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

Filer Identification Number	Report Filed E			Committee		Lobbyist
Name of Filing Committee, Candidate or Lobbyist	Foust for Contr	oller		<u> </u>		
Street Address	4331 Neptune	Drive		· · · · · · · · · · · · · · · · · · ·		
City Erie		State	PA	Zip Code	16506	
Type of Report (Place x under report type)		, ,		· · · · · · · · · · · · · · · · · · ·	<u> </u>	
1- 6 th Tuesday 2- 2 nd Friday 3- 30 Day Po	t 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
				X		
Date Of Election (MM/DD/YYYY) 11/07/2023	Year	2024	Amendment Report		Termination Report	
Summary of Receipts and From Date Expenditures	To Date	<u> Portuge Pro</u>		For	Office Use Only	
A. Amount Brought Forward From Last Repo	rt S	2/31/24 2711.33				
B. Total Monetary Contributions and Receip (From Schedule I)	1	1901.00				2025
C. Total Funds Available (Sum of Lines A and B) D. Total Expenditures	\$ 1	4612,43				Section 19 Control of the Control of
(From Schedule III) E. Ending Cash Balance	\$	5406.69			garaga January C. Co. January C. Co. January J. Co. January J. Co.	<u></u>
(Subtract Line D from Line C)		9205.64				The control of the co
F. Value of In-Kind Contributions Received (From Schedule II)	\$	0.00				 W
G. Unpaid Debts and Obligations (From Schedule IV)	\$	0.00			rition	
		⊤ Affishavit Sad				
Part 1- If this is a Committee report, treasurer sign I swear (or affirm) that this report, including the at	here. If this is a Car ached schedules dr	குத்er, ஜ்மூர்த் இத்சா, ஜ்மூர்த்	ndidate sign here. best of my knowled	ge and belief t	rue, correct and compl	ete.
Sworn to and subscribed before me this	[:	Puber / Pub	01.	Ω		
I swear (or affirm) that this report, including the at Sworn to and subscribed before me this 15 day of January 20 25		Notary Notary Inty Decem Society	Signature de Ellen Pasquale	of Person Subm	MULL	
Signature Signature	- <u> </u>	weath of Pennsyl uren E. Thayer, N Erie Coun mission expires D ommission numb Pen systania Agas	ie Ellen Pasquale 4	Printed Nam		
My Commission expires 12 20 3		Er Th			-0343	
MO. DAY Y.	3.	uren E. mission ommiss	rea Code	Day	time Telephone Numb	per
Part II- If this is a report of a Candidate's Authorize					than Asta of Laura 2, 1027	(D.I. 1222 NO.220)
I swear (or affirm) that to the best of my knowledg amended.	e and belief this po	S S S S S S S S S S S S S S S S S S S	ias not violated any	provisions of	ine Act of June 3, 1937	(P.L. 1333, NO.320) as
Sworn to and subscribed before me this	Notar	er 20 865 of No	0			
15 day of January 20 25	amma -	y cemb rr 145;	Ty Ar	ature of Candi	data	·
Laure Signature	Theyer, Notary Public	Countres De Association	le Foust	Printed Name		
My Commission expires 12 20 20		Erie n expli sion n sylvanie		218-3	3407	
MO. DAY YR.	nonwealth Lauren E.	Erie County y commission expires December 20, Commission number 1455865 ember, Pennsylvania Association of No	rea Code	Dayt	ime Telephone Numbe	er
	ommor	CC G			, <u>.</u>	

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 country of J. (4)	T &	
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 (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B)	\$	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

