

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	Committee		Loobyist
Name of Filing Committee, Candidate or Lobbyist	Marcus Jacobs		di i ilianoga di operato i		\$500 000 000 000 000 000 000 000 000 000
Street Address	2517 Bird Drive				
City Erie		State PA	Zip Gode	16510	
Type of Report (Place x under report type)			See See See And an array to See a see A see See and	9.00	
1-6 th Tuesday 2-2 nd Friday 3-30 Day Post Pre-Primary Pre-Primary Primary	**************************************	^d Friday 6-30 Da Election Election		Special 2 nd Friday Pre-Election	Special 30 Day Post-Election
Date Of Election	Year	Amend	ment	Termination	
(MM/DD/YYYY) 05/20/2025	2	2025 Report		Report	
Summary of Receipts and From Date Expenditures	To Date		For	Office Use Only	
1/1/25 A. Amount Brought Forward From Last Repor	5/5/25			<u> </u>	
B. Total Monetary Contributions and Receipts	U				. S
(From Schedule I)	U				4
C, Total Funds Available (Sum of Lines A and B)	\$ 0				9
D. Total Expenditures (From Schedule III)	\$.2000.0	- 319	17.78		
E. Ending Cash Balance (Subtract Line D from Line C)	\$ 0				္က်င္သ
F. Value of In-Kind Contributions Received (From Schedule II)	\$			# Dings	ြေ
G. Unpaid Debts and Obligations (From Schedule IV)	\$ 0				
	Toronto Artes A. Carlo	ffidavit Section			
Part 1- If this is a Committee report, treasurer sign h I swear (or affirm) that this report, including the atta				true, correct and compl	ete.
Sworn to and subscribed before me this	otary	18 1 Ma	A) . /	
day of Play 20 as		Si Si	gnature of Person Subj		
Signature Signature	N N N N N N N N N N N N N N N N N N N		Printed Nan	Jacobs	
My Commission expires 12-20-20	JSQ ### 20	THE SAME	7100	69 875	1
MO. DAY YR.	2 ± m €	S S	Da	ytime Telephone Numl	ber
Part II- If this is a report of a Candidate's Authorized I swear (or affirm) that to the best of my knowledge	Committee, cascillate s and belief this contical of	al Esian here. monttee has not vio	lated any provisions of	the Act of June 3, 1937	(P.L. 1333, NO.320) as
I swear (or affirm) that to the best of my knowledge amended. Sworn to and subscribed before me this	ommo S	di i			
	<u>[o </u> ≥	}			,
day of20	- `	_	Signature of Cand	idate	
Signature	- [Printed Name		
My Commission expires					
MO. DAY YR.		Area Code	Day	time Telephone Numb	er
<u> </u>					

SCHEDULE I Contributions and Receipts

Detailed Summary Page

Filer Identification Number			
CANALATE PART CANALATE CONTROL			
1. Unitermized Contributions and Receipts-\$50.00 or Less per Contributor			
	enena.	unitudio	nna maintean am Bhaile ann am an an a san an a
Total for the reporting period	(1)	\$	
2. Contributions of \$50.01 to \$250.00 (From			en principal di Christian de la compania de la com
Part A and Part B)			an and 1945. George Stores Spore and Alleman (1945) and Alleman (1945) and Alleman (1945). A second of the All The Alleman (1945) and Alleman (19
Contributions Received from Political Committees (Part A)		\$	
All Other Contributions (Part B)		\$	
Total for the reporting period	(2)	\$	
.3, Contributions Over \$250.00 (From Part C and Part D)	ielinė.		
Contributions Received from Political Committees (Part C)		\$	
All Other Contributions (Part D)		\$	
Total for the reporting period	(3)	\$	
4. Other Receipts-Refunds, interest Earned, Returned Checks, ETC. (From Part E))		
Total for the reporting period	(4)	\$	
Total Monetary Contributions and Receipts during this reporting period (Add and	1	\$	

