouts	
To Whom Paid						Date [MM/DD/YYYY] \$	
House #	Street Address	· '	· · · · · · · · · · · · · · · · · · ·			Description of Expenditure	II
City		State		Zip Code			The second secon
To Whom Paid						Date [MM/DD/YYYY] \$	
House #	Street Address					Description of Expenditure	
City	<b>1</b>	State		Zip Code			
To Whom Paid		,				Date [MM/DD/YYYY] \$	
House #	Street Address					Description of Expenditure	
City		State	• • • • • • • • • • • • • • • • • • • •	Zip Code			3.1
To Whom Pald					,	Date [MM/DD/YYYY] \$	
House #	Street Address			· · · · · ·	· · · · · · · · · · · · · · · · · · ·	Description of Expenditure	
City		State		Zip Code			
To Whom Paid						Date [MM/DD/YYYY] \$	
House #	Street Address		······································			Description of Expenditure	l
City	Te- 9-22 State Today	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.

	 _	• • • • • • • • • • • • • • • • • • • •
Filer Identification Number: 36-4759048		

Name of Creditor			· · · · · · · · · · · · · · · · · · ·	Outstanding Balance of Debt
House #	Street Address	5 / 1 (1) / 4 (1) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	TE DEBT INCURRED [MM/DD/YYYY]	\$
City		State	Zip Code	
Description of Debt		1000 0000 0000 001	Englesses and a	Park
Name of Creditor				Outstanding Balance of Debt
House #	Street Address	1: 45 : 35 pay 60	TE DEBT INCURRED [MM/DD/YYYY]	
City		State	Zip Code	
Description of Debt				
Name of Creditor				Outstanding Balance of Debt
House #	Street Address		re debt incurred [mm/dd/vyyy]	<b>\$</b> .
City	A CONTRACTOR OF THE CONTRACTOR			
		State	Zip Code	
Description of Debt		State		
		State		Outstanding Balance of Debt
Description of Debt	Street Address	, pa		Outstanding Balance of Debt \$
Description of Debt Name of Creditor	Street Address	, pa	Code TE DEBT INCURRED	Established Section of Albania S