

Commonwealth of Pennsylvania - Campaign Finance Report

(Note: This report must be clear and legible. It should be typed)

Filer Identification Number	Report Filed By (Mark X)	Candidate	<input type="checkbox"/>	Committee	<input checked="" type="checkbox"/>	Lobbyist	<input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist		Foust for Controller					
Street Address		4331 Neptune Drive					
City	Erie	State	PA	Zip Code	16506		

Type of Report (Place x under report type)

1- 6 th Tuesday Pre-Primary	2- 2 nd Friday Pre-Primary	3- 30 Day Post Primary	4- 6 th Tuesday Pre- Election	5- 2 nd Friday Pre- Election	6- 30 Day Post Election	7- Annual	Special 2 nd Friday Pre-Election	Special 30 Day Post-Election
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date Of Election (MM/DD/YYYY)		11/07/2023	Year	2024	Amendment Report	<input type="checkbox"/>	Termination Report	<input type="checkbox"/>

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
	01/01/2024	12/31/24	
A. Amount Brought Forward From Last Report	\$	2711.33	<p>2025 JAN 16 AM 11:36</p> <p>ERIE COUNTY</p> <p>VOTER REGISTRATION</p>
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	11901.00	
C. Total Funds Available (Sum of Lines A and B)	\$	14612.43	
D. Total Expenditures (From Schedule III)	\$	5406.69	
E. Ending Cash Balance (Subtract Line D from Line C)	\$	9205.64	
F. Value of In-Kind Contributions Received (From Schedule II)	\$	0.00	
G. Unpaid Debts and Obligations (From Schedule IV)	\$	0.00	

Part I- If this is a **Committee** report, treasurer sign here. If this is a **Candidate** report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules and exhibits, to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this

15 day of January 20 25
 Signature: Lauren E Thayer

My Commission expires 12 20 2028
 MO. DAY YR.

Part II- If this is a report of a **Candidate's Authorized Committee**, candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the Act of June 3, 1937 (P.L. 1333, NO.320) as amended.

Sworn to and subscribed before me this

15 day of January 20 25
 Signature: Lauren E Thayer

My Commission expires 12 20 2028
 MO. DAY YR.

Signature of Person Submitting report
 Sue Ellen Pasquale
 Printed Name

Area Code 440-0343
 Daytime Telephone Number

Signature of Candidate
 Kyle Foust
 Printed Name

Area Code 814
 Daytime Telephone Number 218-3407

Notary Seal
 Commonwealth of Pennsylvania - Notary Public
 Lauren E. Thayer, Notary Public
 Erie County
 My commission expires December 20, 2028
 Commission number 1455865
 Member, Pennsylvania Association of Notaries

SCHEDULE I
Contributions and Receipts
Detailed Summary Page

Filer Identification Number	Foust for Controller		
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1. Unitemized Contributions and Receipts-\$50.00 or Less per Contributor			
Total for the reporting period		(1)	\$ 2006.00

2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)			
Contributions Received from Political Committees (Part A)		\$	200.00
All Other Contributions (Part B)		\$	1095.00
Total for the reporting period		(2)	\$ 1295.00

3. Contributions Over \$250.00 (From Part C and Part D)			
Contributions Received from Political Committees (Part C)		\$	7500.00
All Other Contributions (Part D)		\$	1000.00
Total for the reporting period		(3)	\$ 8500.00

4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)			
Total for the reporting period		(4)	\$ 100.00
Total Monetary Contributions and Receipts during this reporting period <i>(Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B)</i>		\$	11901.00

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.

