

## Commonwealth of Pennsylvania - Campaign Finance Report

(Note: This report must be clear and legible. It should be typed)																
Filer Identification	on 92	-2278547		ort i ark )	Filed B ()	y C	andida	ite			Committe	e	X	Lobb	yist	
Name of Filing Committee, Candidate or Lobbyist			Committee To Elect Cody Foust													
Street Address			520	4 Lau	ırelwo	od Ct.					-			****	·	
City	Erie		1			S	tate	PA			Zip Code	16506				
Type of Report (	Place x under i	report type)														
1- 6 <sup>th</sup> Tuesday	2- 2 <sup>nd</sup> Friday	3- 30 Day Post	4-6	h Tue	sday	5- 2 <sup>nd</sup> f	riday	6- 3	) Day P	ost	7- Annual	Special 2	<sup>nd</sup> Friday	Spec	ial 30 (	Эау
	Pre-Primary	Primary	1	Elect		Pre- El	_	Elec	tion			Pre-Elec	tion	Post-	Election	on
							<u>]                                    </u>				X					
Date Of Election			Yea	ľ		202	22		endmen	t		Termina	tion	1		
(MM/DD/YYYY)						202		Rep	ort		L	Report	esting.	~>		
Summary of Rec	eipts and	From Date		To	o Date						Fo	r Office Use	~	2		
Expenditures		12/3172023	-			2/3+/2 3172024										
A. Amount Brou	<del></del>	· · · · · · · · · · · · · · · · · · ·		\$	3	3917.26								25		
B. Total Moneta	•	ns and Receipts	;	\$		0							Carried Services	~~(J		
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C. Total Funds Av (Sum of Lines A		•		\$	3	917.26		I					And the second s	PM ID: 32		
D. Total Expendi				\$				ł					arren etal	$\sim$		
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E. Ending Cash B				\$	-	3917.26		I								
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G. Unpaid Debts	-	ากร		\$			.,	ł								
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Part II- If this is a re	port of a Candi	date's Authorized	Comr	nifie	e. cañd	idate Xha	II sign h	ere.								
I swear (or affirm) t amended.	that to the best	of my knowledge	and b	elief	his <b>F</b> ol	itical con	nmittee	has no	t violate	d any	provisions o	f the Act of Ju	ine 3, 1937	(P.L. 13	33, NO.:	320) as
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				on of	mber 2550	PNO										

#### SCHEDULE I

## **Contributions and Receipts**

**Detailed Summary Page** 

Filer Identification Number		
	92-2278547	

1.Unitemized Contributions and Receipts-\$50.00 or Less per Contributor	
Total for the reporting period (1)	\$ 0
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)	
Contributions Received from Political Committees (Part A)	\$ 0
All Other Contributions (Part B)	\$ 0
Total for the reporting period (2)	\$ 0 .
3. Contributions Over \$250.00 (From Part C and Part D)	
Contributions Received from Political Committees (Part C)	\$ o
All Other Contributions (Part D)	\$ 0
Total for the reporting period (3)	\$ 0
4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)	
Total for the reporting period (4)	\$ 0
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, Report Cover Page, Item B)	\$ 0

#### 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.

Date [MM/DD/YYYY] S  Ill Name of Contributing  Date [MM/DD/YYYY] S	rier identification (vo	- 100 1900 1900 1900 1900				
in mittee  Date [MM/DD/YYYY] S  State   Zip Code   Date [MM/DD/YYYY] S	T2(1 A)	L. at.				
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	1 NO 1					
	City	1: 5	** I	Zip Code	Date [MM/DD/YYYY]	1,5
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#### **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.)

