

Campaign Finance Report

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

Filer Identification Number :		20190143		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: CRUMLISH JAMES 19												
Street Address: 925 HARVEST DR.,PO BOX 3010												
City: BLUE BELL						State: PA			Zip Code: 19422			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2019		FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/>	DISKETTE				
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code
						MO	DAY	YEAR	DEM			
						11	5	2019	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		4	2	2019		5	6	2019				
A. Amount Brought Forward From Last Report					\$ 0.00							
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 542.00							
C. Total Funds Available (Sum Of Lines A and B)					\$ 0.00							
D. Total Expenditures (From Schedule III)					\$ 23,566.00							
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 30,634.00							
F. Value Of In-Kind Contributions Received (From Schedule II)					\$ 0.00							
G. Unpaid Debts And Obligations (From Schedule IV)					\$ 27,268.00							

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 filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code 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 of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
CRUMLISH JAMES 19	From: <u>4/2/2019</u> To: <u>5/6/2019</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 0.00

2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	
Contributions Received From Political Committees (Part A)	\$ 100.00
All Other Contributions (Part B)	\$ 3,600.00
TOTAL for the Reporting Period (2)	\$ 3,700.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 45,000.00
All Other Contributions (Part D)	\$ 8,500.00
TOTAL for the Reporting Period (3)	\$ 53,500.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 0.00

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 Page1, Report Cover Page, Item B.)	\$ 57,200.00
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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 CRUMLISH JAMES 19	Reporting Period From: <u>4/2/2019</u> To: <u>5/6/2019</u>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;">DATE</td> <td style="width: 40%; border: none;">AMOUNT</td> </tr> </table>		DATE	AMOUNT
DATE	AMOUNT		

Full Name of Contributing Committee CITIZENS FOR GREENLEAF			MO	DAY	YEAR	\$ 100.00
Mailing Address 1555 KENWOOD RD			4	29	2019	
City HUNTING VALLEY	State PA	Zip Code (Plus 4) 08033				

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL
\$ 100.00

PART B
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
CRUMLISH JAMES 19	From: <u>4/2/2019</u> To: <u>5/6/2019</u>

DATE	AMOUNT
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Full Name of Contributor GREGORY VOSHELL			MO	DAY	YEAR	\$ 250.00
Mailing Address 106 INIS WAY			5	8	2019	
City PHILA	State PA	Zip Code (Plus 4) 19355				

Full Name of Contributor				MO	DAY	YEAR	\$	100.00
JAMES MCCARRIE								
Mailing Address				5	1	2019		
2185 RITNER ST								
City		State	Zip Code (Plus 4)					
PHILA		PA	19145					

Full Name of Contributor			MO	DAY	YEAR	\$	50.00
KELLY B. HOTYE							
Mailing Address			4	2	2019		
3934 NEITHERFIELD							
City	PHILA	State	Zip Code (Plus 4)				
		PA	19129				

Full Name of Contributor				MO	DAY	YEAR	\$ 250.00
BRUCE CASTOR							
Mailing Address				5	6	2019	
PO BOX 430							
City		State	Zip Code (Plus 4)				
LEDERACH		PA	19450				

Full Name of Contributor				MO	DAY	YEAR	\$	250.00
ABRAHAM REICH								
Mailing Address				5	8	2019		
1520 SPRUCE ST		City	PHILA				State	PA

Full Name of Contributor BRIAN GRADY			MO	DAY	YEAR	\$ 250.00
Mailing Address 811 CRESTVIEW RD			4	29	2019	
City PHILA	State PA	Zip Code (Plus 4) 19128				

Full Name of Contributor ANDREW ESTEPALI			MO	DAY	YEAR	\$ 250.00
Mailing Address 302 JONES CT			4	29	2019	
City EXTON	State PA	Zip Code (Plus 4) 19341				

Full Name of Contributor KYLE ELLIOTT			MO	DAY	YEAR	\$ 150.00
Mailing Address 411 EAST HECTOR			4	29	2019	
City CONSHOHOCKEN	State PA	Zip Code (Plus 4) 19428				

Full Name of Contributor THOMAS J. ELLIOTT			MO	DAY	YEAR	\$ 250.00
Mailing Address 6112 BUTHER PLC			4	29	2019	
City BLUE BELL	State PA	Zip Code (Plus 4) 19422				