Full Name of Contributing Committee House # Street Address Date [MM/DD/YYYY] \$ City State Zip Code Date [MM/DD/YYYY] \$						•	Amount
House # Street Address PO Box 2018 Date [MM/DD/YYYY] \$	Full Name of Co	ontributing			Date [MM/DD/YYYY]	\$	
Date Date	Committee	NFG PAP	AC National Fue	l Gas		1	200.00
PO Box 2018 State PA Zip Code 16512 Date [MM/DD/YYYY] S	• • • • • • • • • • • • • • • • • • •					<u> </u>	
City State PA Zip Code 16512 Date [MM/DD/YYYY] \$	House #		2 Pay 2010		Date [MIM/DD/YYYY]	>	
Full Name of Contributing) Box 2010				
Full Name of Contributing Committee Date [MM/DD/YYYY] \$		100	State	Zip Code	Date [MM/DD/YYYY]	\$	
House # Street Address Date [MM/DD/YYYY] \$	Erie		PA	16512		1	
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Full Name of Contributing Committee Date [MM/DD/YYYY] \$						1	
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Committee	Full Name of Co	ntributing			Date IMM/DD/YYYY1	5	
City State Zip Code Date [MM/DD/YYYY] \$	Committee					7	
City State Zip Code Date [MM/DD/YYYY] \$	House #	Street Address			Data [MM/DD/VVVV]		
City State Zip Code Date [MM/DD/YYYY] \$		Juleer Addiess			Date [mini/DD/11/11]	<u>د</u>	
	City		State	Zip Code	Date [MM/DD/YYYY]	\$	
						4.	

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	

Full Name of Contributor		Date [MM/DD/YYYY]	
Philip Zaczy	yk	07/22/2024	100.00
House # Street Address			\$
9850	Jones Road	Date (Wild) DD/(11/1]	
City	State Zip Code	Date [MM/DD/YYYY]	\$
Erie	PA 16510-5402	Date (Will) DD/ FI/FI/	
Full Name of Contributor		Date [MM/DD/YYYY]	\$
Luigi and S	ue Ellen Pasquale	07/22/2024	100.00
House # Street Address		Date [MM/DD/YYYY]	\$
4331	Neptune Drive		
City Erie	State Zip Code	Date [MM/DD/YYYY]	\$
	FA 10000		
Full Name of Contributor		Date [MM/DD/YYYY]	\$
Russell War	mer	08/04/2024	100.00
House # Street Address	_	Date [MM/DD/YYYY]	\$
1336	Tower Lane		
City	State Zip Code	Date [MM/DD/YYYY]	\$
Erie	PA 16505		
Full Name of Contributor		Date [MM/DD/YYYY]	\$
Thomas Tal	arico Esq.	08/16/2024	250,00
House # Street Address		Date [MM/DD/YYYY]	\$
230	West 6th Street		
City Erie	State Zip Code 16507	Date [MM/DD/YYYY]	\$
	FA 1000/	\$ 1	
Full Name of Contributor	,	Date [MM/DD/YYYY]	\$ 70.00
Rock Copel	and	08/16/2024	70.00
House # Street Address		Date [MM/DD/YYYY]	\$
1336	Patterson Ave		
City Erie	State Zip Code 16508-1447	Date [MM/DD/YYYY]	\$
	10000-1447		
Full Name of Contributor	- I Dilacita (f	Date [MM/DD/YYYY]	\$ 75.00
	sel Bilenikoff	08/16/2024	75.00
House # Street Address		Date [MM/DD/YYYY]	\$
41	Mechanic Street		
City Girard	State Zip Code 16417	Date [MM/DD/YYYY]	\$
		I have	. c to 1

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.)