Filer (dentification	on Number:			
i digular propriation (1973), se	(1986) (1986) (1986) (1986) (1986) (1986) (1986) (1986) (1986) (1986) (1986) (1986) (1986) (1986) (1986) (1986)			
Full Name of C	ontributor			Date [MM/DD/YYYY] \$
House #	Street Address			Date [MM/DD/YYYY] \$
City		State	Zip Code	Date [MM/DD/YYYY] \$
Full Name of C	ontributor		The second second	Date [MM/DD/YYYY] \$
House #	Street Address			Date [MM/DD/YYYY] \$
City	[변화 전 <u>시설</u> ] - 제 1 현행	State	Zip Code	Date [MM/DD/YYYY] \$
Full Name of Co	ontributor			Date [MM/DD/YYYY] \$
House #	Street Address			Date [MM/DD/YYYY] \$
City	The second are a consequences of	State	Zip Code	Date [MM/DD/YYYY] \$
Full Name of Co				Date [MM/DD/YYYY] \$
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City		State	Zip Gode	Date [MM/DD/YYYY] \$
Full Name of Co				Date [MM/DD/YYYY] \$
House #	Street Address			Date [MM/DD/YYYY] \$
City		State	Zip Code	Date [MM/DD/YYYY] \$
Full Name of Co				Date [MM/DD/YYYY] \$
House #	Street Address			Date [MM/DD/YYYY] \$
City		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.

Filer Identificati	on Number:				
<b>建筑企业公司</b>					
Full Name of Contributing C	ommittee			Date [MM/DD/YYYY] \$	
House #	Street Addres	s\$		Date [MM/DD/YYYY] \$	
City		State	Zip Code	Date [MM/DD/YYYY] \$	
Full Name of Contributing C	ommittee			Date [MM/DD/YYYY] \$	
House #	Street Addres		<u> </u>	Date [MM/DD/YYYY] \$	
City		State	Zip Code	Date [MM/DD/YYYY] 5	
Full Name of Contributing C	ommittee	<u>  1921   1924   11</u>	[本既於至675年之命]	Date [MM/DD/YYYY]	
House #	Street Addres	\$ <b>5</b>		Date [MM/DD/YYYY] \$	
City		State	Zip Code	Date [MM/DD/YYYY] \$	
Full Name of Contributing C	ommittee			Date [MM/DD/YYYY] \$	
House #	Street Addres	S A		Date [MM/DD/YYYY] \$	
City	The of all the control of the contro	State	Zip Code	Date [MM/DD/YYYY] \$	
Full Name of Contributing Co	ommittee		"	Date [MM/DD/YYYY] \$	
House #	Street Addres	S		Date [MM/DD/YYYY] \$	
City		State	Zip Code	Date [MM/DD/YYYY] S	
Full Name of Contributing Co				Date [MM/DD/YYYY] \$	
House #	Street Addres			Date [MM/DD/YYYY] \$	
City		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 Identification Number:

Full Name of Contributor			Date [MM/DD/YYYY] \$
House # Street Address			Date [MM/DD/YYYY] \$
City	State	Zip Code	Date [MM/DD/YYYY] \$
Employer Name	[, 弘光]新本作]	halada (Section 2)	Occupation
Employer Mailing Address / Principal Place of Business			
Full Name of Contributor			Date [MM/DD/YYYY] \$
House # Street Address	111111		Date [MM/DD/YYYY] \$
City	State	Zip Code	Date [MM/DD/YYYY] \$
Employer Name			Occupation
Employer Mailing Address /			
Principal Place of Business			
Full Name of Contributor (			Date [MM/DD/YYYY] \$
House # Street Address	<u>.</u>		Date [MM/DD/YYYY] \$
City	State	Zip Code	Date [MM/DD/YYYY] \$
Employer Name		24人業務的發展的	Occupation
Employer Mailing Address /			
Principal Place of Business			
Full Name of Contributor			Date [MM/DD/YYYY] \$
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House # Street Address			Date [MM/DD/YYYY] \$
City	State	Zip Code	Date [MM/DD/YYYY] \$
92 (5.1) (4.4) (5.2) (5.	1000		
Employer Name			Occupation
Employer Mailing Address / 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.

Full Name		<u>.</u> .		
House #	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description			Code	400 d 400 d
Full Name		· · · · · · · · · · · · · · · · · · ·		
House #	Street Address			
City		State	Zip	Date [MM/DD/YYYY] \$
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Full Name				
House # City	Street Address	Lways Green	Name of the Property of the Pr	No. of the second second second second
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Full Name				
House #	Street Address	<del></del>		
City		State	Zip : Code	Date [MM/DD/YYYY] \$
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Full Name				
House #	Street Address			
City		State	Zip	Date [MM/DD/YYYY] \$
			Code	
Receipt Description				15.00
Full Name		•		
House #	Street Address			
City		State	Zip Code	The state of the participation of the state
Receipt Description		<u>  124   2 - 44                                   </u>	Cyclin and old old	[87]
House #	Street Address	State		Date [MM/DD/YYYY] \$