Cover Page, Item B)

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				
	-			Amount
Full Name of Contribution	ng		Date [MM/DD/YYYY]	
Committee				0
House# 5	treet Address		Date [MM/DD/YYYY]	\$
City	State	Zip Code	Date [MM/DD/YYYY]	S
	The state of the s			a disease of the second
Full Name of Contribution	1g. indi		Date [MM/DD/YYYY]	\$
Committee				
House # S	treet Address		Date [MM/DD/YYYY]	3
City	State	Zip Code	Date [MM/DD/YYYY]	Ś
	FILE CONTROL OF THE C			
Full Name of Contributin	ig .		Date [MM/DD/YYYY]	\$
	inchinic Record			
House # S	treet Address		Date [MM/DD/YYYY]	\$
	The less of places			
City	State	Zîp Code	Date [MM/DD/YYYY]	Ś
per de la companya d La companya de la companya della companya del				
Full Name of Contribution Committee	18		Date [MM/DD/YYYY]	* S
House# Si	treet Address		Date [MM/DD/YYYY]	S
City	State	Zip Code	Date [MM/DD/YYYY]	\$
		en et en en moner Alle Green de la propo Alle de la companya de la proposition		
Full Name of Contributin		027304828008388991939902035	Date [MM/DD/YYYY]	\$
Committee				
House # S1	reet Address		Date [MM/DD/YYYY]	\$
City	State	2ip Code	Date [MM/DD/YYYY]	Ś
Full Name of Contributin Committee	g til		Date [MM/DD/YYYY]	\$
econoce annie de como cambo				70 C C C C C C C C C C C C C C C C C C C
House # St	reet Address	j	Date (MM/DD/YYYY)	5
	ii alia (salia 66	hear spanners very full remoteration		1 (de 1.1) 1 (de 1.1) 1 (de 1.1) 1 (de 1.1)
City	State	Zip Code	Date [MM/DD/YYYY]	S.
				XX 100

PART B

Filer Identification Number:

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.)

Full Name of Contributor			Date [MM/DD/YYYY] \$
House # Street Addres	5		Date [MM/DD/YYYY] \$
MARKET SELECTION			
		77	
City	State	Zip Code	Date [MM/DD/YYYY] \$
(A) (5) (4)			
Full Name of Contributor			Date [MM/DD/YYYY] \$
run same or contributor			Date (Mill) DOJ 11411
House # Street Addres	4		Date [MM/DD/YYYY] \$
11005e # Street Addres	S	·	Date (MRV/DO/ATELY)
City	State	Zip Code	Date [MM/DD/YXYY] \$
	State		
Full Name of Contributor			Date MM/DD/YYYY) \$
House # Street Addres	ä		Date [MM/DD/YYYY] \$
anna mari			
a transfer in the second			
Gity	State	Zip Code	Date [MM/DD/YYYY] \$
Full Name of Contributor			Date [MM/DD/YYYY] \$
	-		
BEING CHRISTON CONTRACTOR OF THE			
House # Street Addres	S		Date [MM/DD/YYYY] \$
Market Language Control			
10 A		,	
City	State	Zip Code	Date [MM/DD/YYYY] \$
Full Name of Contributor			Date [MM/DD/YYYY] \$
21 22 23	3 4		
House # Street Address	S		Date [MM/DD/YYYY] \$
randoreas ESE Grando			
artesesse.			
City	State	Zip Code	Date [MM/DD/YYYY] \$
Full Name of Contributor			: Date (MM/DD/YYYY) 5:
House # Street Address	3	<u>- </u>	Date [MM/DD/YYYY] \$
Capatholistica Callin de C			
City	State	Zip Code	Date [MM/DD/YYYY] \$
	State	LIP YOU'S	TANK TANK TO A TANK THE TANK T

PART C

Contributions Received From Political Committees

Over \$250.00

Filer Identification Number:

Use this Part to itemize only contributions received from Political Committees with an aggregate value over \$250.00 in the reporting period.