	The second secon	
Flier Identification Number: Foust for Controller		

Full Name of Contributor		,	Data IMMA IND MARKE	Sep e dia.	I
Eric & Karen	Segai		Date [MM/DD/YYYY]	\$.	100.00
			08/16/2024		100.00
House # Street Address	Dliver Road		Date [MM/DD/YYYY]	\$	
	Diver Road			E.	
City Erie	State PA	Zip Code 16509	Date [MM/DD/YYYY]	\$	
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Full Name of Contributor	may Malamay		Date [MM/DD/YYYY]	\$	
	nny Maloney		08/16/2024		100.00
House # Street Address 401			Date [MM/DD/YYYY]	\$	
401	Slenruadh				
City Erie	State PA	Zip Code	Date [MM/DD/YYYY]	\$	
	FA	16505-1732			
Full Name of Contributor			Date [MM/DD/YYYY]	\$	
Kevin & Reb	ecca Ireson		08/16/2024		100.00
House # Street Address			Date [MM/DD/YYYY]	\$	
870 F	lartley Rd		200		
Gity	State	Zip Code	Date [MM/DD/YYYY]	\$	
Fairview	PA	16145			
Full Name of Contributor	[10.1 (10.0 M (180.0)]		Date [MM/DD/YYYY]	\$, <u>, , , , , , , , , , , , , , , , , , </u>
Q Gregory O	rlando		09/30/2024	e (e Suga	100.00
House # Street Address		<u></u>	Date [MM/DD/YYYY]	\$	
4216 T	rask Avenue		20 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
City	State	Zip Code	Date [MM/DD/YYYY]	\$	
Erie	PA	16508			
Full Name of Contributor	pas contraction	1 Section 2007 (1997) (1997)	Date [MM/DD/YYYY]	\$	
			 And in action Tagging of Author of the Taylor Author State (Taylor) 		
House # Street Address			Date [MM/DD/YYYY]	\$	
			533 1000/20/2131313		
	State	Zip Code	Date [MM/DD/YYYY]	e (4)	
Erie	PA	-in cone	Date (IAIIM) DD/11/1/1	7	
Full Name of Contributor		F2152 72.5 F4 9778 F3	Date [MM/DD/YYYY]	\$	
House # Street Address		- · · · · · · · · · · · · · · · · · · ·	Doto INNA IND DAMAGE	86.5°	
Street Address			Date [MM/DD/YYYY]	\$	
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City	State PA	Zip Code	Date [MM/DD/YYYY]	\$	
	All Sales		1808		:

