### **CAMPAIGN FINANCE REPORT**

PAGE 1 OF (COVER PAGE)

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

					1.				the and the second Affect	
Filer Identification Number:			Report Filed By:	CANDIDATE	1.	COMM	TTEE	<i>"</i>	OBBYIST	, J. 3.
r.* .	ittee, Candidate or Lob		·	S. Carri						
Street Address:	, ,	EILEEN I	MALO	<u>~ 136141</u>		······································				
4035	LA FRAN	SCE ROAD								
city: Ply;	nouth 1	Teeting		State:		Zip Cod	62	_		
TYPE OF REPORT	6TH TUESDAY	2ND FRIDA	1 2007 1 15 - 150 - 44 - 4	30 DAY POST PRIMARY	3.	AMENOM REPORT?		YES	NO	14
	THE TUESDAY	2ND FRIDA	1	30 DAY POST ELECTION	6. <b>Y</b>	TERMINA		YES	NO	مخ
(place X to the right of report type)	ANNUAL 7	YEAR		FILING METHOD		PAPE	<b>M</b> Styr	7	ASKETTE	
Name of Office Sough	Like Strategy and the s			DATE OF ELEC		District	Office			ounty
Monte	Joinery Count	L. Shaill		MO. DAY Y	EAR	Number No Na⊤od	Code 0774	· • —		Code 4/6
777077	John J. Coop.	19 Sierica		11 8 20	- 1	ALL	~ . , ,		ONS FOR	
									E ONLY	
Summary of Re	aceints		AR .		EAR	7. 7.79	VIII 1971		<u> </u>	11.00
and Expenditur		10 25 29	// To	11 28 20	//					
A. Amount Brought	Forward From Last	Report	\$	8202.90				<i>-</i>	,	
B. Total Monetary	Contributions and Re	ceipts (From Sche	dule i) \$	6097.18		: *		<u> </u>		
C. Total Funds Ava	ilable (Sum of Lines	A and B)	\$ 14	1,300.08						
D. Total Expenditur	es (From Schedule	111)		1,043.55				l Ci	$ \odot$	
E. Ending Cash Bal	ance (Subtract Line	D from Line C)	\$ 3	256.53			-	*>	'€' 111 <	
F. Value of In-Kin	d Contributions Reci	eived (From Sched	ule II) \$ 10	4,296.36				مسلم کیان	( 7	
G. Unpaid Debts and Obligations (From Schedule IV)			\$							
AFFIDAVIT SECTION										
1177.46	a Committee repo			<del> </del>					117 T. 107	
I swear (or affirm) th correct and complete.	at this report, including	g the attached schedu	ules, on paper o	or computer diskette, i	are to the	e best of	my kno	wiedge s	nd belief	true,
Sworn to and subscr					7	10	1			
day o	December	<u> </u>	11		2	Person &	/	Banort	<del> </del>	
COMMONWEA	TH OF PENNSYLXAN	Auson	l		''چ			g neport		
BEVERLY A. TH	ARIAL SEAL ignature OMPSOM Notary Publ	ic	{		Pi	rinted Nan				
My c <b>winning</b> inghere	ioesMorrigoffacev Counts	7	<u> </u>	2/5	_		- 30		Mumbas	
My Commission E	xpires December 22, 20	DRS.Y	,	Area Code		יט	aytıme i	ereprione	Number	
PART (1- If this is a report of a Candidate's Authorized Committee, candidate shall sign here										
	at to the best of my k						ns of the	e Act of	June 3, 1	937
Sworm to and subsc	<i>(</i> )		NOTARIAL SE	* ·	/	,	R	1		
day of July PATRICIA A CHAMPRONEUS Whole Det										
MORRISTOWN BOROUGH, NORTH COUNTY Signature of Candidate Whales County Whales Beha										
My commission exp	ires Signature	12 BM		10-94109	2/-/	inted Nar 215 -	237	'- 87	113	
илу сопшинальной ехр	Md.	DAY VA.	<del>/</del>	Area Code	_ /				Number	

#### SCHEDULE I

PAGE 2 OF

## CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting Period
FRIENDS of Eileen Whalon Behr	From To

1. UNITEMIZED	CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER C	ONT	RIBUTOR	Start Control
-	TOTAL for the Reporting Period		\$597.18	

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)	N.a. V.	
Contributions Received from Political Committees (Part A)		\$ 750.00
All Other Contributions (Part B)		\$ 250.00
TOTAL for the Reporting Period	(2)	\$1000,00

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	Lings Canada Can
Contributions Received from Political Committees (Part C)	\$ 3500.00
All Other Contributions (Part D)	\$ 1000.00
TOTAL for the Reporting Period (3)	\$ 4500.00