			,	
Full Name of			Date [MM/DD/YYYY]	\$
Contributing Committee				
House # Street Address			Date [MM/DD/YYYY]	\$
			E SERVER NOW	
Gity	State	Zip Code	Date [MM/DD/YYYY]	\$
30 F6 1 - 65 903 5 5 6 6				
Full Name of			Date [MM/DD/YYYY]	\$
Contributing Committee				
House# Street Address			Date [MM/DD/YYYY]	\$
City City	State	Zip Code	Date [MM/DD/YYYY]	\$
			oute (imigoo) iii.ij	*
Full Name of			Date [MM/DD/YYYY]	\$1
Contributing Committee			Date [MM, DD/ 1113]	
an Karific Salah Baraha Sanjar (barah				
House # Street Address			Date [MM/DD/YYYY]	\$
City	State	Zip Code	Date [MM/DD/YYYY]	\$
		-		
Full Name of	books on Statistical	1977.00.000.000.000.000	Date [MM/DD/YYYY]	\$
Contributing Committee				
House # Street Address			Date [MM/DD/YYYY]	Š
House # Street Address			Date (WINI/DD/1411)	, 3
	No.	[
City	State	Zip Code	Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee			Date [MM/DD/YYYY]	\$
contributing committee				
House # Street Address			Date [MM/DD/YYYY]	\$
City	State	Zip Code	Date [MM/DD/YYYY]	\$
Full Name of		MALOS POR A DESTRUCTION OF THE PROPERTY OF THE		\$
Contributing Committee			Pace (MIM/DD/ATA)	*
g Devises in herskip fra Onder Sprag				
House # Street Address			Date [MM/DD/YYYY]	\$
Server en				
City	State	Zip Code	Date [MM/DD/YYYY]	\$
5-90-90-5-5- \$5-6-0				14

PART D

Filer Identification Number:

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)

Full Name of Contributor	Date [MM/DD/YYYY] \$
House # Street Address	Date [MM/DD/YYYY] \$
	The state of the s
City State Zip Code	Date [MM/DD/YYYY] \$
Employer Name	Occupation
er spyrok jedn se jeset ze nomble klad	
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] \$
	C traces
House # Street Address	Date [MM/DD/YYYY] \$
City State Zip Code	Date [MM/DD/YYYY] \$
	LEGICAL DE
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 Num	ber			
Full Name	Filip Avera			
House #	Street Address			
City and the second		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description	7.17.18.	<i></i>		
Full Name				
House #	Street Address			
City	And the second of the second o	State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description	10.700 24.700	• • • • • • • • • • • • • • • • • • •	PO 000003903 35000 957 35 27 8	I Danies
Full Name				
House #	Street Address			
City	Constitution of the Consti	State	Zip Code	Date [MM/DD/YYYY) \$
Receipt Description	1.000 1.000			
Full Name	T 25 17 18 18 18 18 18 18 18 18 18 18 18 18 18			
House #	Street Address			
City		State	Zíp Code	Date [MM/DD/YYYY] \$
Receipt Description			THE VALUE OF THE V	
Full Name	1848			
House #	Street Address			
City 1		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description				
House #	Street Address			
	Sireer Address	l constant	712	THE TRANSPORT OF THE PART OF T
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description		FARMEN SACTORY OF THE	TOTAL STATE OF THE	0.331.77

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 CON	RIBUTIONS RECEIVED-VA	UE OF \$50.00 OR LESS PER CONTRIBU	
TOTAL for the reporting period	(1)	\$	·
		,	
2. IN-KIND CONTRIBUTIONS R	ECEIVED-VALUE OF \$50.0	LTO \$250.00 (FROM PART F)	
TOTAL for the reporting period	(2)	\$	
3. IN-KIND CONTRIBUTION RE	CEIVED-VALUE OVER \$25	I.00 (FROM PART G).	
TOTAL for the reporting period	(3)	\$	
TOTAL VALUE OF IN-KIND CONTRIBU PERIOD (Add and enter amount total on Page 1, Report Cover Page, Item F	s from boxes 1, 2, and 3;	1 ' 1	

