CAMPAIGN FINANCE STATEMENT

File this in lieu of a full report *only if* aggregate receipts, expenditures, or liabilities incurred each <u>did not exceed \$250.00</u> during the reporting period.

ILER IDENTIFICATION							
UMBER		ON BEHALF O		IDIDATE 1	СОММІТТЕ	2.	LOBBYIST
AME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST CARLA J. DEL FUOCO							
TREET ADDRESS 3036 GONFREY PLA							
TALLAHASSEE, 1		STATE FL		l l	12309	9 —	_
TYPE OF REPORT (CHECK ONE) NAME OF OFFICE SOUGHT BY CANDIDA FRIRVIEW SCHU BOAR	OL (PA)	DISTRIC	T NO. PA	RTY	MO.	DAY	
6TH TUESDAY PRE-PRIMARY MO. DAY	YEAR MO		YEAR	*	FOR	OFFICE U	
2ND FRIDAY PRE-PRIMARY 2. DATES OF REPORTING PERIOD 12 31	20 10 12	3/	21				
30 DAY POST-PRIMARY CASH BALANCE AT ENI		\$ 27	ケッく	-	VOTE	. _	Ш
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30 DAY POST-ELECTION 6, AMENDMENT REPORT?	YES NO	o			ATIO	22	7
ANNUAL 7. TERMINATION REPORT?	YES N	0			2		
	AFFIDAV	IT SECT	ION				
ART I - statement is filed on behalf of a <u>Political Comm</u> statement is filed on behalf of a <u>Candidate</u> , the statement is filed on behalf of a <u>Contributing L</u> e	Candidate m	ust sign h	iere.	_	reasurer m	ust sigr	n here.
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