

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

THE STATE OF STREET		(10	OLC. I					i legible.	. IL SILO		· ·			·	
Filer Identification Number		3-4364563		Repo	ort Filed I rk X)	ву	Candida	ite		Comm	ittee			Lobbyist	
Name of Filing Commi Lobbyist	ttee, Ca	ndidate c	or /	Frienc	Friends to Elect Lori Pickens										
Street Address				1331	W. 25th S	treet									
City	Erie						State	PA		Zip Co	de	16502			
Type of Report (Place :	k under	report typ	oe)												
	^d Friday rimary	3- 30 Da Primary		1 2 2 2 2 2 2 2	Tuesday lection	100 0000	d Friday Election	6- 30 Da Election		7- Ann	iual	Specia Pre-Ele	l 2 nd Friday ection	Special 30 Day Post-Election	
			1	Γ		Γ			<u> </u>		<u> </u>		1		1 (G)
Date Of Election (MM/DD/YYYY)		11/04/	2019	Year			2019	Amenda Report	 ment		<u>] </u>	Termir Report	The second second		
Summary of Receipts : Expenditures	and	From D	<u> </u>		To Date	·					For	Office U	se Only		
A. Amount Brought Fo	rward F	l ' .	0/2019 Repor	\$		/04/20			<u> </u>						
B. Total Monetary Cor (From Schedule I)	itributio	ns and Re	eceipts	\$	- :	1106.7 1160.0							Ś	2019 DEC	
C. Total Funds Availab	effect to a contract of			\$		2266.7	6	1 A							
(Sum of Lines A and B) D. Total Expenditures (From Schedule III)				\$		1275.1								ပ်	
E. Ending Cash Balance (Subtract Line D from				\$		991.58	3 .		٠					TE CO	
F. Value of In-Kind Cor (From Schedule II)			/ed	\$		0								<u></u>	·
G. Unpaid Debts and C (From Schedule IV)	bligatio	ns		\$		0			i.				age €-suk		
Part 1- If this is a Commit	tee repor	t. treasure	r sian h	ara Ifth	vic car Can	didate	ffidavit Sec	tion	In horo			· · · · · ·	· .	· · · · · · · · · · · · · · · · · · ·	
I swear (or affirm) that th	is report,	including t	he atta	ched scl	nediiles or	ı papeı	, isuto the I	best of my	knowled	lge and be	elief,tr	ue, correc	ct and comple	te.	
Sworn to and subscribed I	C pefore m	e this 20	9		-Notar Public	ires April 3, 202 ber 1288912	on of No	Du	S) C		$\left(\cdot \right)$	9-			
Jorgo Signati	gon,	and	2h	.		ires Ap	ssociati	Ami	gneture	of Person 	16	itting rep	ort		
My Commission expires	MO.	3-23 BAY	YR.	_	ealth of Pennsy Fernandez, Erie Cou	mission expir mission num	≥ —	USUG rea Code	ر	-	8	14-8	12-19 phone Number	<u>a</u> 1	
Part II- If this is a report of I swear (or affirm) that to amended.	a Candio	late's Auth of my knov	orized vledge a	Commit and beli	e Endi	¢ξtξs	fell sign he	ere. nas not vio	lated any	/ provisio	ns of t	he Act of	June 3, 1937 (P.L. 1333, NO.320)	as
Sworn to and subscribed b	efore me	this	_		Con		₩	$\overline{}$							
5 day of	00	20	19		1			T)00	<u>, </u>	1		1			
Signatu	O	Ma	na	8	.		<u></u>	· <u> </u>	601	ature of O 7 Printed N	4_	iate //	Kens		
My Commission expires	11-2-13						Ar	\$/ 4 rea Code		· . –	S Dayti	8/-C	1172 hone Number		
ommonwealth of Pennsyl	/ania - N	otary Seal	1												

Tonia Fernandez, Notary Public
Erie County
My commission expires April 3, 2023
Commission number 1288912