Full Name of Contributor ILLEGIBLE O'BOYLE			MO	DAY	YEAR	\$ 250.00
Mailing Address 515 PARK DR						
City PLYMOUTH MTG	State PA	Zip Code (Plus 4) 19462				

Full Name of Contributor AIMEE KUMEN			MO	DAY	YEAR	\$ 250.00
Mailing Address 1014 UNION MTG RD			4	29	2019	
City BLUE BELL	State PA	Zip Code (Plus 4) 19422				

Full Name of Contributor JAMES CITY PATRICK			MO	DAY	YEAR	\$ 50.00
Mailing Address 149 E. HARTWELL			4	29	2019	
City PHILA	State PA	Zip Code (Plus 4) 19118				

Full Name of Contributor MARY RITA SIEDZIKOWSKI			MO	DAY	YEAR	\$ 100.00
Mailing Address 50 W. INDIAN LN			4	29	2019	
City EAGLEVILLE	State OR	Zip Code (Plus 4) 19403				

Full Name of Contributor TIMOTHY MYERS			MO	DAY	YEAR	\$ 250.00
Mailing Address 600 WYNDMOOR AVE			4	29	2019	
City WYNDMOOR	State PA	Zip Code (Plus 4) 19038				

Full Name of Contributor JILL ANDERSON			MO	DAY	YEAR	\$ 250.00
Mailing Address 7568 REGENCY LN			4	25	2019	
City BOCA RATON	State FL	Zip Code (Plus 4) 33433				

Full Name of Contributor BERYL HU			MO	DAY	YEAR	\$ 250.00
Mailing Address 535 PRESCOTT			4	3	2019	
City MERION STATION	State PA	Zip Code (Plus 4) 19066				

Full Name of Contributor LAWRENCE LOUGHENG			MO	DAY	YEAR	\$ 250.00
Mailing Address 860 TOWNSHIP LINE RD			4	29	2019	
City GWYNEDD VLY	State PA	Zip Code (Plus 4) 19437				

Full Name of Contributor			MO	DAY	YEAR	\$ 150.00
STUART SMITH						
Mailing Address			5	1	2019	
1758 VALLEY GREENE RD						
City	State	Zip Code (Plus 4)				
PAOLI	PA	19301				

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL
\$ 3,600.00

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 from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate CRUMLISH JAMES 19	Reporting Period From: <u>4/2/2019</u> To: <u>5/6/2019</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee COMMONWEALTH HERITAGE P.A.C.				MO	DAY	YEAR	\$ 15,000.00
Mailing Address 821 E. SAGE				4	15	2019	
City WEST CHESTER	State PA	Zip Code (Plus 4) 19382					
Full Name of Contributing Committee INT'L UNION OF OPERATING ENGINEERS 542 P.A.F.				MO	DAY	YEAR	\$ 4,000.00
Mailing Address 415 N. 5TH STREET				5	3	2019	
City PHILA	State PA	Zip Code (Plus 4) 19123					
Full Name of Contributing Committee PLUMBERS UNION LOCAL 690 P.A.F.				MO	DAY	YEAR	\$ 500.00
Mailing Address 2791 SOUTHAMPTON RD							
City PHILA	State PA	Zip Code (Plus 4) 19154					
Full Name of Contributing Committee PHILA FIREFIGHTERS & PARAMEDICS LOCAL 22 FIRE P.A.C.				MO	DAY	YEAR	\$ 500.00
Mailing Address 415 N. 5TH STREET							
City PHILA	State PA	Zip Code (Plus 4) 19154					
Full Name of Contributing Committee LOCAL UNION II 98 IBEW COMITI ON POLITICAL EDUCATION				MO	DAY	YEAR	\$ 20,000.00
Mailing Address 1719 SPRING GARDEN ST				4	26	2019	
City PHILA	State PA	Zip Code (Plus 4) 19130					

Full Name of Contributing Committee			MO	DAY	YEAR	\$5,000.00
DISTRICT COUNCIL 27 POLITICAL ACTION COMMITTEE						
Mailing Address 2980 SOUTHAMPTON RD			4	25	2019	
City PHILA	State PA	Zip Code (Plus 4) 19154				

