



## 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	Millcreek Democratic Committee							
Street Address	1526 High St.							
City	ERIE	State	PA	Zip Code	16509			

Type of Report (Place x under report type)

1- 6 <sup>th</sup> Tuesday Pre-Primary	2- 2 <sup>nd</sup> Friday Pre-Primary	3- 30 Day Post Primary	4- 6 <sup>th</sup> Tuesday Pre-Election	5- 2 <sup>nd</sup> Friday Pre-Election	6- 30 Day Post Election	7- Annual	Special 2 <sup>nd</sup> 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)		Year	2022		Amendment Report	<input type="checkbox"/>	Termination Report	<input type="checkbox"/>

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
	01-01-2022	12-31-2022	
A. Amount Brought Forward From Last Report	\$	5,152.86	2023 JAN 17 AM 11:25 ERIE COUNTY VOTER REGISTRATION
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	3,100.00	
C. Total Funds Available (Sum of Lines A and B)	\$	8,252.86	
D. Total Expenditures (From Schedule III)	\$	2,552.80	
E. Ending Cash Balance (Subtract Line D from Line C)	\$	5,700.06	
F. Value of In-Kind Contributions Received (From Schedule II)	\$	0	
G. Unpaid Debts and Obligations (From Schedule IV)	\$	0	

## Affidavit Section

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 on paper, is to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this

17 day of January, 2023

Sue Sheffield  
Commonwealth of Pennsylvania - Notary Seal  
Sue Sheffield, Notary Public  
Erie County

My Commission expires December 2, 2026  
Commission number 1424443

Alice E. Niebauer  
Signature of Person Submitting report  
Alice E. Niebauer  
Printed Name

814  
Area Code

392-5176  
Daytime Telephone Number

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

day of 20

Signature

Signature of Candidate

Printed Name

My Commission expires

MO. DAY YR.

Area Code

Daytime Telephone Number

**SCHEDULE I**

**Contributions and Receipts**

**Detailed Summary Page**

Filer Identification Number	millcreek Democratic Committee
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<b>1. Unitemized Contributions and Receipts-\$50.00 or Less per Contributor</b>		
	Total for the reporting period (1)	\$ 1,496.00
<b>2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)</b>		
Contributions Received from Political Committees (Part A)	\$	100.00
All Other Contributions (Part B)	\$	1,310.00
Total for the reporting period (2)	\$	1,410.00
<b>3. Contributions Over \$250.00 (From Part C and Part D)</b>		
Contributions Received from Political Committees (Part C)	\$	0
All Other Contributions (Part D)	\$	0
Total for the reporting period (3)	\$	0
<b>4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)</b>		
Total for the reporting period (4)	\$	200.00
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)	\$	3,100.00

I hereby certify that the information furnished on this report is true and correct to the best of my knowledge and belief. I understand that anyone who furnishes false or misleading information on this report or who omits material or information requested on the report may be subject to criminal sanctions (including fines and imprisonment) and/or civil sanctions (including multiple damages and civil penalties).  
 Signature: \_\_\_\_\_  
 Date: \_\_\_\_\_  
 Title: \_\_\_\_\_

## 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	Millcreek Democratic Committee
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							Amount
Full Name of Contributing Committee		Dan Pastore for Congress			Date [MM/DD/YYYY]	\$	100.00
House #	Street Address		P.O. Box 857		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

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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		Millcreek Democratic Committee						
Full Name of Contributor		Ronald Diehl				Date [MM/DD/YYYY]	\$	70.00
House #	214	Street Address		Roslyn Ave.		Date [MM/DD/YYYY]	\$	100.00
City	ERIE	State	PA	Zip Code	16505	Date [MM/DD/YYYY]	\$	
Full Name of Contributor		Linda McCabe				Date [MM/DD/YYYY]	\$	70.00
House #	815	Street Address		Bancroft Ave.		Date [MM/DD/YYYY]	\$	
City	ERIE	State	PA	Zip Code	16509	Date [MM/DD/YYYY]	\$	
Full Name of Contributor		Samuel Comfort				Date [MM/DD/YYYY]	\$	70.00
House #	903	Street Address		Linden Ave.		Date [MM/DD/YYYY]	\$	100.00
City	Erie	State	PA	Zip Code	16505	Date [MM/DD/YYYY]	\$	
Full Name of Contributor		Isabel Lawrie				Date [MM/DD/YYYY]	\$	100.00
House #	226	Street Address		Mellon Ave.		Date [MM/DD/YYYY]	\$	
City	Girard	State	PA	Zip Code	16417	Date [MM/DD/YYYY]	\$	
Full Name of Contributor		Gerald Beemer				Date [MM/DD/YYYY]	\$	80.00
House #	365	Street Address		Ridgeview Dr.		Date [MM/DD/YYYY]	\$	
City	Erie	State	PA	Zip Code	16505	Date [MM/DD/YYYY]	\$	
Full Name of Contributor		Paul Niebauer				Date [MM/DD/YYYY]	\$	60.00
House #	1526	Street Address		High St.		Date [MM/DD/YYYY]	\$	
City	Erie	State	PA	Zip Code	16509	Date [MM/DD/YYYY]	\$	