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 N					
	83-436456	3		<u> </u>	
					Amount
Full Name of Cont	ributing	· · · · · · · · · · · · · · · · · · ·		Date [MM/DD/YYYY]	\$
Committee					
House #	Street Address			Date [MM/DD/YYYY]	\$
				<u> </u>	
City		Cédes	Telephone Telephone	To a see Imp Innuncia	
		State	Zip Code	Date [MM/DD/YYYY]	\$
Full Name of Conti	-: L				
Committee	Ibuting			Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
City	ALC	State	Zip Code	Date [MM/DD/YYYY]	\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
				Pare Dinay set 1111	<u> </u>
Full Name of Contr	ributing			Date [MM/DD/YYYY]	<u> </u>
Committee				Date [IMMINDD/TTT]	>
			·		
House #	Street Address	•		Date [MM/DD/YYYY]	\$.
City	<u></u>	State	Zip Code	Date [MM/DD/YYYY]	\$.
					[·]
Full Name of Contr	ributing			Date [MM/DD/YYYY]	\$
Committee				THE PROPERTY OF THE PROPERTY O	
House #	Street Address			Date [MM/DD/YYYY]	\$
				. T. TOTT *CTT. 18 T. T. F. T. A. T. V. F	
City		State	7:- Cada	Data Francisco (non transista de la contracta	·
City		State	Zip Code	Date [MM/DD/YYYY]	P :
					. <u></u>
Full Name of Contr Committee	ibuting	· · ·		Date [MM/DD/YYYY]	>
Committee				"	<u> </u>
House #	Street Address			Date [MM/DD/YYYY] \$	5
			•		
City		State	Zip Code	Data India (DD MANA)	
City		State	Zip Coue	Date [MM/DD/YYYY] \$	` .
Full Name of Contri	the salt come			The state to book a	
Committee	buting			Date [MM/DD/YYYY] \$;
House #	Street Address			= tees in a board d	
nouse #	Street Address			Date [MM/DD/YYYY] \$	
				December 2017 1985	
City		State	Zip Code	Date [MM/DD/YYYY] \$	
<u> </u>		1.00			

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			· · · · · · · · · · · · · · · · · · ·		
	83-4364563			<u></u>	
			п -		
Full Name of Contributing Co	mmittee			Date [MM/DD/YYYY]	
House #	Street Address		 	Date [MM/DD/YYYY]	\$.
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Full Name of		1.12 (0.141.2)		Date [MM/DD/YYYY]	\$ 3 T
Contributing Co		·		Company and the same	
House #	Street Address	.		Date [MM/DD/YYYY]	\$
City	<u> </u>	State	Zip Code	Date [MM/DD/YYYY]	\$
				10 190 1000 and 10 180 180 180 and 18	
Full Name of		and the second of	The second secon	Date [MM/DD/YYYY]	\$
Contributing Cor					1 (A) 133
House #	Street Address			Date [MM/DD/YYYY]	\$
City		State	Zîp Code	Date [MM/DD/YYYY]	
Full Name of	V/K	[Date [MM/DD/YYYY]	.
Contributing Cor	nmittee	·		Spain Mint power in it.	
House #	Street Address			Date [MM/DD/YYYY]	5
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Full Name of Contributing Con				Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	S
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Full Name of	12 × 744				
Contributing Con	nmittee			Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
					1.00 1.00 2.00 2.00
City	•	State	Zip Code	Date [MM/DD/YYYY]	\$
		1			

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 Number:

	83-4364563			
Full Name	Friends to Elect Lori picke			
House #	Street Address 1331 W. 251	h Street		,
City	Erie	State PA	Zip Code 16502	Date [MM/DD/YYYY] \$ 20.00
Receipt Description	Cash withdrawn on 6/19	for Erie Dems event. N	o attendance to event , funds	returned & deposited to Bank on 6/29
Full Name				
House #	Street Address	·		
City		State	Zip	Date [MM/DD/YYYY] \$
	- 이 명 (소)		Code	
Receipt Description			All City of the Control of the Contr	
Full Name		***		
House #	Street Address			
City		State	Zip	Date [MM/DD/YYYY] \$
			Code	
Receipt Description			Total Control	
Full Name				
House #	Street Address		·	
City		State	Zip	Date [MM/DD/YYYY] \$
	(4.1) (4.1)		Code	
Receipt Description			1	
Full Name		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	170 Hand
House #	Street Address			
City	<u> </u>	State	Zip	Date [MM/DD/YYYY] \$
and the second of the second s			Code	
Receipt Description		— 1 		
Full Name				
	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description				

