

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

Filer Identification	6234	Report Filed B	THE RESERVE AND ADDRESS OF THE PERSON	te Snoo	Committee	the state of the state of	Lobbyist
Name of Filing Committee, C Lobbyist		1	ward	Democ	nation	Commit	تحرم ا
Street Address 24 39		Colf	Road		4170		
City D	/ 1 1 1	,007		D in	Zip Code	19/3/	
the	sdelph	10	/	71	FIRE CONTRACTOR OF THE PARTY	11101	
Type of Report (Place x under	A CONTRACTOR OF THE PARTY OF TH	MI STATE OF THE PARTY OF THE PA			A MOTOR CO. 18 A AND		
1- 6 th Tuesday 2- 2 nd Frida Pre-Primary Pre-Primary		4- 6th 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)		Year		Amendment Report		Termination Report	
Summary of Receipts and	From Date	To Date	05-20-21		For	Office Use Only	THE PERSON NAMED AND PARTY.
Expenditures	05-9-5	2 (13-60° LI				
A. Amount Brought Forward	- 5300	115.8	19.00			2	- 1
B. Total Monetary Contribut (From Schedule I)	ons and Receipt	\$ 3.50	00.00			2021	9
C. Total Funds Available		\$ 10.	2010(1			JUN 28 PO COUNTY BD. OF ELECTIONS	CITY COMMISSIONERS
(Sum of Lines A and B)		93	19:00			四季	ğ
D. Total Expenditures		\$ 3	10-			35	2
(From Schedule III)		1 30	15.00	ı		¥.5	SS
E. Ending Cash Balance (Subtract Line D from Line C		380	1600	1			Ş
F. Value of In-Kind Contribut	100	S	400	ł		· ·	Ó
(From Schedule II)	ions Received	11	.00	B		54	හි
G. Unpaid Debts and Obligat	ions	\$		Í		Œ	
(From Schedule IV)			20				
THE RESIDENCE OF THE PARTY OF T	idea	AND DOOR OF THE SHADOW	Affidavit Se	ction			
Part 1- If this is a Committee rep	ort, treasurer sign l	nere. If this is a Ca	ndidate report, c	andidate sign here.			
I swear (or affirm) that this repo		ached schedules o	n paper, is to the	best of my knowler	dge and belief t	true, correct and comple	ete.
Sworn to and subscribed before	me this		,	* 1 	1		
24 day of JUNE	20 21	- 1	_				
600 m	Root			Signature	of Person Subi	nitting report	
CommoRigeateneof Po	ennsylvania - Nota		-3	71 (NY	Printed Nar		
My Commission expires Philade	'ON, Notary Publik Joha County	: ' '	20	<u> </u>	66	85001	
My Commission E	kpires May 19, 209 lumber 1016519	3	<u> </u>	Area Code	Da	ytime Telephone Numb	per
Part II- If this is a report of a Can		Committee can	didate shall sign h	nere.			
I swear (or affirm) that to the be amended.	st of my knowledge	and belief this po	olitical committee	has not violated ar	ny provisions of	the Act of June 3, 1937	(P.L. 1333, NO.320) as
Sworn to and subscribed before	me this						V4
day of	20					<u> </u>	
				Sig	gnature of Cand	lidate 	
Signature		1			Printed Name		
My Commission expires	DAY YR.	_	_	Area Code	- Dav	ytime Telephone Numbi	
MO.	DAT TK.			AIGB COUC	Ja;	rangement ironio	-
						.01	



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.