#### **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:			
1. UNITEMIZED IN-KIND CONTRI	BUTIONS RECEIVED-VA	LUE OF \$50,00 OR LESS PER COI	NTRIBUTOR
TOTAL for the reporting period	(1)	\$	
2. IN-KIND CONTRIBUTIONS REC	EIVED-VALUE OF \$50.0	1 TO \$250.00 (FROM PART F)	
TOTAL for the reporting period	(2)	\$	
3. IN-KIND CONTRIBUTION RECE	IVED-VALUE OVER \$25	0.00 (FROM PART G)	
TOTAL for the reporting period	(3)	\$	
TOTAL VALUE OF IN-KIND CONTRIBUTIO PERIOD (Add and enter amount totals fr on Page 1, Report Cover Page, Item F)		1 '	

## SCHEDULE II PART F

## **In-Kind Contributions Received**

VALUE OF \$50.01 TO \$250

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Description of Contribution	{	[일하다] 원칙 기계		<u> </u>
Full Name of Contributor			Date [MM/DD/YYYY]	\$
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House # Street Address			Date [MM/DD/YYYY]	S
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House # Street Address			Date [MM/DD/YYYY]	\$
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			Date [WINDD/1111]	\$
House # Street Address			Date [MM/DD/YYYY]	\$
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City	State	Zip Code	Date [MM/DD/YYYY]	\$
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Full Name of Contributor			Date [MM/DD/YYYY]	\$
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House # Street Address			Date [MM/DD/YYYY]	S
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Description of Contribution				
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## SCHEDULE II Part G

## **In-Kind Contributions Received**

VALUE OVER \$250

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	- 200 Mar - 20 <u>年 2</u> 2127 5 日			Domestic design of the angle of the second control of the second	_
Full Name of Cont	ributor			Date [MM/DD/YYYY] \$	
House #	Street Address			Date [MM/DD/YYYY] \$	
A REPORT OF THE SECOND OF THE	「大き数では 報酬金の数す			Pare Tomo, BALTER AT	
City	<del></del> _	State	Zip Code	Date [MM/DD/YYYY] \$	_
Employer Name	32.880.25 5 CM		1	Occupation	
	<b>对如果对对</b>				
	Address / Principal			Description	
Place of Business	<b>对外发展的复数形</b> 型	,75 33.		of	
				Contribution	
Full Name of Cont	ibutor		- <del>-</del> -	Date [MM/DD/YYYY] \$	_
House #	Street Address			Date [MM/DD/YYYY] \$	
	Sileer Audiess			Date Halland Day 1 Tr. 11	
		- · · · · · · · · · · · · · · · · · · ·			
City		State	Zip Code	Date [MM/DD/YYYY] \$	
Employer Name		(# 102-000) On		Occupation	
化斯里 测量电影					
	Address / Principal	7-5-5 6-5		Description	
Place of Business		(2) (2)		of	
F. A. Galler, Charles and St.		39		Contribution	
Full Name of Conti	ibutor		<del></del>	Date [MM/DD/YYYY] \$	
House #	Street Address			Date [MM/DD/YYYY] \$	
		•	•	Sare Think 86 to 121	
	- [注:[图: 15]			[6, 1-9]	
:City					
<ul> <li>************************************</li></ul>	1000 C 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	State	Zip Code	Date [MM/DD/YYYY] \$	••
新型 (1) 10.55 第2	(2000 to 1 200 to 1 2		Zijo Code	Date [MM/DD/YYYY] \$	-
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Employer Name			Zip Code	Date [MM/DD/YYYY] \$ Occupation	
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Employer Mailing A Place of Business	Address <b>7</b> Principal		Zip Code	Occupation  Description  of Contribution	
Employer Mailing A Place of Business Full Name of Contr	Address <b>7</b> Principal		Zip Code	Occupation Description of	
Employer Mailing A Place of Business Full Name of Contr	Address <b>7</b> Principal		Zip Code	Occupation  Description  of Contribution	
Employer Mailing / Place of Business Full Name of Contr	Address / Principal		Zip Code	Description  Description  of  Contribution  Date [MM/DD/YYYY]	
Employer Mailing A Place of Business Full Name of Contr	Address <b>7</b> Principal		Zip Code	Occupation  Description  of Contribution	
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Employer Mailing And Place of Business  Full Name of Control  House #  City  Employer Name	Address / Principal  ibutor  Street Address	State	Zíp Code	Occupation  Description of Contribution  Date [MM/DD/YYYY]  Date [MM/DD/YYYY]  \$	
Employer Mailing , Place of Business  Full Name of Control  House #  City  Employer Name  Employer Mailing A	Address / Principal	State	Zíp Code	Occupation  Description  of Contribution  Date [MM/DD/YYYY]  Date [MM/DD/YYYY]  Date [MM/DD/YYYY]  Date [MM/DD/YYYY]  Date [MM/DD/YYYY]	
Employer Mailing, Place of Business  Full Name of Contr  House #  City  Employer Name	Address / Principal  ibutor  Street Address	State	Zíp Code	Occupation  Description of Contribution  Date [MM/DD/YYYY]  Date [MM/DD/YYYY]  S  Date [MM/DD/YYYY]  Occupation	

