Campaign Finance Report

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

Filer Identificati Number :	on 2022	20185			Report		CANDI	DATE		соми	4ITTEE	✓	LOBI	BYIST	
Name of Filing C	Committee, Candid	late or L	obbyist:	P	ATRIO	TS FC	R COLE	MAN							
Street Address:	PO BOX 451														
City:	WHITEHALL						State:	PA			Zip Cod	de: 18	3052		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PE PRIMARY	RE-	2. X	30 DA		POST-	3.		AMENDM REPORT		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PELECTION	RE-	5.	30 DA		POST-	6.		TERMINA REPORT		Yes	No	\
report type)	ANNUAL REPORT	7.	Year 2022				NG METH				PAPER		$\overline{}$	DISKE	TTE
Name of Office S	Sought by Candida	ite:	•				DATE C	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County
							МО	DAY	YE	AR		10000	REP	<u> </u>	
							11		8	2022		(SEE IN	STRUCTI	ONS FOR O	CODES)
	Receipts and	МО	DAY YE	AR			МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY	
Expenditures			3 29	20	22 T	0	5	5	2	2022					
A. Amount Bro	ught Forward Fro	m Last R	eport			\$				0.00					
B. Total Moneta	ary Contributions	And Rec	eipts (From Scl	hed	ule I)	\$			82,7	700.00					
C. Total Funds	Available (Sum O	f Lines A	and B)			\$			82,7	700.00					
D. Total Expend	ditures (From Sch	edule II	I)			\$			72,9	30.16					
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)			\$			9,7	69.84					
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sched	dule	e II)	\$			337,1	37.04					
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV)			\$			70,0	00.00					
			AF	FI	DAVI	T SE	CTION								
PART I - If this is	s a Committee rep	ort, trea	surer sign here	e. If	this is	a Car	ndidate r	eport, d	candi	date sig	ın here.				
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	e attached schedu	les 1	filed on	paper	or by elect	tronic m	edium	, are to t	he best o	f my knov	wledge	and belie	ef , true
Sworn to and subs	cribed before me thi day of	s	20						S	ignature	of Perso	n Submit	ting Rep	oort	
	Signatu	ire				- -					Prin	ted Name	•		
My Commission Ex	kpires 					_					Ema	il			
	мо	D	AY Y	/R				Are	ea Cod	le	Daytim	e Teleph	one Nu	mber	
Part II- If this is	a report of a can	didate's	authorized Con	nmi	ittee, C	andid	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of red.	my knowle	edge and belief tl	nis p	olitical	comm	ittee has r	not viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333,
Sworn to and subsc	ribed before me this day of		20							s	ignature o	of Candida	ate		
						-					Printe	d Name			
My Commission Exp	Signature					-					Ema	il			
, солинавіон ехр						_									
	МО	D	AY	YR				Area	Code		Da	aytime T	elephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
PATRIOTS FOR COLEMAN	From:	<u>3/29/202</u>	2 <u>2</u> To:	5/2/2022
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)			\$	0.00
All Other Contributions (Part B)			\$	700.00
TOTAL for the Reporting) Period	(2)	\$	700.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	82,000.00
TOTAL for the Reporting	Period	(3)	\$	82,000.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	82,700.00

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 Commi	ttee or Candidate	е		Re	porting I	Period			
				Fro	om:		То	:	
			'			DATE			AMOUNT
Full Name of Contribution	ng Committee				мо	DAY	YEAR		
Mailing Address								\$	0.00
City		State	Zip Code (Plus 4	1)					

PAGE TOTAL
0.00

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

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 Candi	date		Rep	orting P	eriod			
PATRIOTS FOR COLEMAN			Fro	m:	3/29/2	2022 T o):	5/2/2022
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
SHEILA HORWATH								
Mailing Address 4149 HILL STRE	ET						\$	150.00
City COPLAY	State	Zip Code (Plus 4)	4	28	2022		
	PA	18037						
Full Name of Contributor CHRISTOPHER STUMP	HRISTOPHER STUMP				DAY	YEAR		
Mailing Address 1492 BETTE LN							\$	200.00
City HELLERTOWN					28	2022		
	PA	18055						
Full Name of Contributor				МО	DAY	YEAR		
SARAH ROHN								
Mailing Address 545 PINE TOP T	RAIL						\$	200.00
City BETHELEHEM	State	Zip Code (Plus 4)	4	28	2022		
	PA	18055						
Full Name of Contributor				МО	DAY	YEAR		
ANN CARPENTER				1.0		12/11		
Mailing Address 2140 SPYGLASS	HILL						\$	150.00
City CENTER VALLEY	State	Zip Code (Plus 4)	4	28	2022		
	PA	18034						
								DACE TOTAL

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

PAGE TOTAL \$ 700.00

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			Reporting	Period					
			From:			То:			
				DA	TE		P	AMOUNT	
Full Name of Contributing Committee				МО	DAY	YEAR		0	.00
Mailing Address							+	U	.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on Scheo	dule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.0)0