SCHEDULE II PART F

In-Kind Contributions Received

VALUE OF \$50.01 TO \$250

Filer Identification Number:			
Full Name of Contributor		Date [MM/DD/YYYY] \$	
House # Street Address		Date [MM/DD/YYYY] \$	
City	Zip Code	Date [MM/DD/YYYY] \$	
Description of Contribution			
Full Name of Contributor		Date [MM/DD/YYYY] 5	· • • • • • • • • • • • • • • • • • • •
House # Street Address		Date [MM/DD/YYYY] \$	
City State	Zip Code	Date [MM/DD/YYYY] \$	
Description of Contribution			
Full Name of Contributor	i e	Date [MM/DB/YYYY] \$	
House # Street Address		Date [MM/DD/YYYY] \$	
City	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 Description of Contribution	Zip Code	Date [MM/DD/YYYY] \$	
Description of Contribution			
Full Name of Contributor		Date [MM/DD/YYYY] \$1	
House # Street Address		Date [MM/DD/YYYY] \$	

Zip Code

State

City

Description of Contribution

Date [MM/DD/YYYY] \$

SCHEDULE II Part G

In-Kind Contributions Received

VALUE OVER \$250

Filer Identification Number:		e de la companya del companya de la companya de la companya del companya de la co
Full Name of Contributor		Date [MM/DD/YYYY] \$
Stephen C		03/14/2025
House # 6001 Street Address	Marine Pkwy	Date [MM/DD/YYYY] \$
City Mentor on the Lake	State OH Zip Code 44060	Date [MM/DD/YYYY] \$
Employer Name	Self employed	Occupation Photographer
Employer Mailing Address / Principal Place of Business	Same address	Description of Campaign Photos Contribution
Full Name of Contributor		Date [MM/DD/YYYY] \$
House # Street Address		Date [MM/DD/YYYY] \$
City 1	State Zip Code	Date [MM/DD/YYYY] \$
Employer Name	To be pro-	noitsquaQ
Employer Mailing Address / Principal Place of Business		Description of
Full Name of Contributor		Date [MM/DD/YYYY] \$
House # Street Address		Date [MM/DD/YYYY] Street \$
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] 5
GU	State Zip Code:	Date [MM/DD/YYYY] \$
Employer Name		Occupation
Employer Mailing Address / Principal Place of Business		Description of Contribution

Statement of Expenditures

	Statement of Expenditures	
Filer Identification Number:		

To Whom Paid Squarespace	Date [MM/DD/YYYY] \$ 51,94
	01/21/2025
House # 225 Street Address Varick Street	Description of Expenditure
City New York State NY Zip Code 10014	Domain Purchase - Multiyear
To Whom Paid JDL Erie	Date [MM/DD/YYYY] \$
	02/03/2025 62
House # 3010 Street Address Buffalo Road	Description of Expenditure
City State PA Zip 16510 Code 16510	13 months hosting
To Whom Paid	Date [MM/DD/YYYY] \$
JDL Erie	02/04/2025
House # 3010 Street Address Buffalo Road	Description of Expenditure
City Erie State PA Zip Code 16510	SSL Certificate
Fo Whom Paid	Date [MM/DD/YYYY] \$
Erie County Elections and Voter Registration	03/07/2025
House # 140 Street Address W 6th Street	Description of Expenditure
Citγ Erie State PA Zip 16501	Filing Fee
To Whom Paid US Postal Service	Date [MM/DD/YYYY] \$
US FUSIGI Service	03/18/2025 46
House # 7175 Street Address Buffalo Road	Description of Expenditure
City Harborcreek State PA Zip Code 16421	PO Box - 6 month
To Whom Paid	Date [MM/DD/YYYY] \$
Copy King	03/20/2025
House # 1162 Street Address W 8th Street	Description of Expenditure
Erie State PA Zip 16502	10 yard signs and 500 business cards
To Whom Paid Men's Warehouse	Date [MM/DD/YYYY] \$ 03/22/2025 122.47
House # 654 Street Address Millcreek Mall Unit 400	Description of Expenditure
City Erie State PA Zip 16509	Clothing supplies for Kickoff event
To Whom Paid Harborcreek Walmart	Date [MM/DD/YYYY] \$ 03/23/2025 \$ 30.89
House # Street Address	Description of Expenditure
Buffalo Road	Description of Experiment
City Harborcreek State PA Zip 16421	Misc Campaign doorknocking supplies