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 45,000.00

PART D
ALL OTHER CONTRIBUTIONS
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 CRUMLISH JAMES 19	Reporting Period From: <u>4/2/2019</u> To: <u>5/6/2019</u>
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
JOHN P. ELLIOTT							
Mailing Address 1055 OAK RIDGE DR				4	28	2019	\$ 500.00
City BLUE BELL	State PA	Zip Code (Plus 4) 19422					
Employer Name EG PC				Occupation ATTY			
Employer Mailing Address/Principal Place of Business 925 HARVEST DR			City		State	Zip Code (Plus 4)	

Full Name of Contributor				MO	DAY	YEAR	
JOHN NEUGEBAUER							
Mailing Address 3150 METHACTON				4	29	2019	\$ 1,000.00
City WORCHESTER	State PA	Zip Code (Plus 4) 19403					
Employer Name RET				Occupation ATTY			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	

Full Name of Contributor				MO	DAY	YEAR	
MARK SCHWAMLER							
Mailing Address 329 SPRING FIELD				4	29	2019	\$ 500.00
City PHILA	State PA	Zip Code (Plus 4) 19118					
Employer Name EG. P.C.				Occupation ATTY			
Employer Mailing Address/Principal Place of Business 925 HARVEST DR			City BLUE BELL		State PA	Zip Code (Plus 4)	

Full Name of Contributor JOHN M. ELLIOTT			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 925 HARVEST DR SUITE 300			4	29	2019	
City BLUE BELL	State PA	Zip Code (Plus 4) 19422				
Employer Name EG P.C.			Occupation ATTY			
Employer Mailing Address/Principal Place of Business 925 HARVEST DR		City BLUE BELL	State PA	Zip Code (Plus 4) 19422		

Full Name of Contributor FREDDIE P. SANTARELLI			MO	DAY	YEAR	\$ 500.00
Mailing Address 2933 S. BROAD ST			4	29	2019	
City PHILA	State PA	Zip Code (Plus 4) 19148				
Employer Name EG. P.C.			Occupation ATTY			
Employer Mailing Address/Principal Place of Business 925 HARVEST DR		City	State	Zip Code (Plus 4)		

Full Name of Contributor GRANT PALMER			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 604 HARTS LN			4	8	2019	
City CONSHOHOCKEN	State PA	Zip Code (Plus 4) 19438				
Employer Name BLACK HOME			Occupation ATTY			
Employer Mailing Address/Principal Place of Business ONE LOGAN SQUARE		City	State	Zip Code (Plus 4)		

Full Name of Contributor RONALD BOSCHOUR			MO	DAY	YEAR	\$ 500.00
Mailing Address 9428 LOCAST			4	8	2019	
City PHILA	State PA	Zip Code (Plus 4) 19106				
Employer Name BELL KUHN			Occupation ATTY			
Employer Mailing Address/Principal Place of Business ONE LOGAN SQUARE		City	State	Zip Code (Plus 4)		

Full Name of Contributor ALAN HOFFMAN			MO	DAY	YEAR	\$ 1,000.00
Mailing Address ONE LOGAN SQUARE						
City	State	Zip Code (Plus 4)				
Employer Name BLACK HOME			Occupation			
Employer Mailing Address/Principal Place of Business ONE LOGAN SQ		City	State	Zip Code (Plus 4)		

Full Name of Contributor C. CRAIG LORO			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 422 W CHESTNUT HILL			4	10	2019	
City PHILA	State PA	Zip Code (Plus 4) 19118				
Employer Name RETIRED			Occupation ATTORNEY			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

Full Name of Contributor DION & RASSIAS			MO	DAY	YEAR	\$ 500.00
Mailing Address 1125 WALNUT ST			5	2	2019	
City PHILA	State PA	Zip Code (Plus 4) 19107				
Employer Name THE BERG FIRM			Occupation ATTY			
Employer Mailing Address/Principal Place of Business 1125 WALNUT ST		City	State	Zip Code (Plus 4)		

Full Name of Contributor ROBERT MONJELOZZI			MO	DAY	YEAR	\$ 1,000.00
Mailing Address			5	2	2019	
City	State	Zip Code (Plus 4)				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL

\$ 8,500.00

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.

