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Reset F	orm	Print Form

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

Filer Identification Number 2019	9C0222		rt Filed		Candida		X	Committee	<u> </u>	(5)	Lobi	oyist	
Name of Filing Committee, Cano Lobbyist	lidate or	SALA	, PETER	J.		12		<u> </u>	<u> </u>	<u> </u>	1	opporture (§§	:271 L
Street Address		1637	WEST 2	4TH ST	REET						-		
City					State PA		Zip Code 16502		 -				
Type of Report (Place x under rep	oort type)							***************************************					
1-6 th Tuesday 2-2 nd Friday 3 Pre-Primary Pre-Primary P	- 30 Day Post rimary	4- 6 ^{th]} Pre- El		5- 2 nd Friday Pre- Election		6-30 Day Post Election		7- Annual	Special 2 nd Friday Pre-Election		Special 30 Day Post-Election		
				1000	10 P.			∇			17 (54)		
Date Of Election (MM/DD/YYYY)	11/2/2021	Year		20)21	Amendr Report	nent		Termina Report	tion			
	rom Date	2.42	To Date				200519201	For C	Office Use	Only		And the	vacilers.
Expenditures	01/01/2021	5.000	12	/31/202	(386) 82.7 <u>.63</u> 1								
A. Amount Brought Forward From	n Last Report	\$	(3	,255.04)		<u></u>				<u>. 15 350</u>		
B. Total Monetary Contributions and Receipts (From Schedule!)			\$ 0.00										
C. Total Funds Available (Sum of Lines A and B)			\$ (3,255.04)										
D. Total Expenditures (From Schedule III)			\$ 0			Comm.							
E. Ending Cash Balance (Subtract Line D from Line C)			\$ (3,255.04)						. •	C			
F. Value of In-Kind Contributions Received (From Schedule II)			\$ 0.00							1,19-75 L, 414) :		
G. Unpaid Debts and Obligations (From Schedule IV)		\$	· · · · · · · · · · · · · · · · · · ·	0.00			٠		e* 0 0	15			
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Part 1- if this is a Committee report, to	easurer sign her	e. If this	is a Cano	lidate re	port, can	didaté sigr	here.		/\	- A			
I swear (or affirm) that this report, incl Sworn to and subscribed before me thi	is	ieu scrie	aules on	paper, is	s to the bi	est of myk	nowledg	e and belief tru	e/correct a	nd complete	₽.		
28 day of Sonwary	20 22		٠,		_/	th	l	<i>\f.</i>)al	W	_		
Marey i 27ode	COMMO	NWEAL	TH OF P	ENNSY	LVANIA	Sigi ER J. SA	nature oi LA	Person Submit	ting report				
Signature	/ /	NOT	TARIY SE DARP, NO	AL				Printed Name		- 	_		ĺ
My Commission expires 7-19-25	MY COMA	HSSION	E COUN I EXPIRE	8 JULY	(81 ⁴ 1 9. 2025	1	_	451-0	641				}
МО.	DAY COM	188101	NUMB	EA 131	7241 Are	Code		Dayti	me Telepho	one Number			
Part II- If this is a report of a Candidate I swear (or affirm) that to the best of m amended.	's Authorized Co y knowledge an	mmitte d belief	e, candid this politi	ate shal cal com	l sign here mittee ha	e. s not viola	ted any p	provisions of the	Act of Jun	e 3, 1937 (P	L. 1333	, NO.32	20) as
Sworn to and subscribed before me this	5												
day of	20												
							Signat	ture of Candidat	 :e				
Signature							Pr	inted Name			-		
My Commission expires	<u>, </u>										<u></u>		}
MO. DAY	YR.				Are	a Code		Daytim	e Telephon	e Number			
	·												