SCHEDULE III

Statement of Expenditures

and the second s		
terit and account of the same	2	
Filer identification Number:		
CHECK THE THE THE CHECK THE CHECK		
		·

To Whom Paid	JC Nickles		• •		Date [MM/DD/YYY 03/23/2025	/ <u>]</u> \$	100
House # 2628	Street Address Cool	hran Street			Description of Expe	nditure	
City Erie		State PA	Zíp Code 1	6508	Musician		
To Whom Paid	Friend of Marcus Jaco	bs			Date [MM/DD/YYY) 04/02/2025	/ <u>1</u> \$	2000
House # 2517	Street Address Bird	Drive			Description of Exper	nditure	
City Erie		State PA	Zip Code	6510	Forgivable Loan		
To Whom Paid	Friends of Marcus Jac	obs			Date [MM/DD/YYY	1] \$	100
House # 2517	Street Address Bird	Drive			04/03/2025 Description of Expe	nditure	
Gity Erie	Residultation Dura	State PA	Zîp 1	6510	Contribution - Accoun	t Openin	
To Whom Paid	McCarty Printing		Code		Date [MM/DD/YYY)	1 \$	200
House #	Street Address				04/24/2025 Description of Exper	ıditure	380
246	E 7tr	State D.	Zip	0500	Postage Batch 1		
Erie		PA	Code	6503	Pustage batch i		
To Whom Paid	U Pick	6			Date [MM/DD/YYY)	20000000	52.87
	<u> </u>	G Buffalo R	d		Date [MM/DD/YYYY 03/12/806 Description of Exper	75	52.87
	Street Address		-90	16510	03/13/808) Iditure	52.87 nch
House # 4452	Street Address	Buffalo R	Zip	16510	03/13/803 Description of Exper	nditure La	
House# 445i City Eri	Street Address	Buffalo R store DH Staurant	Zip	16510	03/13/802 Description of Exper Coumpargn Date [MM/DD/YYYY	nditure La 1 \$	nch
House # 4452 City Eru To Whom Paid	Street Address Eine Re Street Address	Buffalo R store DH Staurant	zip code	16510 16510	Description of Exper Campargu Date [MM/DD/YYYY 03/20/2033	nditure	nch
House # 4452 City Eri To Whom Paid House # 2330	Street Address Eine Re Street Address	Buffalo Risione DA Staurant 38th	Zip Code	[65l0	Description of Experion Date [MM/DD/YYYY 03/30/203] Description of Experion Description of Experion Description De	Lu Lu 1 \$ 5 diture	nch 45.53
House # 4452 City Eri To Whom Paid House # 2330 City Eri	Street Address Eine Re Street Address	Buffalo Risione DA Staurant 38th	Zip Code	[65l0	Description of Exper Campargn Date [MM/DD/YYYY Date [MM/DD/YYYY Date [MM/DD/YYYY Date [MM/DD/YYYY Date [MM/DD/YYYY Date [MM/DD/YYYY Date [MM/DD/YYYY Date [MM/DD/YYYY Date [MM/DD/YYYY Date [MM/DD/YYYY Date [MM/DD/YYYY Date [MM/DD/YYYY Date [MM/DD/YYYY Date [MM/DD/YYYY Date [MM/DD/YYYY Date [MM/DD/YYYY Date [MM/DD/YYYY Date [MM/DD/YYYY Date [MM/DD/YYYY Date [MM/DD/YYYY Date [MM/DD/YYYY Date [MM/DD/YYYY Date [MM/DD/YYYY Date [MM/DD/YYYY Date [MM/DD/YYYY Date [MM/DD/YYYY Date [MM/DD/YYYY Date [MM/DD/YYYY Date [MM/DD/YYYY Date [MM/DD/YYY Date [MM/DD/YYY Date [MM/DD/YYY Date [MM/DD/YYY Date [MM/DD/YY Date [MM/DD/YY Date [MM/DD/YY Date [MM/DD/Y Date [MM/DD/Y Date [MM/DD/Y	Lu Lu 1 \$ 5 aditure	nch 45.53
House # 4452 City Er. To:Whom Paid House # 2330 City Er. To:Whom Paid	Street Address Fine Re Street Address Street Address	Buffalo Risione DA Staurant 38th	Zip Code	[65l0	Description of Exper Camparan Date [MM/DD/YYYY O 2/20/2033 Description of Exper Camparan Date [MM/DD/YYYY	Lu Lu 1 \$ 5 aditure	nch 45.53
House # 4452 City Err To:Whom Paid House # 9-330 City Err To:Whom Paid House #	Street Address Fine Re Street Address Street Address	Buffalo Ristore DA Staurant 38th State PA	Zip Code Zip Code	[65l0	Description of Exper Camparan Date [MM/DD/YYYY O 2/20/2033 Description of Exper Camparan Date [MM/DD/YYYY	nditure Lu S Div	nch 45.53
House # 4452 City Erc To Whom Paid House # 2330 City Erc To Whom Paid House #	Street Address Fine Re Street Address Street Address	Buffalo Ristore DA Staurant 38th State PA	Zip Code Zip Code	[65l0	Description of Exper Campaign Date [MM/DD/YYYY Date [MM/DD/YYYY Date [MM/DD/YYYY Date [MM/DD/YYYY Description of Exper	nditure Lu S I S I I I S I I I S I I	nch 45.53