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			

Contributing Committee	Full Name of		Date [MM/DD/YYYY]	\$
120		PAC Erie	7	
State PA Zip Code 16501 Date [MM/DD/YYYY] \$ 1000.00	Des Securities Transfer	949505.384	Date [MM/DD/YYYY]	\$0
Full Name of Contributing Committee Coale & PAC Club	120	W Tour Street		
Contributing Committee Local 66 PAC Club Street Address Street Address State PA			Date [MM/DD/YYYY]	
Contributing Committee	Eull Name of			
Date MM/DD/YYYY S PA Zip Code 15238-2811 Date MM/DD/YYYY S PA Zip Code 15238-2811 Date MM/DD/YYYY S PA Zip Code 15238-2811 Date MM/DD/YYYY S O7/22/2024 S O7/2	A BURGO PROGRAMMA CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONT	ocal 66 PAC Club		
111	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Zenepalis. (
Pittsburgh	(2000) (2	보통(BB) 1985 1	Date (MM/DD/YYYY)	•
Contributing Committee	City Pittsburgh	State PA Zip Code 15238-2811		5
House # 703 Street Address French St 2nd FL	Full Name of	Prog Cast of 67 Programme and the control of the co	Date [MM/DD/YYYY]	30 30
Total French St 2nd FL Full Name of Contributing Committee Greater PA Carpenters PEC Date [MM/DD/YYYY] \$ 1500.00	Contributing Committee La	borer's Local #603	07/22/2024	500.00
State PA Zip Code 16501-1207 State PA Zip Code 16501-1207 State PA Toda 16501-1207 State PA Toda PA Toda	House # Street	Address	Date [MM/DD/YYYY]	
Full Name of Contributing Committee Greater PA Carpenters PEC Date [MM/DD/YYYY] \$ 1500.00	703	French St 2nd FL		*
Contributing Committee Greater PA Carpenters PEC			Date [MM/DD/YYYY]	
Contributing Committee Greater PA Carpenters PEC	Full Name of		Date [MM/DD/VVVV]	
1803 Spring Garden Street State PA Zip Code 19130 Date [MM/DD/YYYY] \$		reater PA Carpenters PEC	1000	
1803 Spring Garden Street State PA Zip Code 19130 Date [MM/DD/YYYY] \$ \$ \$ \$ \$ \$ \$ \$ \$	House # Street	Address	Date [MM/DD/YYYY]	
Philadelphia PA 19130 Full Name of Contributing Committee Erie Refocused PAC House # 1001 Street Address State Street Ste 323 City Erie State PA Zip Code 16501 Full Name of Contributing Committee Sheet Metal Workers Local 12 House # 1200 Street Address Gulf Lab Road	1803	Spring Garden Street		
Contributing Committee	City Philadelphia		Date [MM/DD/YYYY]	
House #	Full Name of	[gradual section and gradual section of the section	Date [MM/DD/YYYY]	
1001 State Street Ste 323 Date [MM/DD/YYYY] \$	Contributing Committee Eri	ie Refocused PAC	08/04/2024	500.00
City Erie State PA Zip Code 16501 Date [MM/DD/YYYY] \$	[Min (1920) E. (1970) E. (V(X) \$2: 1-13, 2: 200 €	Date [MM/DD/YYYY]	
Füll Name of Contributing Committee Sheet Metal Workers Local 12 Bate [MM/DD/YYYY] Sheet Metal Workers Local 12 Date [MM/DD/YYYY] Sheet Metal Workers Local 12 Date [MM/DD/YYYY] Sheet Address Gulf Lab Road				
Contributing Committee Sheet Metal Workers Local 12 08/04/2024 500.00 House # 1200 Street Address Gulf Lab Road Date [MM/DD/YYYY] \$	City Erie	State PA Zip Code 16501	Date [MM/DD/YYYY] \$	
Contributing Committee Sheet Metal Workers Local 12 08/04/2024 500.00 House # 1200 Street Address Gulf Lab Road Date [MM/DD/YYYY] \$	Full Name of	Par mercana	Date [MM/DD/YYYY1 6	
House # 1200 Street Address Gulf Lab Road Date [MM/DD/YYYY] \$	ALTERNATION OF THE STATE OF THE	eet Metal Workers Local 12		E291
1200 Gulf Lab Road	House # Street	Address	ÿ\$	63 63
City Zip Code Date [MM/DD/YYYY] S		000 pt 1 (4 4 4 5 4 5 4 5 4 5 4 5 4 5 4 5 4 5 4		
Pittsburgh PA 15238	City Pittsburgh	State 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:		
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Foust for Controller		
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Eull Name of		Date [MM/DD/YYYY]	\$
Contributing Committee IW3 PAC		08/04/2024	500.00
House # Street Address		Date [MM/DD/YYYY]	\$
2201 L	Liberty Avenue		
City	State Zip Code	Date [MM/DD/YYYY]	\$
Pittsburgh	PA 15222		
Full Name of		Date [MM/DD/YYYY]	\$
Contributing Committee Friends of To	eamsters 397 062018	08/12/2024	500.00
House # Street Address		Date [MM/DD/YYYY]	\$
1344 E	E 11th Street		
City	State Zip Code	Date [MM/DD/YYYY]	\$
Erie	PA 16503-1716		
Full Name of	The second secon	Date [MM/DD/YYYY]	\$
Contributing Committee IUPAT Politic	cal Action Together Political Committee	08/16/2024	500.00
House # Street Address		Date [MM/DD/YYYY]	\$
7234 p	^P arkway Dr		
Gity	State Zip Code	Date [MM/DD/YYYY]	\$
Hanover	MD 21076	**************************************	
Full Name of		Date [MM/DD/YYYY]	\$
Contributing Committee AFSCME Co	puncil 13	08/16/2024	500.00
House # Street Address		Date [MM/DD/YYYY]	\$ \$
4031 E	Executive Park Drive		
City	State Zip Code	Date [MM/DD/YYYY]	\$
Harrisburg	PA 17111-1507		
Full Name of		Date [MM/DD/YYYY]	\$
Contributing Committee SteamFitters	Local Union 449 PAC Fund	09/17/2024	1000.00
House # Street Address	*/ 1-10	Date [MM/DD/YYYY]	\$
232	Wise Road Suite 200		
City	State Zip Code	Date [MM/DD/YYYY]	\$
Harmony	PA 16037		
Full Name of	The state of the s	Date [MM/DD/YYYY]	\$
Contributing Committee			7% () ()
House # Street Address		Date [MM/DD/YYYY]	\$.
		The second secon	(3) (8)
Gity	State Zip Code	Date [MM/DD/YYYY]	\$ \$
			<u> </u>

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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	\$2000xxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxxx		
	7 DS 1-1279 CM-15 7-1-1 CM-750-14047 1-10		