SCHEDULE II PART F

In-Kind Contributions Received

VALUE OF \$50.01 TO \$250

Filer Identification Number:			-	****			Э
[함전 : 공화회원 : [경우 : 기반 : 10 10 10 10 10 10 10 10 10 10 10 10 10	83-4364563						
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	·						ائے
4							
Elifonica de la companio del companio de la companio del companio de la companio della companio de la companio della companio					 	 	

Full Name of Contribu	.42.0			Tracio de se almo honno	15.2-4
Full lyaine of contribu	tor			Date [MM/DD/YYYY]	\$
			•		
House #	Alexandra (1945)			In m hannari	
House #	Street Address		· '	Date [MM/DD/YYYY]	<u> </u> \$
City	[26] + 6[] [2.1] [2.1] [2.1]	Tierra	There was a series of	- Z In p honori	
City		State	Zip Code	Date [MM/DD/YYYY]	\$
		1373			
Description of Contrib	oution		<u> [15 </u>		1.64.1
					•
Full Name of Contribu	itor			Date [MM/DD/YYYY]	\$
			·	Parc Summing - 1 - 1 - 1 - 1 - 1 - 1	4301
			!		
House #	Street Address			Date [MM/DD/YYYY]	\$
			'	2,447 Lawrence - 1 annual -	
City		State	Zip Code	Date [MM/DD/YYYY]	\$
				TOTAL BOOK (SET YES TO BESTER)	<u>-</u> 1√√1
Description of Contrib	ution				
della Collega della dell	THE PARTY WAS A STATE OF THE ST				
Full Name of Contribut	tor		!	Date [MM/DD/YYYY]	\$
20 ± 20 30 31 32 31 31 31 31 31 31 31 31 31 31 31 31 31	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		 !		
House #	Street Address			Date [MM/DD/YYYY]	\$
			. 1		134
City		1-2-1-	1-2-1-1-1		[37]
City		State	Zip Code	Date [MM/DD/YYYY]	\$
[244]	· · ·	(a) [4]	Para militar	,	[6]
Description of Contribu	ution		——————————————————————————————————————	<u> </u>	13.4.71
				<u> </u>	
Full Name of Contribut	tor			Date [MM/DD/YYYY]	\$
	# N				[[]]
	No. 1 to 1			1	
House #	Street Address			Date [MM/DD/YYYY]	\$
			Γ		1.34
	<u>13 22 37 - 91 - 1</u>	 			
City	1	State	Zip Code	Date [MM/DD/YYYY]	\$
200	.1	reagil I	100 100 100		
Description of Contribu	ution				
alle of sales of the sales of the		l	·		
Full Name of Contribut	tor			Date [MM/DD/YYYY]	\$
	4,4		ļ	The state of the s	131
				1	
House #	Street Address			Date [MM/DD/YYYY]	\$
			. †		
A STATE OF THE STA)	ı	163
City		State	Zip Code	Date [MM/DD/YYYY]	\$
]	Trinks Trinks			·
Description of Contribu		/			
Description of Contract	Ition	ı			٠.
1827 A. C.					