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:

		48	and the agreement of the second of the secon
Name of Creditor	· #4		Outstanding Balance of Debt
	eet Address	DATE DEBT INCURRED	\$
Tibuse # Stri	eet Address	[MM/DD/YYYY]	
City		State Zip Code	
Description of Debt		di d	
Name of Creditor			Outstanding Balance of Debt
House # Stre	eet Address	DATE DEBT INCURRED [MM/DD/YYYY]	. 5
		[Min/Opf HIL]	
City		State Zip	
Description of Debt		Code	
Name of Creditor		,	Outstanding Balance of Debt
House# Stre	set Address	DATE DEBT INCURRED	\$
W. 1. 2. 2. 1		[IVIM/DD/YYYY]	
City		State Zip	
City		State Zip Code	
Description of Debt		International Control of the Control	
Name of Creditor			Outstanding Balance of Debt
House # Stre	et Address	DATE DEBT INCURRED	\$
1610-161 6-16-161	NOTE TO THE CONTRACTOR OF THE	[MM/DD/YYYY]	
City		State Zip	
		Code	
Description of Debt			
Name of Creditor			Outstanding Balance of Debt
House # Stre	et Address	DATE DEBT INCURRED	* * * * * * * * * * * * * * * * * * *
		[MM/DD/YYYY]	\$ 250 E
City		State Zip	
		Code	
Description of Debt			
Name of Creditor			Outstanding Balance of Debt
	et Address	DATE DEBT INCURRED	(30)
	gr. Addi Cas	[MM/DD/YYYY]	
	2 (1) (1) (1) (2) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	19795342099000000000	ûn e
City		State Zip Code	
Description of Debt	· · · · · · · · · · · · · · · · · · ·	A Proposition Company (Company)	ACTION COLORS