Full Name of Contributor	•		Date [MM/DD/YYYY]	(S
Roger W Ri	chards		07/01/2024	1000.00
House # Street Address			Date [MM/DD/YYYY]	S.
230	West Sixth Street			
City _	State	Zip Code	Date [MM/DD/YYYY]	\$
Erie	PA	16507-1319		
Employer Name	15039/255054	[350, min to 25000000, 1250 [4]	Occupation	
Employer Mailing Address / Principal Place of Business			Providence of Production of Productions	**************************************
Full Name of Contributor			Date [MM/DD/YYYY]	315/ 3 89
Full Name of Continuation			Date (MIM/DD/11111)	
House # Street Address			Date [MM/DD/YYYY]	\$
City	State *	Zip Code	Date [MM/DD/YYYY]	\$
kija Line da			and the second s	
Employer Name	[21317246921475]	1000 14 (14 (14 (14 (14 (14 (14 (14 (14 (14	Occupation	2.889
Employer Mailing Address /			[2 ASSTRUMENT SERVICE SAME SAME SAME SERVICE	
Principal Place of Business				
Full Name of Contributor			Date [MM/DD/YYYY]	\$
House # Street Address			Date [MM/DD/YYYY]	.
				4
City	State	Zip Code	Date [MM/DD/YYYY]	\$
Employer Name	35 a/Oc. 10 trans / O.		Occupation	Para primer
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]	S
Employer Name				
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 Numb	oer:	Foust for Controller			
Full Name		Harborcreek Township			
House # 5601	Stre	eet Address Buffalo Road			
City		Harborcreek	State PA	Zip Code 16421	Date [MM/DD/YYYY] \$ 09/01/24 100.00
Receipt Description	150 (10) (10) (10) (10) (10) (10) (10)	return of security deposit	ck #623		数益期
Full Name	720E				
House#	Stre	eet Address			
City		Mart & Constraint	State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description			Control of the American		[2 + * * * * * *]
Full Name					
House #	Stre	eet Address			
City			State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description	200		李爷位李爷温到		[8:5%]
Full Name					
House #	Stre	et Address			
City			State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description				Triangle and the second	
Full Name					
	Stre	et Address			
City	(V.)		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description			History in State of the State o	<u> 18, 3022 March</u>	[2 5 m;]
Full Name					1 (200 10
House #		et Address			
			State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description			- Living is an annual to the second		•

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 fo	r Controller		
1. UNITEMIZED IN-KIND CONTRI	BUTIONS RECEIVED-VALUE OF S	50.00 C	OR LESS PER CONTRIBUTOR
TOTAL for the reporting period	(1)	\$	0.00
2. IN-KIND CONTRIBUTIONS REC	EIVED-VALUE OF \$50.01 TO \$25	0.00 (F	ROM PART F)
TOTAL for the reporting period	(2)	\$	0.00
3. IN-KIND CONTRIBUTION RECE	IVED-VALUE OVER \$250.00 (FRC)M PAR	TG)
TOTAL for the reporting period	(3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTION	ONS DURING THIS REPORTING	\$	
PERIOD (Add and enter amount totals for on Page 1, Report Cover Page, Item F)	rom boxes 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:	Foust for Controller		 	

Full Name of Co	intributor -			Date [MM/DD/YYYY] \$	
House #				Date [MM/DD/YYYY] \$	
Flouse #	Street Address			Date [WWYDD/TTT]	
City	DE 1971 177 SET 1997 9 1997 1998	State	Zip Code	Date [MM/DD/YYYY] \$	
Description of C	Ontribution		P004500948898		
(glades)	The William State of the State	\$\$\displaystyle{\partial}\$			
Full Name of Co	ntributor			Date [MM/DD/YYYY] \$	
44.5					
ABSTRUMENT OF THE	F I			Transfer house 2	
House #	Street Address			Date [MM/DD/YYYY] \$	
59 - 7729 (3. 19					
City	The STEED AND SECURITY SHOWS	State	Zip Code	Date [MM/DD/YYYY] \$	
				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Description of C	,ontribution				
Full Name of Co	ntributor			Date [MM/DD/YYYY] \$	
House #	Street Address			Date [MM/DD/YYYY] \$	
City	TESTED AT 1891 TEST TEST	State	Zip Code	Date [MM/DD/YYYY] \$	
				Constant Maria Constant Consta	
Description of C	Contribution	9945-9364 878			
A CONTRACTOR	Ollaradion				
Full Name of Co	intributor			Date [MM/DD/YYYY] \$	
· · · · · · · · · · · · · · · · · · ·	L.			** ** ** ** ** ** ** ** ** ** ** ** **	
House #	Street Address			Date [MM/DD/YYYY] \$	
City	Designing of Windows Consequence of	State	Zip Code	Date [MM/DD/YYYY] \$	
				100 mm	
Description of 0	Contribution				