		La Serie Control	ward Dem	777/ - 0 10 10 10 10 10 10 10 10 10 10 10 10 1	NAME OF TAXABLE PARTY.	Amount
Full Name of Cont	ributing			Date [MM/DD/YYYY]	\$	621
Committee	A CONTRACTOR					O
louse#	Street Address			Date [MM/DD/YYYY]	\$	
	一种和研究	1			150	0
City	Contaction	State	Zip Code	Date [MM/DD/YYYY]	\$	C.
		6.79			-	7)
ull Name of Cont	ributing			Date [MM/DD/YYYY]	\$	
Committee			9			0
				Date [MM/DD/YYYY]	\$	
touse#	Street Address			222 1/44/4 221 1/44/4		0
4000	100		[No est and	Date [MM/DD/YYYY]	\$	
City	2 - Sept. 1985. 1985. 1985.	State	Zip Code	Date Injust political	1	0
4,47		14%的	TANAL MERIT	Date [MM/DD/YYYY]	\$	
Full Name of Cont Committee	ributing			nare familiant political		Ò
				A . Transfer heart	-	
House #	Street Address	•		Date [MM/DD/YYYY]	\$	C.
ALTONIA.			2000 \$2000 2000 0000		114	C
City	1	State .	Zip Code	Date [MM/DD/YYYY]	\$	7
	9,0	17.17.5			*	D
Full Name of Con	ributing			Date [MM/DD/YYYY]	\$	
Committee			-17	Total Indiana		D
House #	Street Address			Date [MM/DD/YYYY]	\$	Ö
	176. 3046				1	
City	Start of Albania and Ca	State	Zip Code	Date [MM/DD/YYYY]	\$	0
			100			
Full Name of Cont	ributing			Date [MM/DD/YYYY]	\$	~
Committee						8
House #	Cause Addis			Date [MM/DD/YYYY]	\$	77 77 6
34.74.74.	Street Addres					0
			Landa de de de la	Date [MM/DD/YYYY]	\$	
City	731	State	Zip Code	Date (MIMIL OD) 1111	*	0
(4)(A)		Control of	The second second	Date [MM/DD/YYYY]	\$	
Full Name of Con	tributing			Date [MINI/DD/1111]		0
Committee	为的发展的			Date [MM/DD/YYYY]	\$	
House #	Street Addres			pare friend and in it.		0
\$ 7 E W	16 1.2 (c)			The state of the s	-	
City		State	Zip Code	Date [MM/DD/YYYY]	\$	0
		100 A	A STATE OF THE STA		10 mm	



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:	6234	52nd wa	ed Democrati	Cur	Commotto
Full Name of Co				Date [MM/DD/YYYY]	\$	
						0
House #	Street Address			Date (MM/DD/YYYY)	\$	
	AND	80.000.00.000 100.0			100	G
City		State	Zip Çode	Date [MM/DD/YYYY]	\$	0
Full Name of Co	ntributor			Date [MM/DD/YYYY]	\$	C-
A COUNTY OF THE PARTY OF THE PA				Deta fasta (DD (VVVV)	774	0
House#	Street Address			Date [MM/DD/YYYY]	\$	
City	7459451041095163	State	Zip Code	Date [MM/DD/YYYY]	\$	75
FERRI		110000000000000000000000000000000000000		D-4- (1425 (DD 0000))	25	8
Full Name of Co	ntributor			Date [MM/DD/YYYY]	\$	0
House #	Street Address			Date [MM/DD/YYYY]	\$	
· 2015年	1000000			a is to be a few horizont.		0
City	1	State	Zip Code	Date [MM/DD/YYYY]	5	0
Full Name of Co	ntributor.	144		Date [MM/DD/YYYY]	\$	the comment of the contract of
				Date [MM/DD/YYYY]	\$	0
House#	Street Address			Dark Hanaly DDA (11.1)		0
City	[CC00000000000000000000000000000000000	State	Zip Cade	Date [MM/DD/YYYY]	\$	0
Full Name of Co	ntributor 4	社の意味	に対象が、影響できない。	Date [MM/DD/YYYY]	\$	The second secon
						0
House #	Street Address			Date [MM/DD/YYYY]	\$	0
City	1000	State	Zip Code	Date [MM/DD/YYYY]	\$	
		4				<u>ට</u>
Full Name of Co	ntributor			Date (MM/DD/YYYY)	\$	0
House#	Street Address			Date [MM/DD/YYYY]	\$	0
17-12-121 17-12-121					127	_
City	1, 200	State	Zip Code	Date [MM/DD/YYYY]	\$	