## PART B

## All Other Contributions

\$50.01 TO \$250

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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:	Millcreek Democratic Committee
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Full Name of Contributor		Kathleen Fatica		Date [MM/DD/YYYY]	07/18/2022	\$	100.00
House #	4623	Street Address	Southern Dr.	Date [MM/DD/YYYY]		\$	
City	ERIE	State	PA	Zip Code	16506	Date [MM/DD/YYYY]	
Full Name of Contributor		Michael Roesch		Date [MM/DD/YYYY]	07/29/2022	\$	100.00
House #	5505	Street Address	Deerfield Dr.	Date [MM/DD/YYYY]		\$	
City	Fairview	State	PA	Zip Code	16415	Date [MM/DD/YYYY]	
Full Name of Contributor		Sheri Campbell		Date [MM/DD/YYYY]	08/03/2022	\$	100.00
House #	1022	Street Address	Hartt Rd.	Date [MM/DD/YYYY]		\$	
City	ERIE	State	PA	Zip Code	16505	Date [MM/DD/YYYY]	
Full Name of Contributor		Gerald Servidio		Date [MM/DD/YYYY]	07/02/2022	\$	80.00
House #	1720	Street Address	W. Gore Rd.	Date [MM/DD/YYYY]		\$	
City	ERIE	State	PA	Zip Code	16509	Date [MM/DD/YYYY]	
Full Name of Contributor		Claudia DiNardo		Date [MM/DD/YYYY]	08/01/2022	\$	80.00
House #	5215	Street Address	Jason Dr.	Date [MM/DD/YYYY]		\$	
City	ERIE	State	PA	Zip Code	16506	Date [MM/DD/YYYY]	
Full Name of Contributor		Blair Tuttle		Date [MM/DD/YYYY]	08/01/2022	\$	100.00
House #	6141	Street Address	Bridlewood Dr.	Date [MM/DD/YYYY]		\$	
City	Fairview	State	PA	Zip Code	16415	Date [MM/DD/YYYY]	

## 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:	Millcreek Democratic Committee
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Full Name of Contributor		Adam Mikulcik		Date [MM/DD/YYYY]	08/11/2022	\$	100.00
House #	201	Street Address		Fairway Dr.		Date [MM/DD/YYYY]	\$
City	Edinboro	State	PA	Zip Code	16412	Date [MM/DD/YYYY]	\$
Full Name of Contributor				Date [MM/DD/YYYY]		\$	0
House #		Street Address				Date [MM/DD/YYYY]	\$
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Full Name of Contributor				Date [MM/DD/YYYY]		\$	0
House #		Street Address				Date [MM/DD/YYYY]	\$
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Full Name of Contributor				Date [MM/DD/YYYY]		\$	0
House #		Street Address				Date [MM/DD/YYYY]	\$
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Full Name of Contributor				Date [MM/DD/YYYY]		\$	0
House #		Street Address				Date [MM/DD/YYYY]	\$
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Full Name of Contributor				Date [MM/DD/YYYY]		\$	0
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 Identification Number:	Millcreek Democratic Committee
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Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	
							0
House #	Street Address			Date [MM/DD/YYYY]	\$		
						0	
City	State	Zip Code	Date [MM/DD/YYYY]	\$			
						0	
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	
							0
House #	Street Address			Date [MM/DD/YYYY]	\$		
						0	
City	State	Zip Code	Date [MM/DD/YYYY]	\$			
						0	
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	
							0
House #	Street Address			Date [MM/DD/YYYY]	\$		
						0	
City	State	Zip Code	Date [MM/DD/YYYY]	\$			
						0	
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	
							0
House #	Street Address			Date [MM/DD/YYYY]	\$		
						0	
City	State	Zip Code	Date [MM/DD/YYYY]	\$			
						0	
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	
							0
House #	Street Address			Date [MM/DD/YYYY]	\$		
						0	
City	State	Zip Code	Date [MM/DD/YYYY]	\$			
						0	
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	
							0
House #	Street Address			Date [MM/DD/YYYY]	\$		
						0	
City	State	Zip Code	Date [MM/DD/YYYY]	\$			
						0	