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				Repo	orting Pe	riod			
PATRIOTS FOR COLEMAN				Fron	n:	<u>3/29/2</u>	<u>022</u> To	:	5/2/2022
					DA	ATE		АМ	OUNT
Full Name of Contributor					мо	DAY	VEAD		
GARY AND SUSAN DANIELS					MO	DAT	YEAR	\$	5,000.00
Mailing Address 3157 CHESTNUT HI	LL RD				4	28	2022		
City CENTER VALLEY	State	Zip C	ode (Plus	4)		20	2022		
	PA	1803	34						
Employer Name DANIELS BMW					Occupat	ion (CAR DE	ALER	
Employer Mailing Address/Principal Plac	e of Business	(City			State		Zip Code	(Plus 4)
4600 CRACKERSPORT RD									
Full Name of Contributor					мо	DAY	YEAR	_	500.00
JOSEPH R. HEIMBECKER					1-10	DAI	ILAK	\$	500.00
Mailing Address 1834 SHERWOOD S	т.				4	28	2022		
City ALLENTOWN	State	Zip C	Code (Plus	4)					
	PA	1810)9						
Employer Name ALTRONICS					Occupat	ion (GENERA	L MANAG	ER
Employer Mailing Address/Principal Plac	e of Business	(City			State		Zip Code	(Plus 4)
824 EIGHT AVENUE		E	BETHLEHE	М		PA		18108	
Full Name of Contributor					MO.	DAY	VEAD		
RONALD BRACALENTE					МО	DAY	YEAR	\$	1,000.00
Mailing Address 1830 OLD MILL RD					4	28	2022		
City BETHLEHEM	State	Zip C	Code (Plus	4)]	20	2022		
	PA	1801	15						
Employer Name BRACALENTE MANUFA	CTURING				Occupat	ion	PRESID	ENT AND	CEO
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip Code	(Plus 4)
20 WEST CREAMERY RD		1	TRUMBAUE	ERSVIL	LE	PA		18970	
Full Name of Contributor					мо	DAY	YEAR	<u>_</u>	F00 00
THOMAS CARROLL						27.1.		\$	500.00
Mailing Address 248 E. UNION BLVD					4	30	2022		
City BETHLEHEM	State	Zip C	Code (Plus	4)					
	PA	1810)8					l	
Employer Name SELF-EMPLOYED					Occupat	ion ,	ATTORN	EY	
Employer Mailing Address/Principal Plac	e of Business	(City			State		Zip Code	(Plus 4)
224 KING STREET			POTTSTOV	/NI		PA		19460	