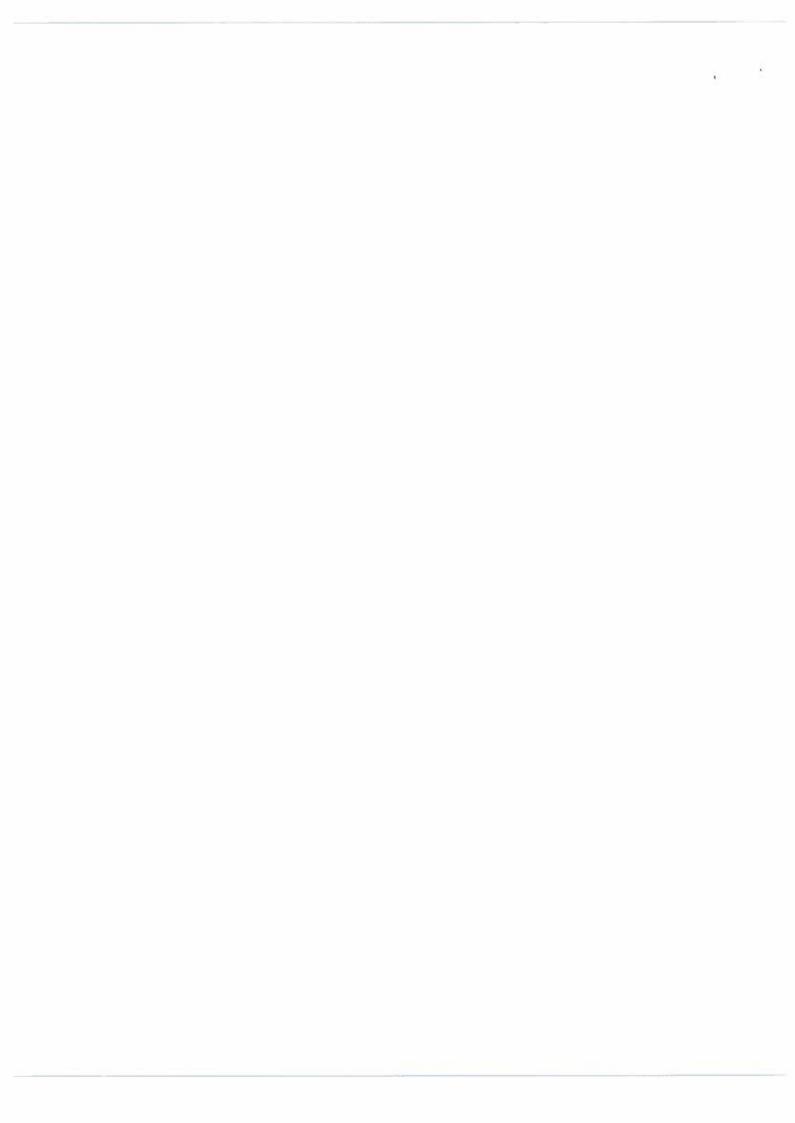
9	

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.

iler (dentification	Number: SQ AC	L WE	h (Being Och di	Lie- Commi	His
ull Name of			ng ya pamuuning (), ay salah digandaying ay a salah andalah ga ah godd Salah an	Date [MM/DD/YYYY]	\$
ontributing Co	mmittee Lanny	Tras	nen for b. f	105-09-202	350000
louse#	Street Address	100	1 -	Date [MM/DD/YYYY]	\$
	1.300	Walk	14 54		
ity The	13/0	State		Date [MM/DD/YYYY]	\$
ull Name of ontributing Co	Committee and the second secon	e g recommended and the second se	and a comment limit from a parameter security of the second sec	Date [MM/DD/YYYY]	\$
_0_15	Street Address	 		Date [MM/DD/YYYY]	\$
ouse#	Stiest Whitess				= 4
ity	20 G VI	State	Zip Code	Date [MM/DD/YYYY]	\$
				w 3 (St. company and place April 1997; a "12 St. St. Statement of the Park April 1997; a statement of the April 1997; a sta	
ull Name of Contributing Co	ommittee			Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
				Total Conference	
Full Name of Contributing Co	ommittee =			Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Full Name of	ammittee			Date [MM/DD/YYYY]	\$
Contributing C	Street Address			Date [MM/DD/YYYY]	\$
7				fan in inner	
City		State	Zip Code	Date [MM/DD/YYYY]	\$
Full Name of Contributing (Committee		Commission - 22 man commission - extension	Date [MM/DD/YYYY]	\$
House #	Street Address			Date [MM/DD/YYYY]	\$
		Photo	7in Codo	Date [MM/DD/YYYY]	\$
City	- **	State	Zip Code	Pare figured pol [111]	
E 2		1.25	1. WAR CO. 76		