Filer Identification Number		Foust for Controller									
Amount											
Full Name of Contributing Committee		NFG PAPAC National Fuel Gas						Date [MM/DD/YYYY]	\$	200.00	
								07/01/2024			
House #		Street Address		PO Box 2018				Date [MM/DD/YYYY]	\$		
City	Erie	State		PA	Zip Code		16512	Date [MM/DD/YYYY]	\$		
Full Name of Contributing Committee								Date [MM/DD/YYYY]	\$		
House #		Street Address						Date [MM/DD/YYYY]	\$		
City		State			Zip Code			Date [MM/DD/YYYY]	\$		
Full Name of Contributing Committee								Date [MM/DD/YYYY]	\$		
House #		Street Address						Date [MM/DD/YYYY]	\$		
City		State			Zip Code			Date [MM/DD/YYYY]	\$		
Full Name of Contributing Committee								Date [MM/DD/YYYY]	\$		
House #		Street Address						Date [MM/DD/YYYY]	\$		
City		State			Zip Code			Date [MM/DD/YYYY]	\$		
Full Name of Contributing Committee								Date [MM/DD/YYYY]	\$		
House #		Street Address						Date [MM/DD/YYYY]	\$		
City		State			Zip Code			Date [MM/DD/YYYY]	\$		
Full Name of Contributing Committee								Date [MM/DD/YYYY]	\$		
House #		Street Address						Date [MM/DD/YYYY]	\$		
City		State			Zip Code			Date [MM/DD/YYYY]	\$		
Full Name of Contributing Committee								Date [MM/DD/YYYY]	\$		
House #		Street Address						Date [MM/DD/YYYY]	\$		
City		State			Zip Code			Date [MM/DD/YYYY]	\$		

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 Identification Number:		Foust for Controller									
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Full Name of Contributor		Philip Zaczyk				Date [MM/DD/YYYY]		07/22/2024		\$ 100.00	
House #	9850	Street Address		Jones Road		Date [MM/DD/YYYY]					
City	Erie	State		PA	Zip Code	16510-5402	Date [MM/DD/YYYY]				
Full Name of Contributor		Luigi and Sue Ellen Pasquale				Date [MM/DD/YYYY]		07/22/2024		\$ 100.00	
House #	4331	Street Address		Neptune Drive		Date [MM/DD/YYYY]					
City	Erie	State		PA	Zip Code	16506	Date [MM/DD/YYYY]				
Full Name of Contributor		Russell Warner				Date [MM/DD/YYYY]		08/04/2024		\$ 100.00	
House #	1336	Street Address		Tower Lane		Date [MM/DD/YYYY]					
City	Erie	State		PA	Zip Code	16505	Date [MM/DD/YYYY]				
Full Name of Contributor		Thomas Talarico Esq.				Date [MM/DD/YYYY]		08/16/2024		\$ 250.00	
House #	230	Street Address		West 6th Street		Date [MM/DD/YYYY]					
City	Erie	State		PA	Zip Code	16507	Date [MM/DD/YYYY]				
Full Name of Contributor		Rock Copeland				Date [MM/DD/YYYY]		08/16/2024		\$ 70.00	
House #	1336	Street Address		Patterson Ave		Date [MM/DD/YYYY]					
City	Erie	State		PA	Zip Code	16508-1447	Date [MM/DD/YYYY]				
Full Name of Contributor		David & Liesel Bilenikoff				Date [MM/DD/YYYY]		08/16/2024		\$ 75.00	
House #	41	Street Address		Mechanic Street		Date [MM/DD/YYYY]					
City	Girard	State		PA	Zip Code	16417	Date [MM/DD/YYYY]				