Statement of Expenditures

			 - 7	 		
Filer Identification Number:	• •	-		 	كنسسنة	
rver ineutrification (antipet)						
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To Whom Paid			-:			Date [MM/DD/YYYY]	Š	-		
	Tipsy Bean				•	10/31/2019		100.00		
House #	Street Address					Description of Expend	iture			
		.425 Peach :	Street							
City Erie		State	PA	Zip Code	16502	Coffee Shop Event				
To Whom Paid	Tracy Sargent	<u>-</u>				Date [MM/DD/YYYY]	\$.			
	riacy Sargent		•			09/21/2019				
House #	Street Address	728 Plum St	root			Description of Expenditure				
in the second			1	l to the second						
City Erie		State	PA	Zip Code	16502	Musician				
To Whom Paid						Date [MM/DD/YYYY]	\$			
	Ivies on the Lake					10/25/2019		75.00		
House #	Street Address	.O box 1069	2/1			Description of Expendi	ture			
eria.	* P. A. C. A. S		/ 1	liter in the second						
City Erie		State	PA	Zip Code	16514	Campaign Ad for Event				
To Whom Paid						Date [MM/DD/YYYY]	\$			
	Pink Carpet Affair	. :				10/04/2019	yi7	100.00		
House #	Street Address	.O Box 1069	94			Description of Expendi	ture			
City Erie		State	PA	Zip Code ¹	16514	Pink Carpet Affair-Campaig	n Ad			
To Whom Paid		- 	.1		W++-	Date [MM/DD/YYYY] \$				
	OTC Brands	•				10/15/2019		68.88		
House #	Street Address 4	206 S. 108tl	n Street		<u> </u>	Description of Expendi	ure			
City Omaha		State	NE	Zip Code	8137	Pick Pickens Pencils	<u> </u>	<u> 1917 - Grande Grander (d. 1918), anno a c</u>		
To Whom Paid	1	j	1-:		•	Date [MM/DD/YYYY]	\$			
	Silk Screen Unlimited	i				10/25/2019		42.00		
House #	Street Address 1	702 W. 8th	Street			Description of Expendit	ure			
City Erie		State	PA	Zip Code ¹	16505	Pick Pickens T-shirts				
To Whom Paid			•			Date [MM/DD/YYYY]	\$			
	Whole Foods Co OP					10/28/2019	100	21.18		
House #	Street Address	l341 W. 26t	h Street			Description of Expendit	ure			
City Erie		State	РА	Zip Code ¹	.6508	Cupcakes for Tipsy Bean Ev	ent	ji najaku na kumbang 1 Autap 63		
To Whom Paid				, land		Date [MM/DD/YYYY]	\$	·		
	Silk Screen Unlimited	I				08/20/2019		103.20		
House #	Ise # Street Address 1702 W 8th Street					08/20/2019 Description of Expenditure				
City Erie		State	PA	Zip	.6505	Pick Pickens T-shirts	<u> </u>	<u>ala area trenare e el 1900 filologo (19</u> Transport		

PENNSYLVANIA CAMPAIGN FINANCE REPORT

This Report must be typed or printed legibly in blue or black ink.

INSTRUCTIONS

This form is intended for the use of candidates, political committees and contributing lobbyists who are required to disclose contributions and expenditures. Candidates must file separate reports when they make expenditures or receive contributions on their own behalf and separate from their campaign committee. A candidate's report discloses contributions received and expenditures made individually by the candidate. A contributing lobbyist's report discloses only expenditures the lobbyist personally made to influence the outcome of a candidate's election.

Candidates and their authorized political committees file reports in the office whore their nomination documents are filed. If the candidate's reports are filed with the Secretary of the Commonwealth, a copy of the reports filed by the candidate and the authorized committee must be filed with the County Board of Elections in the county in which the candidate resides.

REPORT COVER PAGE

The Report Cover Page Identifies the filer, the type of report and what reporting period is covered. It also summarizes the detailed contribution and expenditure sections from the body of the report.

Filer Identification Number - This number is assigned by the Bureau of Commissions, Elections and Legislation to candidates and committees who register and file with the Secretary of the Commonwealth. A candidate's filer identification number is assigned by the Bureau when the candidate files nomination petitions. A political committee or lobbyist filer identification number is assigned when the committee or lobbyist files registration documents in the Bureau.

Report Filed By - Please indicate which type of filer you are by checking the appropriate box on the cover page.

Name of Filing Committee, Candidate or Lobbyist, Street Address, City, State, Zip Code - Please enter appropriate name and address.