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)

ull Name of Con	tributor			Date [MM/DD/YYYY]	\$	
louse #	Street Address			Date [MM/DD/YYYY]	\$	0
ity		State	Zip Code	Date [MM/DD/YYYY]	\$	9
mployer Name			10.700-1	Occupation		
mployer Mailing Frincipal Place of	g Address /					
ull Name of Con			All and the second seco	Date [MM/DD/YYYY]	\$	\bigcirc
louse#	Street Address			Date [MM/DD/YYYY]	\$	7)
City		State	Zip Code	Date [MM/DD/YYYY]	\$	7
Employer Name				Occupation	1 1/	
Employer Mailin	ng Address /					
Employer Mailin Principal Place o Full Name of Co	of Business			Date [MM/DD/YYYY]	\$	0
Principal Place o	of Business			Date [MM/DD/YYYY] Date [MM/DD/YYYY]	\$	0
Principal Place o Full Name of Co	of Business ntributor	State	Zip Code		h	0
Principal Place o Full Name of Co House #	of Business ntributor Street Address	State	Zip Code	Date [MM/DD/YYYY]	\$	0
Principal Place of Full Name of Con House # City Employer Name	Street Address	State	Zip Code	Date [MM/DD/YYYY] Date [MM/DD/YYYY]	\$	0
Principal Place o Full Name of Con House # City Employer Name	Street Address ng Address / of Business	State	Zip Code	Date [MM/DD/YYYY] Date [MM/DD/YYYY]	\$	0
Principal Place of Full Name of Con House # City Employer Name Employer Mailin	Street Address ng Address / of Business	State	Zip Code	Date [MM/DD/YYYY] Date [MM/DD/YYYY] Occupation	\$	0 0
Principal Place of Full Name of Con House # City Employer Name Employer Mailin Principal Place of Full Name of Co	Street Address of Business of Business ontributor	State	Zip Code	Date [MM/DD/YYYY] Date [MM/DD/YYYY] Occupation Date [MM/DD/YYYY]	\$ \$	0

			6	20

PART E

Other Receipts

REFUNDS, INTREST INCOME, RETURNED CHECKS, ETC.

U se this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

17762	34 29 ng	ward	Democrae	tie Committee
Fu l l Hame	and the second	The series of the late of the series		the state of the s
House #	Street Address			·
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Descripti	on	0.7. 3800		
Full Name		THE RESERVE OF THE PARTY OF THE	A SECTION AND ADDRESS OF THE PARTY OF THE PA	
House #	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description	on	- Constant		
Full Name		CONTRACTOR OF STREET,	the second second second	
House #	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description	on			
Full Name	2 10 10 10 10 10 10 10 10 10 10 10 10 10	or transfer for the second	THE PERSON NAMED IN COLUMN	
House #	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description	on		30.00	2 201
Full Name	-	The second state and the second	production of the state of the	
House #	Street Address			
City		State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description	on		W.HOWEN P	
Full Name		makes over the rect and the co	Commenter to the Section of the Commenter of the Commente	
House #	Street Address			
City	1 40	State	Zip Code	Date [MM/DD/YYYY] \$
Receipt Description	on		1965 CT 1966	

		Q.	4

SCHEDULE II PART F

In-Kind Contributions Received

VALUE OF \$50.01 TO \$250

771 23	on Number:	V (1)	Domeration	Committee 4	al services	to the second second second second
ull Name of C	ontributor	The second section of the second	the state of the second state of the second state of the	Date [MM/DD/YYYY]	161	THE STATE STATE OF THE STATE OF
				Date [wilet/DD/1111]	\$	0
House #	Street Address	s		Date [MM/DD/YYYY]	\$	
City		State	Zip Code	Date [MM/DD/YYYY]	\$	1017
Description of	Contribution					
Full Name of Co	ontributor		and a service of the service of the service of	Date [MM/DD/YYYY]		The same of the sa
	2. 1/2			Date [MIM/DD/YYYY]	\$	0
House #	Street Address			Date [MM/DD/YYYY]	\$	
City		State	Zip Code	Date [MM/DD/YYYY]	\$	
Description of (Contribution					
Full Name of Co	ontributor		The second second second second	Date [MM/DD/YYYY]	\$	4-
						\circ
House #	Street Address			Date [MM/DD/YYYY]	\$	
City		State	Zip Code	Date [MM/DD/YYYY]	\$	
Description of (Contribution					
full Name of Co	ontributor	The state of the s		Date [MM/DD/YYYY]	\$	0
fouse #	Street Address			Date [MM/DD/YYYY]	\$	
City		State	Zip Code	Date [MM/DD/YYYY]	\$	
Description of C	Contribution					
uli Name of Co	entributor	COLUMN TO A STATE OF THE PARTY	the things of the second secon	Date [MM/DD/YYYY]	\$	
						0
louse#	Street Address			Date [MM/DD/YYYY]	\$	<u></u>
ity		State	Zip Code	Date [MM/DD/YYYY]	\$	
· 1		0.000				