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 Identification Number:	Foust for Controller
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Full Name of Contributor		Eric & Karen Seggi		Date [MM/DD/YYYY]	08/16/2024	\$	100.00
House #	8710	Street Address	Oliver Road	Date [MM/DD/YYYY]		\$	
City	Erie	State	PA	Zip Code	16509	Date [MM/DD/YYYY]	\$
Full Name of Contributor		Joseph & Penny Maloney		Date [MM/DD/YYYY]	08/16/2024	\$	100.00
House #	401	Street Address	Glenruadh	Date [MM/DD/YYYY]		\$	
City	Erie	State	PA	Zip Code	16505-1732	Date [MM/DD/YYYY]	\$
Full Name of Contributor		Kevin & Rebecca Ireson		Date [MM/DD/YYYY]	08/16/2024	\$	100.00
House #	870	Street Address	Hartley Rd	Date [MM/DD/YYYY]		\$	
City	Fairview	State	PA	Zip Code	16145	Date [MM/DD/YYYY]	\$
Full Name of Contributor		Q Gregory Orlando		Date [MM/DD/YYYY]	09/30/2024	\$	100.00
House #	4216	Street Address	Trask Avenue	Date [MM/DD/YYYY]		\$	
City	Erie	State	PA	Zip Code	16508	Date [MM/DD/YYYY]	\$
Full Name of Contributor				Date [MM/DD/YYYY]		\$	
House #		Street Address		Date [MM/DD/YYYY]		\$	
City	Erie	State	PA	Zip Code		Date [MM/DD/YYYY]	\$
Full Name of Contributor				Date [MM/DD/YYYY]		\$	
House #		Street Address		Date [MM/DD/YYYY]		\$	
City		State	PA	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 Identification Number:		Foust for Controller									
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Full Name of Contributing Committee		LPAC Erie				Date [MM/DD/YYYY]	\$	500.00
						07/01/2024		
House #	120	Street Address		W 10th Street		Date [MM/DD/YYYY]	\$	
City	Erie	State	PA	Zip Code	16501	Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee		Local 66 PAC Club				Date [MM/DD/YYYY]	\$	1000.00
						07/22/2024		
House #	111	Street Address		Zeta Drive		Date [MM/DD/YYYY]	\$	
City	Pittsburgh	State	PA	Zip Code	15238-2811	Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee		Laborer's Local #603				Date [MM/DD/YYYY]	\$	500.00
						07/22/2024		
House #	703	Street Address		French St 2nd FL		Date [MM/DD/YYYY]	\$	
City	Erie	State	PA	Zip Code	16501-1207	Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee		Greater PA Carpenters PEC				Date [MM/DD/YYYY]	\$	1500.00
						08/04/2024		
House #	1803	Street Address		Spring Garden Street		Date [MM/DD/YYYY]	\$	
City	Philadelphia	State	PA	Zip Code	19130	Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee		Erie Refocused PAC				Date [MM/DD/YYYY]	\$	500.00
						08/04/2024		
House #	1001	Street Address		State Street Ste 323		Date [MM/DD/YYYY]	\$	
City	Erie	State	PA	Zip Code	16501	Date [MM/DD/YYYY]	\$	
Full Name of Contributing Committee		Sheet Metal Workers Local 12				Date [MM/DD/YYYY]	\$	500.00
						08/04/2024		
House #	1200	Street Address		Gulf Lab Road		Date [MM/DD/YYYY]	\$	
City	Pittsburgh	State	PA	Zip Code	15238	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 Identification Number:		Foust for Controller									
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Full Name of Contributing Committee		IW3 PAC				Date [MM/DD/YYYY]		\$	500.00
						08/04/2024			
House #	2201	Street Address		Liberty Avenue		Date [MM/DD/YYYY]		\$	
City	Pittsburgh	State	PA	Zip Code	15222	Date [MM/DD/YYYY]		\$	
Full Name of Contributing Committee		Friends of Teamsters 397 062018				Date [MM/DD/YYYY]		\$	500.00
						08/12/2024			
House #	1344	Street Address		E 11th Street		Date [MM/DD/YYYY]		\$	
City	Erie	State	PA	Zip Code	16503-1716	Date [MM/DD/YYYY]		\$	
Full Name of Contributing Committee		IUPAT Political Action Together Political Committee				Date [MM/DD/YYYY]		\$	500.00
						08/16/2024			
House #	7234	Street Address		Parkway Dr		Date [MM/DD/YYYY]		\$	
City	Hanover	State	MD	Zip Code	21076	Date [MM/DD/YYYY]		\$	
Full Name of Contributing Committee		AFSCME Council 13				Date [MM/DD/YYYY]		\$	500.00
						08/16/2024			
House #	4031	Street Address		Executive Park Drive		Date [MM/DD/YYYY]		\$	
City	Harrisburg	State	PA	Zip Code	17111-1507	Date [MM/DD/YYYY]		\$	
Full Name of Contributing Committee		SteamFitters Local Union 449 PAC Fund				Date [MM/DD/YYYY]		\$	1000.00
						09/17/2024			
House #	232	Street Address		Wise Road Suite 200		Date [MM/DD/YYYY]		\$	
City	Harmony	State	PA	Zip Code	16037	Date [MM/DD/YYYY]		\$	
Full Name of Contributing Committee						Date [MM/DD/YYYY]		\$	
House #		Street Address				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:	Foust for Controller
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Full Name of Contributor						Date [MM/DD/YYYY]		\$	1000.00
Roger W Richards						07/01/2024			
House #	230	Street Address				Date [MM/DD/YYYY]		\$	
		West Sixth Street							
City	Erie	State	PA	Zip Code	16507-1319	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				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				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				Date [MM/DD/YYYY]		\$	
City		State		Zip Code		Date [MM/DD/YYYY]		\$	
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.