**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:						Millcreek Democratic Committee					
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Full Name of Contributor					Date [MM/DD/YYYY]	\$	0
House #	Street Address				Date [MM/DD/YYYY]	\$	0
City	State			Zip Code	Date [MM/DD/YYYY]	\$	0
Employer Name					Occupation		
Employer Mailing Address / Principal Place of Business							

  

Full Name of Contributor					Date [MM/DD/YYYY]	\$	0
House #	Street Address				Date [MM/DD/YYYY]	\$	0
City	State			Zip Code	Date [MM/DD/YYYY]	\$	0
Employer Name					Occupation		
Employer Mailing Address / Principal Place of Business							

  

Full Name of Contributor					Date [MM/DD/YYYY]	\$	0
House #	Street Address				Date [MM/DD/YYYY]	\$	0
City	State			Zip Code	Date [MM/DD/YYYY]	\$	0
Employer Name					Occupation		
Employer Mailing Address / Principal Place of Business							

  

Full Name of Contributor					Date [MM/DD/YYYY]	\$	0
House #	Street Address				Date [MM/DD/YYYY]	\$	0
City	State			Zip Code	Date [MM/DD/YYYY]	\$	0
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:	Millcreek Democratic Committee
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Full Name	Millcreek Township Supervisors								
House #	3608	Street Address	W. 26 <sup>th</sup> St.						
City	ERIE	State	PA	Zip Code	16506	Date [MM/DD/YYYY]	08/15/2022	\$	200.00
Receipt Description	Refund of Picnic Deposit								
Full Name									
House #		Street Address							
City		State		Zip Code		Date [MM/DD/YYYY]		\$	0
Receipt Description									
Full Name									
House #		Street Address							
City		State		Zip Code		Date [MM/DD/YYYY]		\$	0
Receipt Description									
Full Name									
House #		Street Address							
City		State		Zip Code		Date [MM/DD/YYYY]		\$	0
Receipt Description									
Full Name									
House #		Street Address							
City		State		Zip Code		Date [MM/DD/YYYY]		\$	0
Receipt Description									
Full Name									
House #		Street Address							
City		State		Zip Code		Date [MM/DD/YYYY]		\$	0
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:	Millcreek Democratic Committee
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<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>
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TOTAL for the reporting period (1)	\$	0
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<b>2. IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>
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TOTAL for the reporting period (2)	\$	0
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<b>3. IN-KIND CONTRIBUTION RECEIVED-VALUE OVER \$250.00 (FROM PART G)</b>
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TOTAL for the reporting period (3)	\$	0
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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)	\$	0
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**SCHEDULE II**

**PART F**

**In-Kind Contributions Received**

VALUE OF \$50.01 TO \$250

Filer Identification Number:	Millcreek Democratic Committee
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Full Name of Contributor					Date [MM/DD/YYYY]		\$	0	
House #	Street Address				Date [MM/DD/YYYY]		\$	0	
City				State	Zip Code		Date [MM/DD/YYYY]	\$	0

Description of Contribution									
Full Name of Contributor					Date [MM/DD/YYYY]		\$	0	
House #	Street Address				Date [MM/DD/YYYY]		\$	0	
City				State	Zip Code		Date [MM/DD/YYYY]	\$	0

Full Name of Contributor					Date [MM/DD/YYYY]		\$	0	
House #	Street Address				Date [MM/DD/YYYY]		\$	0	
City				State	Zip Code		Date [MM/DD/YYYY]	\$	0
Description of Contribution									

Full Name of Contributor					Date [MM/DD/YYYY]		\$	0	
House #	Street Address				Date [MM/DD/YYYY]		\$	0	
City				State	Zip Code		Date [MM/DD/YYYY]	\$	0
Description of Contribution									

Full Name of Contributor					Date [MM/DD/YYYY]		\$	0	
House #	Street Address				Date [MM/DD/YYYY]		\$	0	
City				State	Zip Code		Date [MM/DD/YYYY]	\$	0
Description of Contribution									