Full Name of Co	intributor			Date [MM/DD/YYYY] \$	
House #	Street Address			Date [MM/DD/YYYY] \$	
11003511	Street Address				
City		State	Zip Code	Date [MM/DD/YYYY] \$	
Description of C	Contribution		# 10 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	[2794.3]	
		WS.			

SCHEDULE II

Part G

In-Kind Contributions Received

VALUE OVER \$250

Filer Identification/Number: Foust for Controller	

Full Name of Contri	outor			Date [MM/DD/YYYY] \$
House#	Street Address			Date [MM/DD/YYYY] \$
	Street Address			
10 (E) (18)				
Citý -		State	Zip Code	Date [MM/DD/YYYY] \$
Employer Name				Occupation
		§ .		
Employer Mailing A	ddress / Principal			Description
Place of Business				of Contribution
				2. 2019 - 2019 - 2019 - 2019 - 2019 - 2019 - 2019 - 2019 - 2019 - 2019 - 2019 - 2019 - 2019 - 2019 - 2019 - 20
Full Name of Contri	outor :			Date [MM/DD/YYYY] \$
House #	Street Address			Date [MM/DD/YYYY] \$
		11-2 29/19	1 2 00 2002 0	
City		State	Zip Code	Date [MM/DD/YYYY] \$
Employer Name		Authorities (Proces	C No. 80 S. C. S. C. C. C. S.	Occupation
	11 /4 / 1 1			
Employer Mailing A Place of Business	ddress / Principal			Description of
Flace of Business	Brigadist Control	3		Contribution
Full Name of Contril	witor	â		Date [MM/DD/YYYY] \$
Full Name of Contin	90.01			Date (MINI/DD/III (1)
House #	Street Address			Date [MM/DD/YYYY] \$
		•		
City		State	Zip Code	Date [MM/DD/YYYY] \$
City		State	Zip code	Date (MM/DD/) In 1]
Employer Name		4		Occupation
F	aa - Zhaa - Zh			
Employer Mailing A Place of Business	odress / Principal			Description of
, race or business		i i		Contribution
Full Name of Contril	witor:	3		Date [MM/DD/YYYY] \$
on of the state o				
volume and a second of the				
House #	Street Address			Date [MM/DD/YYYY] \$
City		State	Zip Code	Date [MM/DD/YYYY] \$
		7.0.0	Zip code	
Employer Name				Occupation
Employer Mailing A	ddress / Principal			Description
				of
Place of Business				OF

Statement of Expenditures

The Park Addition of the Control of	
Filer Identification Number:	
CHICH INCIDITION OF THE PROPERTY OF THE PROPER	
West Mark Part Mark Carlot Carlot for Controller	
Foust for Controller	
67-43-100-0-20-20-0-0-0-0-0-0-0-0-0-0-0-0-0-0	