SCHEDULE II

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECIEVED

USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS DURING THE REPORTING PERIOD DETAILED SUMMARY PAGE

Filer Identification Number	カレマスリ	50" de cogret de	module Committee
1. UNITEMIZED IN KIND CON	RIBUTIONS RECEIVED VA	UE OF \$50.00 OR LESS PER CONTR	RIBUTORS
TOTAL for the reporting period	(1)	\$	C
	EGEIVED:VALUE OF \$50.0	110 \$750.00 (FROM PART E)	
TOTAL for the reporting period	(2)	\$	<u> </u>
3. IN-KIND CONTRIBUTION RE	CEIVED: VALUE OVER \$25	000 (FROM PART G)	
TOTAL for the reporting period	(3)	\$.	17
TOTAL VALUE OF IN-KIND CONTRIBU- PERIOD (Add and enter amount totals on Page 1, Report Cover Page, Item F	s from boxes 1, 2, and 3; a		0



SCHEDULE II

Part G

In-Kind Contributions Received

VALUE OVER \$250

Filer Identification Number	song man	d Democratic	Committee
property of the second of the	AND A PERSONAL PROPERTY AND ADDRESS OF THE PARTY AND ADDRESS.	All the second s	

Full Name of Contri	butor	W. Markey Value a.	Amazon (persona e los religios am personamentos argue <u>s de</u>	Date [MM/DD/YYYY] \$	
					0
House #	Street Address			Date [MM/DD/YYYY] \$	
City	[Tr 152002452-15720]	State .	Zip Code	Date [MM/DD/YYYY] 21/ \$	
Employer Name	South envioren	5397239	· · · · · · · · · · · · · · · · · · ·	Occupation	
	ddress / Principal			Description	
Place of Business			3	of	
Full Name of Contri	butor	· MANAGEMENT TO STREET	to remove the fill fill for him to prove the first particular than a proven	Date [MM/DD/YYYY] \$	
					5
House #	Street Address			Date [MM/DD/YYYY] \$	
City	To be strong to the strong to	State	Zip Code	Date [MM/DD/YYYY] \$	
Employer Name	The Control of	1.00 TOPN	5 k/5 k/5 k/5	Occupation.	
	ddress / Principal			Description of Contribution	
Full Name of Contri	butora	AT THE PERSON NAMED IN	makes and the same to the same	Date [MM/DD/YYYY] \$	
					\bigcirc
House#	Street Address		10 No. 10 - 12 - 12 No. 10 No.	Date [MM/DD/YYYY] \$	
diy		State	Zip Code	Date [MM/DD/YYYY] \$	
Employer Name	NAME OF THE	2557234	1955-1169039501	Occupation	
をからなる。 またいとこと 大学をあれたとか	ddress / Principal			Description of Contribution	
Full Name of Contri	butor			Date [MM/DD/YYYY] \$	<u>o</u> .
House #	Street Address		<u></u>	Date [MM/DD/YYYY] \$	
Clby	1万学师安特的交易	State	Zip Code	Date [MM/DD/YYYY] \$	
Employer Name		AND ADDRESS	[2003] 1 (2014) [2514]	Occupation	
Employer Malling A	ddress / Principal			Description of *** Contribution	



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.

ame of Creditor	State of	- Commission - Contract Contra		Outstanding Balance of Debt
louse #	Street Address	- Sanda - Sanda - Sanda	DATE DEBT INCURRED [MM/DD/YYYY]	\$
lity	4 2 2	State	Zip Code	
Description of De	ebt 6.4	11120100		
7. 中国民国	7-2-2		the second second second second	Outstanding Balance of Debt
Yame of Credito	Street Address	2.cd/ 1-2.dl	DATE DEBT INCURRED [MM/DD/YYYY]	\$
City		State	Zip Code	
Description of D	eht:			
Name of Credito	TARREST.			Outstanding Balance of Debt
House #	Street Address	1 m	DATE DEBT INCURRED [MM/DD/YYYY]	
Clty		State	Zig Code	L'
Description of D			and the state of t	Outstanding Balance of Deb
Name of Credito	or.		The second state of the second	CONTRACTOR RESIDENCE
House #	Street Address		DATE DEBT INCURRED [MM/DD/YYYY]	- T
Chý		State	Zip Code	
Description of 0	Debt	no sel-constitution of the second constitution of the	the same of the same of the same of the same	Outstanding Balance of Deb
Name of Credit	· · · · · · · · · · · · · · · · · · ·		DATE DEBT INCURRED	1. 建筑线线型 (1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
House #	Street Address	3	[MM/DD/YYYY]	
City		State	Zip Code	
Description of	Debt		a south a second of the second of the second	Outstanding Balance of De
Name of Credi	tor			National Association of the Control
House #	Street Address		DATE DEBT INCURRED [MM/DD/YYYY]	
400000	TOTAL STREET OF THE BOARD			