SCHEDULE II  
Part G  
**In-Kind Contributions Received**  
VALUE OVER \$250

Filer Identification Number:	Millcreek Democratic Committee
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Full Name of Contributor					Date [MM/DD/YYYY]		\$	0
House #	Street Address			Date [MM/DD/YYYY]		\$	0	
City		State		Zip Code		Date [MM/DD/YYYY]	\$	0
Employer Name					Occupation			
Employer Mailing Address / Principal Place of Business					Description of Contribution			
Full Name of Contributor					Date [MM/DD/YYYY]		\$	0
House #	Street Address			Date [MM/DD/YYYY]		\$	0	
City		State		Zip Code		Date [MM/DD/YYYY]	\$	0
Employer Name					Occupation			
Employer Mailing Address / Principal Place of Business					Description of Contribution			
Full Name of Contributor					Date [MM/DD/YYYY]		\$	0
House #	Street Address			Date [MM/DD/YYYY]		\$	0	
City		State		Zip Code		Date [MM/DD/YYYY]	\$	0
Employer Name					Occupation			
Employer Mailing Address / Principal Place of Business					Description of Contribution			
Full Name of Contributor					Date [MM/DD/YYYY]		\$	0
House #	Street Address			Date [MM/DD/YYYY]		\$	0	
City		State		Zip Code		Date [MM/DD/YYYY]	\$	0
Employer Name					Occupation			
Employer Mailing Address / Principal Place of Business					Description of Contribution			

**SCHEDULE III**  
**Statement of Expenditures**

Filer Identification Number:	Millcreek Democratic Committee
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To Whom Paid	Millcreek Township Supervisors				Date [MM/DD/YYYY]	\$	370.00
House #	3608	Street Address	W. 26 <sup>th</sup> St.		Description of Expenditure		
City	Erie	State	PA	Zip Code	16506	Picnic of 8-11-22	
To Whom Paid	Erie County Democratic Com				Date [MM/DD/YYYY]	\$	750.00
House #	1305	Street Address	State St.		Description of Expenditure		
City	Erie	State	PA	Zip Code	16501	Spring Dinner	
To Whom Paid	La Bella Catering				Date [MM/DD/YYYY]	\$	300.00
House #	802	Street Address	W. 18 <sup>th</sup> St.		Description of Expenditure		
City	Erie	State	PA	Zip Code	16502	Catering Dep. for Picnic	
To Whom Paid	La Bella Catering				Date [MM/DD/YYYY]	\$	900.00
House #	802	Street Address	W. 18 <sup>th</sup> St.		Description of Expenditure		
City	Erie	State	PA	Zip Code	16502	Catering Balance-Picnic	
To Whom Paid	West County Democratic Committee				Date [MM/DD/YYYY]	\$	232.80
House #	5431	Street Address	Linden Ave		Description of Expenditure		
City	Edinboro	State	PA	Zip Code	16412	Picnic Share	
To Whom Paid					Date [MM/DD/YYYY]	\$	0
House #		Street Address			Description of Expenditure		
City		State		Zip Code			
To Whom Paid					Date [MM/DD/YYYY]	\$	0
House #		Street Address			Description of Expenditure		
City		State		Zip Code			
To Whom Paid					Date [MM/DD/YYYY]	\$	0
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:	Millcreek Democratic Committee
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<b>Name of Creditor</b>						<b>Outstanding Balance of Debt</b>	
<b>House #</b>	<b>Street Address</b>	<b>DATE DEBT INCURRED [MM/DD/YYYY]</b>			\$	0	
<b>City</b>		<b>State</b>		<b>Zip Code</b>			
<b>Description of Debt</b>							

<b>Name of Creditor</b>						<b>Outstanding Balance of Debt</b>	
<b>House #</b>	<b>Street Address</b>	<b>DATE DEBT INCURRED [MM/DD/YYYY]</b>			\$	0	
<b>City</b>		<b>State</b>		<b>Zip Code</b>			
<b>Description of Debt</b>							

<b>Name of Creditor</b>						<b>Outstanding Balance of Debt</b>	
<b>House #</b>	<b>Street Address</b>	<b>DATE DEBT INCURRED [MM/DD/YYYY]</b>			\$	0	
<b>City</b>		<b>State</b>		<b>Zip Code</b>			
<b>Description of Debt</b>							

<b>Name of Creditor</b>						<b>Outstanding Balance of Debt</b>	
<b>House #</b>	<b>Street Address</b>	<b>DATE DEBT INCURRED [MM/DD/YYYY]</b>			\$	0	
<b>City</b>		<b>State</b>		<b>Zip Code</b>			
<b>Description of Debt</b>							

<b>Name of Creditor</b>						<b>Outstanding Balance of Debt</b>	
<b>House #</b>	<b>Street Address</b>	<b>DATE DEBT INCURRED [MM/DD/YYYY]</b>			\$	0	
<b>City</b>		<b>State</b>		<b>Zip Code</b>			
<b>Description of Debt</b>							

<b>Name of Creditor</b>						<b>Outstanding Balance of Debt</b>	
<b>House #</b>	<b>Street Address</b>	<b>DATE DEBT INCURRED [MM/DD/YYYY]</b>			\$	0	
<b>City</b>		<b>State</b>		<b>Zip Code</b>			
<b>Description of Debt</b>							