•		Date [MM/DD/YYYY]	Š
		01/23/2024	143.63
epot Road		Description of Expend	iture
State PA	Zip Code 16510	supporter luncheon swea	ring in
shin		Date [MM/DD/YYYY]	400.00
		03/01/2024	100.00
uffalo Road		Description of Expendi	ture
State PA	Zip Code 16421	security deposit for picnic	c fundraiser
		Date [MM/DD/YYYY]	\$
ihip		3/01/2024	225.00
uffalo Road		Description of Expendi	ture
State PA	Zip Code 16421	rental fee for picnic fundra	aiser
100000000000000000000000000000000000000	[2000] San	Date [MM/DD/YYYY]	\$ (
ratic Party		03/14/2024	100.00
O Box 1184		Description of Expendi	ture
State PA	Zip Code 16512	tickets to spring dinner	
		Date [MM/DD/YYYY]	\$ 229.45
epot Road		Description of Expendit	ture
State PA	Zip Code 16510	reimburse for St Patrick's	Day Parade
There is a second		Date [MM/DD/YYYY]	\$ 425.00
epot Road		Description of Expendit	ture:
State PA	Zip Code 16510	reimburse for attending va	arious events
		Date [MM/DD/YYYY]	\$
/ Parade		06/15/2024	40.00
Vest 26th Street		Description of Expendit	ture
State PA	Zip Code 16506	registration for parade	
		Date [MM/DD/YYYY]	\$ 100.00
		07/11/2024	100.00
est 10th Street		Description of Expendit	(ure
State PA	Zip Code 16501	Erie Club picnic ticket	
	State PA hip uffalo Road State PA hip uffalo Road State PA ratic Party D Box 1184 State PA spot Road State PA epot Road State PA Parade Vest 26th Street State PA vest 10th Street	State PA Zip Code 16510 hip Uffalo Road Zip Code 16421 hip Uffalo Road Zip Code 16421 hip Uffalo Road Zip Code 16421 State PA Zip Code 16512 Box 1184 State PA Zip Code 16512 State PA Zip Code 16510 State PA Zip Code 16510 Parade State PA Zip Code 16510 Parade Vest 26th Street Zip Code 16506 Vest 10th Street State PA Zip Code 16506 Vest 10th Street Zip Code 16506 Vest 26th Street Zip Code 16506 Vest 26th Street Zip Code 16506 Vest 26th Street Zip Code 16506 Vest 10th Street Zip Code Zip Code 16506 Vest 26th Street Zip Code 26506 Vest 26th St	

Statement of Expenditures

Filer Identification Number:	.1	 	
	Carret for Carringlian		
	Foust for Controller		
	á		