SCHEDULE I

Contributions and Receipts

Detailed Summary Page

1776234 Sandward Demecrat	0	Committee
1.Uniternized Contributions and Receipts-\$50.00 or Less per Contributor		
Total for the reporting period (1)	\$	
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)		
Contributions Received from Political Committees (Part A)	\$	10.00 Mark - 10 M
All Other Contributions (Part B)	\$	
Total for the reporting period (2	\$	
3. Contributions Over \$250.00 (From Part Cand Part D)	4	
Contributions Received from Political Committees (Part C)	\$	3 \$00.00
All Other Contributions (Part D)	\$	
Total for the reporting period (3) \$	3,500,00
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 enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item 8)	t S	3,500,00



Statement of Expenditures

Fleridentification Number 5211 d Wand Donor nation (10	marit doe
Transfer Scharel	Date [MM/DD/XXXY] # 55
House# Street Address	05 10 2021 45000 Description of Expenditure
CON Warberth State PD Code 19072	Ink, Paper, Enudop
To Whom Paid	Date [MM/DD/YYYY] \$
House # Street Address	Description of Expenditure
City State Zip Code	Stanps
TAMPON Paid 20	Date [MM/DD/YYY] \$ 300.00
House # Street Address Shop Rike	(100mm)
City Philo State 1913/ Code PA	Food Side
To Whom Pald Steve Jorg J	Date [MM/DD/YYY] \$ 700.00 Description of expenditure
House # Street Address 2 y 3 9 Col C Rd	
City Puila State PA Code 1913	Date (MM/QE/YYYY) \$
Feyel Gillo	Description of Expenditure
City State Zip Code	了交流的发展。 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
STOWN OF PAIG 1	Date [MM/DD/YYY] \$ 200-00
House# Street Address 2024-N 58 ST	Description of Expenditure
Phal State PA Code 19138	GOTU
To Whom Paid Donign Jones	D5-15204 350.00
House# Street Address 56-3 6 Wyndglo	Description of Expenditure
Chy Phile PA code 19131	Date IMM/DD/YYYY) 4 5 3
Bob Rayland	05-15-2021 200.00 Description of Expenditure
House # Street Address State	
City Py 10 State PA Code 1/22/	1000



Statement of Expenditures

A STATE OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY OF THE PARTY.	and an experience and the season of the control of	THE BOOK WATER WITH MEMBERS AND FROM WASHINGTON PROJECTION OF THE		
Files Identification Number:	ered of time 1	7	Committee	
7.44 公文研	7346 METER	INDIER AGTION	16 W W11705	A Comment of the Parket of the

TaVhom Pilg St	Date [MM/DD/YYYY] = 5
John Watlein	OCT 88-2021 100,00
House # Street Address 5600 Gainen Rd.	Description of Expenditure
City Phila State Ph Code 1913	6. O.TV
TG.Whom Paid	Date [MM/DD/YYYY] \$
Pete Johnson	DESCRIPTION OF Expenditure
House# Street Address 2124 Malvina St	Description of Experience
CITY Phila State PK Code 14131	6.0TU
To Whom Paid	Date [MM/DD/YYXY] \$
10年3年2月2日 10日	Description of Expenditure
House Address 426 10 SE ST	
City Philes State PA Code 1913)	GOTV
To Whom Paid	5-18-2021 200.00
Kathrin Frantin e	Description of Expanditure
House # Street Address 1952 W 52464	
City Phila States PH Goder 19131	GOTV
Weiney Franklin	DS18-204 20000
House# Street Address 840048 The St	Description of Expenditure s
Chy Pails PA Code 1913	erg
To Whom Paid	05-18-204 75.00
Kenth Wilson	Description of Expenditure
House# Street Address 242 NS4 Steet	
Give PG// g State PA Code 15/31 To:Wheim Paid	Door Knocken
To Whom Paid	Date [MM/DD/YYYY] \$
House # Street Address	Description of Expenditure
House # Street Address	
City State Code	PARTIES DODOL ATT. F.
To Whom Paid	Date [MM/DD/YYYY] :
1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	Two Street, An Other Street, Street Street, Street Street, Str
House # Street Address	Description of Expenditure:
House # Street Address City - State Code	

è,

1