4 OTHER RECEIPTS - REFUNDS, INTER	REST EARNED, RETURNED CHECK	S, ETC	. (FF	ROM PART	· E)
TO	TAL for the Reporting Period	(4)	\$	Þ	

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.)	\$ 6097.18

PAGE	OF	;

#### 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.

Name of Filing Committee or Candidate				Reporting		
GRIENDS of Eileen Wi	halo	n Behr		From		То
				DATE		AMOUNT
Full Name of Contributing Committee			MO.		YEAR 20//	\$ 250 -
PECO PAC Mailing Address	-		MO.	DAY	YEAR	
2301 Market St., SI.  City Philadelphia	5-1					\$
City	State	Zip Code (Plus 4)	MQ.	DAY	YEAR	œ.
The lade Iphia	17	17/03 -	L	<b></b>	NE AS	\$
REPUBLICAN Women of The Mailing Address Church RL, #10	m	in Line	MO.	23 =	YEAR	\$ 250 -
Mailing Address / / / / / /	; / /00		MO.	DAY	YEAR	
232 Church KIL, #17						\$
ARDMORE	State	Zip Code (Plus 4)   1900 3 -	MO.	DAY	YEAR	\$
	12	11003	MO.	DAY	YEAR	
Full Name of Contributing Committee  Buch Enen Ingersoll Peoplessional Corp.  Mailing Address	Com	imittee for Contin	11	14	20//	\$ 150-
Mailing Address	25 .	CICL	мо.	DAY	YEAR	s
One Oxford Center, 26th FL	30/ TSING	UYANT OT-	<u> </u>	DAY	YEAR	7
Pittsburgh	PA	15214 -	MO.	- DAT	TEMN	\$
Full Name of Contributing Rommittee			MO.	DAY	YEAR	
Full Name of Contributing Committee  COLIT HOUSE COUNCIL of Reput  Mailing Address	Slicar	, Women	10	3/	2011	\$ 150
Mailing Address			MO.	DAY	YEAR	\$
1527 SANOY HILL	State	Zip Code (Plus 4)	MO.	DAY	YEAR	·
Plynouth Meeting		19462 -		1	L. W. M. Stein	\$
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Ť			1			<b>*</b>
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
		_				\$
Full Name of Contributing Committee			MQ.	DAY	YEAR.	\$
Mailing Address	····		MO.	DAY	YEAR	
and the contract						\$
City	State	Zip Code (Plus 4)	Mo.	DAY	YEAR	¢
					1= . =	\$
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Meiling Address		· · · · · · · · · · · · · · · · · · ·	MO.	DAY	YEAR	
						\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
			MO.	DAV	YEAR	~
Full Name of Contributing Committee			1183	"	1	\$
Mailing Address			MO.	DAY	YEAR	\$
	State	Zip Code (Plus 4)		- Inav	VEAR	
City	21818	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
						PAGE TOTAL
Enter Grand Total of Part A on Scho	idule	I, Detailed Summar	y Pag	s, Section	on 2.	\$ 750°
						10-

PAGE	OF

# ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part A.)

Name of Filing Committee or Candidate	Reporting Period	
Francisco of Eileen Whalon Behr	From To	<u> </u>
	DATE	AMOUNT
Full Name of Contributor	1/ 4/ ZOI/ \$ /	00 —
Thomas Krumenacker  Malling Address	MO DAY YEAR	
1755 S. Colleguille Road	\$	
Colleguille PA 19426 -	MO. DAY YEAR	
	MO. DAY YEAR	/ <b>(</b> )
Full Name of Contributor  Michael O'Donoghue  Mailing Address	77 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	150
Mailing Address	MO DAY YEAR	
20 Richings Way  City Broadaxe PA 19002 -	MO. DAY YEAR	
Broadaxe PA 19002 -	\$	
Full Name of Contributor	MO. DAY YEAR \$	
Mailing Address	MO. DAY YEAR \$	<b>10.</b> (1. (1. (1. (1. (1. (1. (1. (1. (1. (1.
City State Zip Code (Plus 4)	MO. DAY YEAR	
Eul Name of Contributor	TOO I SERVICE YEAR	
Full Name of Contributor	*	
Mailing Address	MO. DAY YEAR \$	
City State Zip Code (Plus 4)	MO. DAY YEAR	
	\$	
Full Name of Contributor	MO. DAY YEAR \$	
Mailing Address	MO DAY VEAR	
	\$	
City State Zip Code (Plus 4)	MO. DAY YEAR \$	
	MO DAY YEAR	
Full Name of Contributor	\$	
Mailing Address	MO. DAY YEAR \$	-
City State Zip Code (Plus 4)	MO. DAY YEAR	
	\$	
Full Name of Contributor	MO. DAY YEAR \$	
Mailing Address	NO DAY YEAR	
	\$	
City State Zip Code (Plus 4)	MO. DAY YEAR \$	
Full Name of Contributor	HERMANIA HERMANIA BAYENDE	
	\$	
Mailing Address	MO: DAY YEAR \$	
City State Zip Code (Plus 4)		
-	\$	
		TOTAL
Enter Grand Total of Part B on Schedule I, Detailed Summ	nary Page, Section 2. \$ \alpha	150-