Filer Identification Number:	Foust for Controller
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Full Name	Harborcreek Township									
House #	5601	Street Address	Buffalo Road							
City	Harborcreek		State	PA	Zip Code	16421	Date [MM/DD/YYYY]	09/01/24	\$	100.00
Receipt Description	return of security deposit ck #623									
Full Name										
House #		Street Address								
City			State		Zip Code		Date [MM/DD/YYYY]		\$	
Receipt Description										
Full Name										
House #		Street Address								
City			State		Zip Code		Date [MM/DD/YYYY]		\$	
Receipt Description										
Full Name										
House #		Street Address								
City			State		Zip Code		Date [MM/DD/YYYY]		\$	
Receipt Description										
Full Name										
House #		Street Address								
City			State		Zip Code		Date [MM/DD/YYYY]		\$	
Receipt Description										
Full Name										
House #		Street Address								
City			State		Zip Code		Date [MM/DD/YYYY]		\$	
Receipt Description										

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:	Foust for Controller
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1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.00 OR LESS PER CONTRIBUTOR				
TOTAL for the reporting period	(1)	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; text-align: center;">\$</td> <td style="width:90%; text-align: right;">0.00</td> </tr> </table>	\$	0.00
\$	0.00			

2. IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.01 TO \$250.00 (FROM PART F)				
TOTAL for the reporting period	(2)	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; text-align: center;">\$</td> <td style="width:90%; text-align: right;">0.00</td> </tr> </table>	\$	0.00
\$	0.00			

3. IN-KIND CONTRIBUTION RECEIVED-VALUE OVER \$250.00 (FROM PART G)				
TOTAL for the reporting period	(3)	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; text-align: center;">\$</td> <td style="width:90%; text-align: right;">0.00</td> </tr> </table>	\$	0.00
\$	0.00			

TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from boxes 1, 2, and 3; also enter on Page 1, Report Cover Page, Item F)	\$	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%; text-align: center;">0.00</td> </tr> </table>	0.00
0.00			

SCHEDULE II
PART F

In-Kind Contributions Received

VALUE OF \$50.01 TO \$250

Filer Identification Number:	Foust for Controller
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Full Name of Contributor					Date [MM/DD/YYYY]		\$		
House #		Street Address				Date [MM/DD/YYYY]	\$		
City			State		Zip Code		Date [MM/DD/YYYY]	\$	
Description of Contribution									
Full Name of Contributor					Date [MM/DD/YYYY]		\$		
House #		Street Address				Date [MM/DD/YYYY]	\$		
City			State		Zip Code		Date [MM/DD/YYYY]	\$	
Description of Contribution									
Full Name of Contributor					Date [MM/DD/YYYY]		\$		
House #		Street Address				Date [MM/DD/YYYY]	\$		
City			State		Zip Code		Date [MM/DD/YYYY]	\$	
Description of Contribution									
Full Name of Contributor					Date [MM/DD/YYYY]		\$		
House #		Street Address				Date [MM/DD/YYYY]	\$		
City			State		Zip Code		Date [MM/DD/YYYY]	\$	
Description of Contribution									

SCHEDULE II

Part G

In-Kind Contributions Received

VALUE OVER \$250

Filer Identification Number:	Foust for Controller
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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					Occupation			
Employer Mailing Address / Principal Place of Business					Description of Contribution			
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					Occupation			
Employer Mailing Address / Principal Place of Business					Description of Contribution			
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					Occupation			
Employer Mailing Address / Principal Place of Business					Description of Contribution			
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					Occupation			
Employer Mailing Address / Principal Place of Business					Description of Contribution			