To Whom Paid						Date [MM/DD/YYYY]	\$	· · · · · · · · · · · · · · · · · · ·
	Biroscak Printing C	ompany				07/20/2024		710.70
House # 1919	Street Address	each Street				Description of Expendi	ture	
		State		Principal Additional				
City Erie		F	PA	Zip Code ¹	16502	printing, postage of picnic	invita	tions
To Whom Paid	Polish Falcons Nes	+ 610				Date [MM/DD/YYYY]	\$	75.00
	Charra alcona Nes					08/08/2024		75.00
House # 431	Street Address	3rd Street			**	Description of Expendit	ture	
City Erie		State F	PA	Zip Code 1	16507	golf hole sponsorship		
To Whom Paid	Dita Dariba Davi					FDate [MM/DD/YYYY]	S	0400.00
	Bite By the Bay					08/15/2024	100	2136.96
House #	Street Address	O Box 35				Description of Expendit	ure	
City Harborcreek		State F	PA	Zip 1	16421	food for picnic		
To Whom Paid			·	by a street of America		Date [MM/DD/YYYY]	\$	
A 19	Kyle Foust					8/15/2024		736.19
House # 4376	Street Address D	epot Road				Description of Expendit	ure	
City Erie	, , , , , , , , , , , , , , , , , , , ,	State P	PA	Zip Code 1	16510	reimburse picnic supplies	, prize	es, drinks
				★日本の表示では、				
To Whom Paid		<u> </u>		ROPOR RESEARCH		Date [MM/DD/YYYY]	\$	·
To Whom Paid	Kyle Foust	and and the state of the last				Date [MM/DD/YYYY] 08/15/2024	4.3	234.06
To Whom Paid House # 4376	Street Address	epot Road		HERON REPORTED		CONTRACTOR AND CONTRACTOR OF CONTRACTOR AND CONTRAC	F 1955	234.06
House #	Street Address	State	PA	Zip	16510	08/15/2024	ture	No.
House # 4376	Street Address D	State	'A	Zip	16510	08/15/2024 Description of Expendit	wre Wertz	party St Paul Festival
House # 4376 City Erie	Street Address	State	'A	Zip	16510	08/15/2024 Description of Expendit reimburse parade candy \	wre Wertz	No.
House # 4376 City Erie	Street Address D Kyle Foust	State	'A	Zip	16510	08/15/2024 Description of Expendit reimburse parade candy \ Date [MM/DD/YYYY]	Wertz	party St Paul Festival
House # 4376 City Erie To Whom Paid	Street Address D Kyle Foust	State P.		Zip Code 1	16510 16510	08/15/2024 Description of Expendit reimburse parade candy \ Date [MM/DD/YYYY] 12/27/2024	Wertz \$ ure	party St Paul Festival 150.70
House # 4376 City Erie To Whom Paid House # 4376 City Erie	Street Address D Kyle Foust	State P		Zip Code 1		08/15/2024 Description of Expendit reimburse parade candy \ Date [MM/DD/YYYY] 12/27/2024 Description of Expendit reimburse party candy, directions	Wertz \$ ure	party St Paul Festival 150.70
House # 4376 City Erie To Whom Paid House # 4376 City 4376	Street Address D Kyle Foust	State P		Zip Code 1		08/15/2024 Description of Expendit reimburse parade candy \ Date [MM/DD/YYYY] 12/27/2024 Description of Expendit reimburse party candy, dia Date [MM/DD/YYYY]	Wertz \$ ure nners	party St Paul Festival 150.70
House # 4376 City Erie To Whom Paid House # 4376 City Erie	Street Address D Kyle Foust	State P		Zip Code 1		08/15/2024 Description of Expendit reimburse parade candy \ Date [MM/DD/YYYY] 12/27/2024 Description of Expendit reimburse party candy, directions	Wertz \$ ure nners	party St Paul Festival 150.70
House # 4376 City Erie To Whom Paid House # 4376 City Erie To Whom Paid	Street Address Discreption	State P		Zip Code 1		08/15/2024 Description of Expendit reimburse parade candy \ Date [MM/DD/YYYY] 12/27/2024 Description of Expendit reimburse party candy, dia Date [MM/DD/YYYY]	Wertz \$ ure nners	party St Paul Festival 150.70
House # 4376 City Erie To Whom Paid House # 4376 City Erie To Whom Paid House # House # 1	Street Address Discreption	State P.		Zip Code 1		08/15/2024 Description of Expendit reimburse parade candy \ Date [MM/DD/YYYY] 12/27/2024 Description of Expendit reimburse party candy, dia Date [MM/DD/YYYY]	Wertz \$ ure nners	party St Paul Festival 150.70
House # 4376 City Erie To Whom Paid House # 4376 City Erie To Whom Paid House # City	Street Address Discreption	State P.		Zip Code 1		08/15/2024 Description of Expendit reimburse parade candy \ Date [MM/DD/YYYY] 12/27/2024 Description of Expendit reimburse party candy, dir Date [MM/DD/YYYY] Description of Expendit	Wertz S S Inners S S S S S S S S S S S S S	party St Paul Festival 150.70
House # 4376 City Erie To Whom Paid House # 4376 City Erie To Whom Paid House # 700 Whom Paid	Street Address D	State P.		Zip Code 1		08/15/2024 Description of Expendit reimburse parade candy \(\) Date [MM/DD/YYYY] 12/27/2024 Description of Expendit reimburse party candy, dia Date [MM/DD/YYYY] Description of Expendit	Wertz S S Inners S S S S S S S S S S S S S	party St Paul Festival 150.70

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		

Name of Creditor			Outstanding Balance of Debt			
House #	Street Address	DATE DEBT INCURRED [MM/DD/YYYY]	\$			
City		State Zip Code				
Description of Debt		2 (2 (2 (2 (2 (2 (2 (2 (2 (2 (2 (2 (2 (2	No. 100.000			
Name of Creditor			Outstanding Balance of Debt			
House #	Street Address	DATE DEBT INCURRED	/\$ /			
		[MM/DD/YYYY]				
City		State Zip Code				
Description of Debt		[6,75,69,200,600,100,100]	[80.99.5]			
Name of Creditor			Outstanding Balance of Debt			
House #	Street Address	DATE DEBT INCURRED	\$			
		[MM/DD/YYYY]				
City		State Zip				
Description of Debt		Code				
Name of Creditor	4.2.7.4 - 1.2.7.4					
AND WARE LAND	AND CONTROL OF CONTROL	DATE DEDTINGUIDDED	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]	a ()			
City		State Zip Code				
Description of Debt		STEELE STEEL S	<u>588</u>			