AGE	OF	

#### 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.

Name of Filing Committee or Candidate			1 1	porting I		
FRIENDS of Eiler in	halon E	Sehr		From		To
				DATE		AMOUNT
Full Name of Contributing Committee			M0.	3/	20//	\$ 3,000 -
Colonial Republican ( Meiling Address 619 Maple Street	commit	<del>/                                    </del>	Мо.	DAY		\$
or maple street	State	Zip Code (Plus 4)	MO.	DAY	YEAR	r
Consholacken	PA	19428 -				\$
Full Name of Contributing Committee	locitar.	Countil	MO	DAY:	20//	\$ 500 -
Full Name of Contributing Committee  Americans of Thalian H Mailing Address			мо	DAY	YEAR	\$
2650 Auduson Kom	State	Zip Code (Plus 4)	MO.	DAY	YEAR	<b>→</b>
ALDUBON	CA	19403 -	MIU.	UAT .	(EAR )	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$		
Mailing Address			∴MO.	DAY	YEAR	\$
N	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
City	21816		my.	<u> </u>	1,500	\$
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Mailing Address				DAY	YEAR	\$
	State	Zip Code (Plus 4)	- Mo.	DAY	YEAR	-
City	31016		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			\$
Full Name of Contributing Committee			МО	DAY	YEAR	\$
Mailing Address			МО	DAY	YEAR	\$
	State	Zip Code (Plus 4)	ie Molle	DAY	YEAR	-
City	71316	_	JAIO,			\$
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Mailing Address	***************************************		MO,	DAY	YEAR	
	<u> </u>				VEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee			Mo	DAY	YEAR	\$
Malling Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
						\$
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Mailing Address	,		мо.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
		_			1	PAGE TOTAL
			_		6	
Enter Grand Total of Part C on S	Schedule I	, Detailed Summa	ary Page,	Section	on 3.	\$ 3500-

# ALL OTHER CONTRIBUTIONS

PAGE \_\_\_\_OF \_\_\_

#### OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate	Reporting Period
GRIENOS of Eileen Whalon	3ehr From To
	DATE AMOUNT
Full Name of Contributor	10 31 Zevi \$ 500 -
Gary Brown Mailing Address 6010 West Mill Rogo	MO. DAY YEAR \$
City State Zip Code	(Plus 4) MO.   DAY YEAR \$
Flourtown PA 19031	Occupation
Flour town P4 19031  Employer Name Self Employee  Employee Mailing Address/Principal Place of Business	
Employer Mailing Address/Principal Place of Business	
Full Name of Contributor	MO. DAY YEAR \$
Mailing Address	10 31 ZO11 \$ 500 -
6010 West Mill Rups	3
Full Name of Contributor Prown  Melissa Prown  Mailing Address 6010 West Mill Runs  City State Zip Code PA 19031	
Flour town PA 19031 Employee Name Self Employeel	Occupation
Employer Mailing Address/Principal Place of Business	
Full Name of Contributor	MO. DAY YEAR
Pull Name of Commodular	\$
Mailing Address	MOSS SDAY YEAR \$
City State Zip Code	(Plus 4) DAY YEAR \$
Employer Name	Cccupation
Employer Mailing Address/Principal Place of Business	
Full Name of Contributor	MO. DAY YEAR \$
Mailing Address	MO. DAY YEAR \$
City State Zip Code	(Plus 4) MO. DAY YEAR \$
Employer Name	Occupation
Employer Malling Address/Principal Place of Business	
Full Name of Contributor	MO. DAY YEAR
Mailing Address	MO. DAY YEAR \$
City State Zip Code	(Plus 4) MO. DAY: YEAR \$
Employer Name	Occupation
Employer Mailing Address/Principal Place of Business	
Empoyer maining reactions thereof the or beautiful	
Enter Grand Total of Part D on Schedule I, Detailed	Summary Page, Section 3. PAGE TOTAL \$ 1000 -