Type of Report - Please place an "X" by the applicable report type.

Amendment Report - Check "Yes" only if the report is being filled to correct, add to, or in some way change a report that has already been filled.

Termination Report - Check "Yea" only if the filer has no cash balance; no unpaid debts or obligations, and wishes to sease operation. Contributing lobbyists may file a termination report if they do not anticipate making further contributions to influence the outcome of a candidate's election.

Filing Method - Indicate whether the complete report is filed on paper, or if the report is filed by diskette accompanied by the signed and notarized cover sheet.

Name of Office Sought - If filed by a candidate or candidate's committee, indicate office sought.

Date of Election - If this is a pre- or post-primary/election report, indicate the date of the primary or election,

District Number - If filed by a candidate or candidate's committee, indicate district in which candidate is seeking office.

Office Code, Party Code and County Code - If filed by candidate or candidate's committee, refer to code charts at the back of this report form. Enter the corresponding code letters for the office abught and the political party of the candidate; enter the corresponding code number for the county of residence of the candidate. Candidates for local offices who file only with the County Board of Elections should enter Office Code OTH for Other Offices.

Summary of Receipts and Expanditures - Enter the appropriate dates of the reporting period govered.

Amount Brought Forward From Last Report (Item A) - The balance, if any, as of the first day of the reporting period. For committees, it is the amount reported as the ending cash balance on the previous report filed, if any,

Items B through G - See detailed instructions on each corresponding schedule.

Affidavit Section - Must be sworn to by the filer acknowledging the accuracy of the report (Part I). On reports filed by a candidate's authorized committee, the candidate must sign an additional affidavit (Part II).

Page Number - Calculate the total number of pages in the completed report and indicate on top of cover page. Subsequent pages should be numbered consecutively.

Reports Filed on Diskette: The cover page must accompany all filings, including diskette filings. Diskette filings must also meet the technical specifications of the Department. These specifications are available at www.dos.state.pa.us or by contacting the Bureau.

SCHEDULE II

IN-KIND CONTRIBUTIONS RECEIVED

Detailed Summary Page - provides a summary of all in-kind contributions and valuable things received during the reporting period,

Item 1: Unitemized to Kind Contributions Received represents the total value of in-kind contributions of \$50.00 or less, in the aggregate per contributor, received during the reporting period.

Items 2 and 3: Enter the total for each section from the corresponding schodules in the report (Part F and Part G).

Enter the page total on Page 1, Report Cover Page, Item F.

Part F and Part G - Use these Parts to Itemize In-kind contributions from individuals or political committees according to the dollar value of the contribution. The form is designed to list the dates and amounts of as many as three separate in-kind contributions from the same source in one line item. The amount is equal to the current market value of the item or service contributed.

Totals of Parts F and G should be transferred to the appropriate section on the Schedule II Detailed Summary Page.

SCHEDULE IV

STATEMENT OF UNPAID DEBTS

All unpaid debts and obligations which are outstanding at the end of the reporting period must be reported. If a debt is incurred in one reporting period and not repaid, every report filed must continue to show the outstanding debt, even though there was no activity during the current reporting period.

A debt owed to an individual may be forgiven. A copy of the letter of forgiveness from the individual to the committee must accompany the report filed by the committee in the reporting period in which the debt was forgiven. A debt that is forgiven is considered a contribution to the committee. Such contributions from corporations or unincorporated associations are prohibited by the Election Code.