# Statement of Expenditures

Prilita talamenti filancia di Nama del Cara del	 	 $\overline{}$	
Filer Identification Number:			,
, 하하 하시스, 하는 1990년 전에 대한국 (1910년 전 전환) 세			,
[조건(1) - 10 - 10 - 10 - 10 - 10 - 10 - 10 -			,
1975年   利助は対抗の発展を経過される   第二人が開けて 2017年   1911			,
8 - 1. B 3. 14:50 Critica el 7. Gel Chi - 20 201			,
5. 1. 25 1. 15 1. 15 1. 15 1. 15 1. 15 1. 15 1. 15 1. 15 1. 15 1. 15 1. 15 1. 15 1. 15 1. 15 1. 15 1. 15 1. 15			,

To Whom Paic	d			Date [MM/DD/YYYY] \$
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	Street Address			Description of Expenditure
City		State	Zip Code	N. C.
To Whom Paid	100	l make the s		Date [MM/DD/YYYY]
House #	lean saise anguas	<del>u</del>		
	Street Address	<u></u>		Description of Expenditure
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To Whom Paid	1	1	1 2000 (2000)	Date [MM/DD/YYYY] \$
House #	Street Address	1		
	Street Address			Description of Expenditure
City		State	Zip Code	
To Whom Paid	l de la companya de l		The state of the state of	Date [MM/DD/YYYY] \$
House #	Street Address	· T		
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To Whom Paid			Commercial	Date [MM/DD/YYYY] \$
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House #	Street Address			Description of Expenditure
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To Whom Paid				Date [MM/DD/YYYY] \$
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.

Filer Identification	n Number:		
Name of Credito			
House #		Pitriprot Wolled	Outstanding Balance of Debt
170036 #7	Street Address	DATE DEBT INCURF	
		the strength of the strength o	- 15 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C 1 C 1
City		State Zip	
Description of D	Debt	Code	
Name of Credito	or .		Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURE	
		[MM/DD/YYYY]	
City		State Zip	<del> </del>  %
<b>最高级基础</b>		Code	
Description of D	eot		
Name of Credito			
<b>的国际的</b> 类型的工作。			Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURR [MM/DD/YYYY]	ED \$
City	66 Eq. (857)   577   577	State Zip	
Description of D	<u>éht</u>	Code	39. 2.20
Name of Credito	or.		Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURR	ED S
		[MM/DD/YYYY]	
City		State Zip.	
Description of Description		Code	
Pesa Iption of P			
Name of Credito			Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURR	Outstanding Balance of Debt
		[ΜΜ/ΦΟ/ΥΥΥΥ]	
February States			
City		State Zip Code	
Description of De	ebt	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Name of Credito			Outstanding Balance of Debt
House #	Street Address	DATE DEBT INCURR [MM/DD/YYYY]	
		: Claudy PD/34441	<u> 1982年 (1989)</u> - 日本日本 (1989) - 日本日本日本 (1989)
City		State Zíp	
Dareginstan -4 5	New York	Code	8. d 2.
Description of De			
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