#### SCHEDULE II

PAGE	OF	

## 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** 

Name of Filing Committee or Candidate		Reporting Peri	od
FRIENDS of Eilen C	whelm Behr	From	То
1 UNITEMIZED IN-KIND CONTRIBUTION	ONS RECEIVED - VALUE OF	50.00 OR L	ESS PER CONTRIBUTOR
7	FOTAL for the Reporting Period	d (1)	\$
		<u> </u>	
2 IN-KIND CONTRIBUTIONS RECEIVE	D - VALUE OF \$50.01 TO \$2	50.00 (FROM	PART F)
175 AND CONTROL OF THE CONTROL OF TH	TOTAL for the Reporting Period		\$ 135-
3. IN-KIND CONTRIBUTION RECEIVED	) - VALUE OVER \$250.00 (FRC	M PART G	· · · · · · · · · · · · · · · · · · ·
7	TOTAL for the Reporting Period	d (3)	\$ 19,161.36
TOTAL VALUE OF IN-KIND CONTRIBU	UTIONS DURING THIS		
REPORTING PERIOD (Add and enter am and 3; also enter on Page 1, Report C	nount totals from Boxes 1, 2,		\$ 19,296.36
and 3; also enter on rage 1, nepolic o	Over Page, Item		

#### SCHEDULE II PART F

## IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	1	<b>.</b>	R	eporting		
FRIENDS of Eileen	Whalon	Behr		From		To
				DATE		AMOUNT
Full Name of Contributor			MO.	DAY	YEAR	\$ /35 <del>-</del>
Main Line Accounting	14 , L L C		MO.	28 DAY	-20// YEAR	. 735
Mailing Address 987 OLD EAGLE SCHO City Wayne	506 ROAK	SUITE 710	INO.		1.27	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	S
wayne	PA	19087-				*
Description of Contribution: Accounting Service	2					
Full Name of Contributor			MO.	DAY	YEAR	
*	_ '				;	\$ `
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Description of Contribution	LL_				<u> </u>	
and the second s	_	<b>7</b> -				
full Name of Contributor	- 0		MO.	DAY	YEAR	\$
						*
Mailing Address			MO.	DAY	YEAR	\$
256.	State	Zip Code (Plus 4)	МО	DAY	YEAR	
Dity		-	1			\$
Description of Contribution:					1	, , , , , , , , , , , , , , , , , , ,
Full Name of Contributor			MO.	DAY	YEAR	\$
Acillo Addros			MO.	DAY	YEAR	
Mailing Address						\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	<b>*</b>
						\$
Description of Contribution:						
			MO.	DAY	YEAR	
ull Name of Contributor				UAT	PEANGES	\$
Mailing Address			MO.	DAY	YEAR	*
·						\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	<b>S</b>
				<u> </u>		
Description of Contribution:						
Full Name of Contributor			MO.	DAY	YEAR	\$
						*
Mailing Address		-	мо.	DAY	YEAR	\$
7.4	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
City	3.2					\$
Description of Contribution:					- Lugar-	
Enter Grand Total of Part F on	Schedule II	In-Kind Contribu	tions De	etalled		PAGE TOTAL
Summary Page, Section 2.	College II,					\$ 135-
=						

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# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