Name of Filing Committee or Candidate	Reporting Period
	From: To:

			DATE		AMOUNT	
Full Name			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Receipt Description						

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 0.00

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

Name of Filing Committee or Candidate		Reporting Period	
CRUMLISH JAMES 19		From: <u>4/2/2019</u> To: <u>5/6/2019</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period		(1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period		(2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period		(3)	\$ 0.00
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, Reports Cover Page, Item F.)			\$ 0.00

SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	Reporting Period From: To:
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						PAGE TOTAL \$ 0.00

SCHEDULE II
PART G
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OVER \$250.00

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
CRUMLISH JAMES 19	From <u>4/2/2019</u> To: <u>5/6/2019</u>

DATE				AMOUNT		
To Whom Paid 21ST WARD, FRIENDS OF			MO	DAY	YEAR	\$ 1,500.00
Mailing Address 539 GATES STREET			5	10	2019	
City PHILA	State PA	Zip Code (Plus 4) 19128	Description of Expenditure BALLOTT SUPPORT			
To Whom Paid FRIENDS OF EDWARD ILLEGIBLE			MO	DAY	YEAR	\$ 2,000.00
Mailing Address 3025 SOUTH 74TH ST			5	10	2019	
City PHILA	State PA	Zip Code (Plus 4)	Description of Expenditure BALLOTT SUPPORT			
To Whom Paid FRIENDS OF 27TH WARD			MO	DAY	YEAR	\$ 250.00
Mailing Address 4301 LAUCH WOOD AVE			5	10	2019	
City	State	Zip Code (Plus 4)	Description of Expenditure BALLOTT PRINTING			
To Whom Paid CHELTENHAM PRINTING			MO	DAY	YEAR	\$ 816.20
Mailing Address 518 RYERS AVE			5	10	2019	
City CHELTENHAM	State PA	Zip Code (Plus 4) 19012	Description of Expenditure ILLEGIBLE			
To Whom Paid LIBERTY SQUARE PAC			MO	DAY	YEAR	\$ 20,000.00
Mailing Address 3308 BARILY ST			4	25	2019	
City PHILA	State PA	Zip Code (Plus 4) 19104	Description of Expenditure BALLOT SUPPORT/PRINTING			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 24,566.20

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

Name of Filing Committee or Candidate CRUMLISH JAMES 19				Reporting Period From: <u>4/2/2019</u> To: <u>5/6/2019</u>			
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DATE				Outstanding Balance of Debt		
Name of Creditor JAMES C CRUMLISH			MO	DAY	YEAR	\$ 4,500.00
Mailing Address 4713 SHELDON			4	19	2019	
City PHILA	State PA	Zip Code (Plus 4) 19127	Description of Debt LOAN PYRAMID CONSULTING			
DATE				Outstanding Balance of Debt		
Name of Creditor JAMES C CRUMLISH			MO	DAY	YEAR	\$ 708.00
Mailing Address 4713 SHELDON ST			5	11	2019	
City PHILA	State PA	Zip Code (Plus 4) 19127	Description of Debt LOAN / PRINTING			
DATE				Outstanding Balance of Debt		
Name of Creditor JAMES C. CRUMLISH			MO	DAY	YEAR	\$ 860.00
Mailing Address 4713 SHELDON ST			5	1	2019	
City PHILA	State PA	Zip Code (Plus 4) 19127	Description of Debt PRINTING/ILLEGIBLE/LOAN ADVANCE			
DATE				Outstanding Balance of Debt		
Name of Creditor JAMES C. CRUMLISH			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 4713 SHELDON ST			4	3	2019	
City PHILA	State PA	Zip Code (Plus 4) 19127	Description of Debt LOAN/CAMPAIGN FUNDS			

				DATE			Outstanding Balance of Debt
Name of Creditor JAMES C. CRUMLISH				MO	DAY	YEAR	\$ 15,000.00
Mailing Address 4713 SHELDON ST				4	8	2019	
City PHILA	State PA	Zip Code (Plus 4) 19127	Description of Debt LOAN / ELECTION DAY PRINTING SQUARE				
				DATE			Outstanding Balance of Debt
Name of Creditor JAMES C. CRUMLISH				MO	DAY	YEAR	\$ 5,000.00
Mailing Address 4713 SHELDON ST				5	6	2019	
City	State	Zip Code (Plus 4)	Description of Debt LOAN ADVANCE / CONSULTING SERVICES / ILLEGIBLE				
				DATE			Outstanding Balance of Debt
Name of Creditor JAMES CRUMLISH				MO	DAY	YEAR	\$ 100.00
Mailing Address 4713 SHELDON				3	11	2019	
City PHILA	State PA	Zip Code (Plus 4) 19127	Description of Debt FILING FEE / LOAN				
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL \$ 27,168.00