SCHEDULE III
Statement of Expenditures

Filer Identification Number:	Foust for Controller
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To Whom Paid	Kyle Foust					Date [MM/DD/YYYY]	\$	143.63
						01/23/2024		
House #	4376	Street Address	Depot Road			Description of Expenditure		
City	Erie	State	PA	Zip Code	16510	supporter luncheon swearing in		
To Whom Paid	Harborcreek Township					Date [MM/DD/YYYY]	\$	100.00
						03/01/2024		
House #	5601	Street Address	Buffalo Road			Description of Expenditure		
City	Harborcreek	State	PA	Zip Code	16421	security deposit for picnic fundraiser		
To Whom Paid	Harborcreek Township					Date [MM/DD/YYYY]	\$	225.00
						3/01/2024		
House #	5601	Street Address	Buffalo Road			Description of Expenditure		
City	Harborcreek	State	PA	Zip Code	16421	rental fee for picnic fundraiser		
To Whom Paid	Erie County Democratic Party					Date [MM/DD/YYYY]	\$	100.00
						03/14/2024		
House #		Street Address	PO Box 1184			Description of Expenditure		
City	Erie	State	PA	Zip Code	16512	tickets to spring dinner		
To Whom Paid	Kyle Foust					Date [MM/DD/YYYY]	\$	229.45
						03/22/24		
House #	4376	Street Address	Depot Road			Description of Expenditure		
City	Erie	State	PA	Zip Code	16510	reimburse for St Patrick's Day Parade		
To Whom Paid	Kyle Foust					Date [MM/DD/YYYY]	\$	425.00
						06/11/2024		
House #	4376	Street Address	Depot Road			Description of Expenditure		
City	Erie	State	PA	Zip Code	16510	reimburse for attending various events		
To Whom Paid	Millcreek 4th of July Parade					Date [MM/DD/YYYY]	\$	40.00
						06/15/2024		
House #	3608	Street Address	West 26th Street			Description of Expenditure		
City	Erie	State	PA	Zip Code	16506	registration for parade		
To Whom Paid	Knox Law Firm					Date [MM/DD/YYYY]	\$	100.00
						07/11/2024		
House #	120	Street Address	West 10th Street			Description of Expenditure		
City	Erie	State	PA	Zip Code	16501	Erie Club picnic ticket		

SCHEDULE III
Statement of Expenditures

Filer Identification Number: Foust for Controller

To Whom Paid		Biroscak Printing Company				Date [MM/DD/YYYY]	\$	710.70
						07/20/2024		
House #	1919	Street Address	Peach Street			Description of Expenditure		
City	Erie	State	PA	Zip Code	16502	printing, postage of picnic invitations		
To Whom Paid		Polish Falcons Nest 610				Date [MM/DD/YYYY]	\$	75.00
						08/08/2024		
House #	431	Street Address	E 3rd Street			Description of Expenditure		
City	Erie	State	PA	Zip Code	16507	golf hole sponsorship		
To Whom Paid		Bite By the Bay				Date [MM/DD/YYYY]	\$	2136.96
						08/15/2024		
House #		Street Address	PO Box 35			Description of Expenditure		
City	Harborcreek	State	PA	Zip Code	16421	food for picnic		
To Whom Paid		Kyle Foust				Date [MM/DD/YYYY]	\$	736.19
						8/15/2024		
House #	4376	Street Address	Depot Road			Description of Expenditure		
City	Erie	State	PA	Zip Code	16510	reimburse picnic supplies, prizes, drinks		
To Whom Paid		Kyle Foust				Date [MM/DD/YYYY]	\$	234.06
						08/15/2024		
House #	4376	Street Address	Depot Road			Description of Expenditure		
City	Erie	State	PA	Zip Code	16510	reimburse parade candy Wertz party St Paul Festival		
To Whom Paid		Kyle Foust				Date [MM/DD/YYYY]	\$	150.70
						12/27/2024		
House #	4376	Street Address	Depot Road			Description of Expenditure		
City	Erie	State	PA	Zip Code	16510	reimburse party candy, dinners, fundraiser park, drink		
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 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:	Foust for Controller
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Name of Creditor						Outstanding Balance of Debt	
House #		Street Address		DATE DEBT INCURRED [MM/DD/YYYY]		\$	
City		State		Zip Code			
Description of Debt							
Name of Creditor						Outstanding Balance of Debt	
House #		Street Address		DATE DEBT INCURRED [MM/DD/YYYY]		\$	
City		State		Zip Code			
Description of Debt							
Name of Creditor						Outstanding Balance of Debt	
House #		Street Address		DATE DEBT INCURRED [MM/DD/YYYY]		\$	
City		State		Zip Code			
Description of Debt							
Name of Creditor						Outstanding Balance of Debt	
House #		Street Address		DATE DEBT INCURRED [MM/DD/YYYY]		\$	
City		State		Zip Code			
Description of Debt							
Name of Creditor						Outstanding Balance of Debt	
House #		Street Address		DATE DEBT INCURRED [MM/DD/YYYY]		\$	
City		State		Zip Code			
Description of Debt							