lame of Filing Committee or Candidate			Re	porting P	eriod	
FRIENDS of Eileen Whalon	Boh	<i>r</i>		From		To
PRIESOS O CIWEN OFFICER	<b>3</b> 0.1			DATE		AMOUNT
ull Name of Contributor				DAY		\$ 1,977-
ull Name of Contributor  BOATHOUSE Conshocke  Asiling Address  113 Fayette Street  Conshohocken	n, C.	F.	//	DAY	Zc//	
Mailing Address			MU.	- 12.		\$
113 Fayette Street	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Conshahacken	PA	Zip Code (Plus 4) 19428 —				4
implayer of Contributor	<u> </u>		Occupation	on IA-		
NA			Descripti	on of Cont	ribution	
Employer Mailing Address/Principal Place of Business			Dor	-AT10	s of R	500 + Beverge for Even
NA			MO.	DAY	YEAR	\$17,184.36
Full Name of Contributor REPUBLIEN PARTY Penn	sylvan	ia	10	27 DAY		417,707.373
Mailing Address			MO.	DAY	TEAR	\$
112 State Street	State	Zip Code (Plus 4)	MO.	DAY	YEAR	s
City le coi - Krise	PA	17101				
Harrissurg Employer of Contributed	<u></u>		Occupati	301.4	cal A	ETTON Committee.
ж. <u>А</u>			Deesint	ion of Con	tribution	· · · · · · · · · · · · · · · · · · ·
Employer Mailing Address/Principal Place of Business			1 "Je	01-3477C	000	mailing GSIS
			MO.		YEAR "	\$
Full Name of Contributor						*
Mailing Address			MO.	DAY	YEAR	\$
	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
City	State					\$
Employer of Contributor			Occupat	tion	<u></u>	
			Beerein	tion of Co	atribution	
Employer Mailing Address/Principal Place of Business	•		Descrip	Iton os co		
			MO.	DAY	YEÂR	
Full Name of Contributor						\$
Mailing Address			· MO.	DAY	YEAR	\$
		Zip Code (Plus 4)	MO.	DAY	YEAR	
City	State	Zip Code irius 4/	100.			\$
Employer of Contributor			Occupa	tion	1	
			<u> </u>		-44(5):414-	
Employer Mailing Address/Principal Place of Busines	5		Descrip	otion of Co	anti iout ion	
			MO.	DAY	YEAR	
Full Name of Contributor						\$
Mailing Address			MO.	DAY	YEAR	<b>-</b> s
	1 64.45	Zip Code (Plus 4)	MO.	DAY	YEAR	
City	State	Tib code files 4				<b>] \$</b>
Employer of Contributor		<u>.                                    </u>	Occup	ation		
			Descri	ption of C	antribution	
Employer Mailing Address/Principal Place of Busines	3 33		00001			
					_	PAGE TOTAL
Enter Grand Total of Part G on Sch	edule l	I, In-Kind Contrik	outions	Detaile	d	\$ 19,161.36
Summary Page, Section 3.						

DSEB-502 (7-99)

PAGE	OF	

#### SCHEDULE III

# STATEMENT OF EXPENDITURES

ame of Filing Committee or Candidate				orting Pe		
ame of Filing Confilintee of Calculation	11.10	306~	Fr	om		To
FRIENDS of Eileen h	rain	3CP P				
			MO.	DAY	YEAR	Amount
Whom Paid		Ì	11 /	11 6	20//	\$ 967.55
STEPPY'S			Description	of Expen	diture	
2912 Swede Rom			VITE	<u>roky</u>	PAR	<u> </u>
ty		Zip Code (Plus 4)	5.00	PENSE	· •	•
East Noviton	1/A 1	9401 -				Amount
Whom Paid			MO.	DAY	YEAR	\$ 1876 00
Thomas Speers			Description	of Expen	diture	\$ /876.00
181 W. Germantown (1817)  114 Plymouth meeting	ike		Reim	30 rs	e for	r Blue Bell
637 O. Gerran	State	Zip Code (Plus 4)				Expenses
"Plymouth meeting	PA 1	9462 -	PUN	いじんぞ	Seve	CAbeyzez
			MO.	DAY	YEAR	Amount \$ 5,706,00
E3 GREGUP			76	3/	<del>て</del> の//	\$ 0,700,00
6 Whom Paid E 3 GRECUP  Aailing Address 316 Laurel Drive			Pein	tone 4	Des.	154
3/6 Laure 10110	State	Zip Code (Plus 4)		0		0
Collegerille	PA	19426 -				
e Whom Paid			MO:	DAY	YEAR	\$3,700.00
E 2 Comment			// Description	<u> </u>	<i>که۱۱</i>	\$3,700.00
Mailing Address 316 Laurel Drive			Description	u ot Exbe	naiture ⊁ ♪	8166.
316 Laurel Srive		Zin Code (Plus 4)	7 /2/	<del></del>	· 20 4.	S1911.
Colleger, )le	PA	Zip Code (Plus 4)				_
Co/legerill	]		S MO	DAY	YEAR-	Amount
To Whom Pard						\$
Mailing Address			Descriptio	n of Expe	nditure	
		Zip Code (Plus 4)	<u> </u>			
City	State	Zip Code (Pius 4)				
			MO.	DAY	YEAR	Amount
To Whom Paid			,,,,,		, ,	\$
Mailing Address			Description	on of Expe	enditure	
manny raw						
City	State	Zip Code (Plus 4)				
				0.1V	YEAR	Amount
To Whom Paid			MO.	UAY	TEAR	\$
			Description	on of Exp	enditure	
Mailing Address						
City	State	Zip Code (Plus 4)				
				el include or se		Amount
To Whom Paid			MO.	DAY	YEAR	\$
			Descripti	on of Exp	enditura	
Mailing Address			<u> </u>			
City	State	Zip Code (Plus 4)				
-						
						PAGE TOTAL
Enter Grand Total of Expenditures of						\$11,043.55