Statement of Expenditures

Filer Identification Number:	_	-			***	 		
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	83-4364563							
Transport of the second second of the fill of				•				
			 				· ·	

To Whom Paid						Date [MM/DD/YYYY]	\$	
	Oasis Market					09/21/2019		10.00
House #	Street Address 91	14 State Str	reet			Description of Expend	iture	
City Erie		State	PA	Zip Code	16501	Extra drinks during event	<u> </u>	The Market State of the Control of t
To Whom Paid	Oasis Market			<u> </u>		Date [MM/DD/YYYY]	\$	
	<u> </u>				·	09/21/2019]:_	100.00
House #	Street Address 91	14 State Str	reet			Description of Expendi	ture	
City Erie		State	PA	Zip Code	16501	Event Venue		<u> 2000 - Die Gregoria de La Companya de La Companya</u>
To Whom Paid						Date [MM/DD/YYYY]	\$	
	Walmart		·			09/20/2019	1	13.73
House #	Street Address 21	11 Elm Stree	et	· · · · · · · · · · · · · · · · · · ·		Description of Expendi	ture	
City Erie		State	PA	Zip Code	16504	LiL Smokies , party supplies	<u></u>	All the state of the second section is a second
To Whom Paid	City Co. Serve Hallimite of		-			Date [MM/DD/YYYY]	\$	
	Silk Screen Unlimited					09/20/2019	13.	72.00
House #	Street Address 17	702 W. 8th S	Street			Description of Expendit	ture	
City Erie		State	PA	Zip Code	16505	Pick Pickens T-shirts	<u> </u>	
To Whom Paid	OTC Brands					Date [MM/DD/YYYY]	\$	
		<u> </u>	·			07/18/2019	1	87.49
House #	Street Address 420	206 S 108th :	Street			Description of Expendit	ture	
City Omaha		State	NE	Zip Code	68137	Pick Pickens Buttons		<u> Artini Argentino e e e e e e e e e e e e e e e e e e e</u>
To Whom Paid	St					Date [MM/DD/YYYY]	\$	
	Plymouth Tavern	·				11/07/2019		346.70
House #	Street Address	.09 State Str	reet			Description of Expendit	lure	
City Erle		State	PA	Zip Code	16501	Watch Party, food, drinks		<u> </u>
To Whom Paid		-				Date [MM/DD/YYYY]	\$	
	Tracy Sargent				a.	11/04/2019	ĺš,	50.00
House #	Street Address 72	28 Plum Stre	reet	<u> </u>		Description of Expendit	ure	
City	A STATE OF THE STA	State		Zip			<u> </u>	
Erie		3,70	PA	Code	16502	Musician		
To Whom Paid	Erie Federal Credit Uni	ion				Date [MM/DD/YYYY]	\$	15.00
House #	الموسولة الأعاد والما	.				06/04/2019		15.00
nouse #	Street Address	05 Greenga	arden Rd			Description of Expendit	ure	
City	<u> </u>	State		Zip	Т —	The state of the s	<u></u>	<u>a Maraghin San Saa Na Jada k</u> Ta
Erie			PA	Code	16505	Fee for printing Statement		

Statement of Expenditures

			-		
Filer Identification Number:		 		 	
The identification Number:					
	83-4364563				
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To Whom Paid				Date Issue Individual Table
	ATM Cash Withdraw	l/Erie Federal Credit Un	ion	Date [MM/DD/YYYY]
House #	Street Address			Description of Expenditure
	2	436 Buffalo Rd		Description of Experience
City Erie		State PA	Zip Code 16510	Erie Dems event (later reimbursed didn't attend)
To Whom Paid	:			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
City		State	Zip	
To Whom Paid	1	Park at a	Code	
i o whom Pald				Date [MM/DD/YYYY] \$
House #	Street Address			Description of Expenditure
City	1 1 1 1 1 1 1	State	Zip	
			Code	
To Whom Paid				Date [MM/DD/YYYY] \$
		·		
House #	Street Address			Description of Expenditure
City	-	State	Zip	
Tabilita Dist	1	1	Code	
To Whom Paid				Date [MM/DD/YYYY] \$
House #	Street Address			Description of Expenditure
		T 2		
City		State	Zip Code	
To Whom Paid				Date [MM/DD/YYYY] \$
House #	Street Address			Description of Expenditure
City		Para		
S A		State	Zip Code	
To Whom Paid				Date [MM/DD/YYYY] \$
				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
House #	Street Address			Description of Expenditure
	Jane (194			
City		State	Zip	·
		1.6 %	Code	<u> </u>