Full Name of Contributor JARRETT COLEMAN Mailing Address 1410 BUCK HILL LN City BREINIGSVILLE State Zip Code (Plus 4) 18031 Employer Name JET BLUE Employer Mailing Address/Principal Place of Business City 27-01 QUEENS PLAZA N EMPLOYER PLAZA N City LONG ISLAND CITY Full Name of Contributor RAYMOND G. LAHOUD Mailing Address 2063 FLINT HILL RD City COOPERSBURG State Zip Code (Plus 4) 18036 Employer Name NORRIS MCLAUGHLIN Employer Mailing Address Principal Place of Business City COOPERSBURG Full Name of Contributor RAYMOND G. LAHOUD Mailing Address 2063 FLINT HILL RD City COOPERSBURG Full Name of Contributor REMPLOYER Mailing Address/Principal Place of Business Times SQUARE21ST FL City NEW YORK MO DAY YEAR \$ 1,50 State Zip Code (Plus 4) 18036 Full Name of Contributor LAURA BACHENBERG Mo DAY YEAR \$ 50,00 All 18104
Mailing Address
State
City BREINIGSVILLE State PA Zip Code (Plus 4) 18031 A State PA Zip Code (Plus 4) 18031 A State PA PILOT
Employer Name JET BLUE Occupation PILOT Employer Mailing Address/Principal Place of Business 27-01 QUEENS PLAZA N LONG ISLAND CITY NY 11101 State Zip Code (Plus 4) 11101 Full Name of Contributor RAYMOND G. LAHOUD Mailing Address 2063 FLINT HILL RD
City COOPERSBURG City COOPERSBURG City City Code (Plus 4) City Coopersburg City City Coopersburg City City Coopersburg City
The contribution
Full Name of Contributor RAYMOND G. LAHOUD State Zip Code (Plus 4) PA 1.500
RAYMOND G. LAHOUD Mailing Address 2063 FLINT HILL RD City COOPERSBURG State PA 18036 Employer Name NORRIS MCLAUGHLIN Employer Mailing Address/Principal Place of Business 7 TIMES SQUARE21ST FL City NEW YORK MO DAY YEAR \$ 1,50 TO COLUMN TO CO
RAYMOND G. LAHOUD
City COOPERSBURG State PA Zip Code (Plus 4) 18036 4 27 2022 Employer Name NORRIS MCLAUGHLIN Occupation IMMIGRATION ATTORNEY Employer Mailing Address/Principal Place of Business City State Zip Code (Plus 4) 7 TIMES SQUARE21ST FL NEW YORK NY 10036 Full Name of Contributor LAURA BACHENBERG MO DAY YEAR \$ 50,00 Mailing Address 3835 MAUCH CHUNK RD. Zip Code (Plus 4) 4 1 2022
City COOPERSBURG State PA Zip Code (Plus 4) 18∪36 Image: Cooper Part of Pa
Employer Name NORRIS MCLAUGHLIN Employer Mailing Address/Principal Place of Business City State 7 TIMES SQUARE21ST FL NEW YORK NY 10036 Full Name of Contributor LAURA BACHENBERG Mailing Address 3835 MAUCH CHUNK RD. City ALLENTOWN State Zip Code (Plus 4) 1 2022
Employer Mailing Address/Principal Place of Business 7 TIMES SQUARE21ST FL NEW YORK NY TOUGH (Plus 4) 10036 Full Name of Contributor LAURA BACHENBERG Mailing Address 3835 MAUCH CHUNK RD. City ALLENTOWN State Zip Code (Plus 4) 10036 **TOUGH (Plus 4) 10036 **TOUGH (Plus 4) 10036 **TOUGH (Plus 4) 10036
7 TIMES SQUARE21ST FL NEW YORK NY 10036 Full Name of Contributor LAURA BACHENBERG Mo DAY YEAR \$ 50,00 Address 3835 MAUCH CHUNK RD. City ALLENTOWN State Zip Code (Plus 4)
Full Name of Contributor LAURA BACHENBERG Mailing Address 3835 MAUCH CHUNK RD. City ALLENTOWN State Zip Code (Plus 4) MO DAY YEAR \$ 50,00
LAURA BACHENBERG Mo DAY YEAR \$ 50,00 Mailing Address 3835 MAUCH CHUNK RD. City ALLENTOWN State Zip Code (Plus 4) 4 1 2022
LAURA BACHENBERG Mailing Address 3835 MAUCH CHUNK RD. City ALLENTOWN State Zip Code (Plus 4) 4 1 2022
City ALLENTOWN State Zip Code (Plus 4)
City ALLENTOWN State Zip Code (Plus 4)
PA 18104
Employer Name SELF-EMPLOYED Occupation CO-OWNER
Employer Mailing Address/Principal Place of Business City State Zip Code (Plus 4)
2750 LIMESTONE ST. COPLAY PA 18037
Full Name of Contributor
WILLIAM BACHENBERG MO DAY YEAR \$ 20,00
Mailing Address 3835 MAUCH CHUNK RD 4 27 2022
City ALLENTOWN State Zip Code (Plus 4)
PA 18104
Employer Name Occupation
Employer Mailing Address/Principal Place of Business City State Zip Code (Plus 4)
PAGE TOTAL

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

PAGE TOTAL\$ 82,000.00

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		Report	ing Peri	od			
			From:			To:		
		•		D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	ıs 4)					
Receipt Description	•	•			1			
Futor Count Total of Doub	For Cabadula I Batailad	I Comment Page Co		4			ı	PAGE TOTAL
Enter Grand Total of Part	E on Schedule 1, Detailed	Summary Page, Se	ection	4.			\$	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 Peri	od	
PATRIOTS FOR COLEMAN	From:	3/29/2022 To:	5/2/2022
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTOR	R	
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	240.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	336,988.04
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,	•	\$	337,228.04

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Can	didate		Reporting	Period			
PATRIOTS FOR COLEMAN			From:	<u>3/</u>	<u>/29/2022</u>	To:	<u>5/2/2022</u>
				DATE			AMOUNT
Full Name of Contributor WILLIAM AND LAURA BACHENBE	ERG		МО	DAY	YEAR		240.00
Mailing Address 3835 MAUCH	I CHUNK RD		4	28	2022	\$	240.00
City ALLENTOWN	State	Zip Code (Plus 4)] '		2022		
	PA	18104					
Description of Contribution: F	UNDRAISING EVENT		•		1	•	
Enter Grand Total of Part F or Section 2.	n Schedule II, In-Kir	nd Contributions Detai	led Sumi	mary Pag	je,		PAGE TOTAL
					!	•	240.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Rep	ort	ting P	eriod		
PATRIOTS FOR COLEMAN				Fro	m:		3/29/202	<u>2</u> To:	5/2/2022
							DATE		AMOUNT
Full Name of Contributor CITIZENS ALLIANCE OF PA PAC					М	0	DAY	YEAR	
Mailing Address 20 ERFORD ROAD						4	15	2022	\$ 36,898.26
City LEMOYNE	State PA		Zip Code(Plus 4) 17043						
Employer of Contributor					00	ccupa	tion		
Employer Mailing Address/Principal Plac	e of Business	Cit	ty	State	te Zip		Code(Plus 4)	Descrip MAILER	otion of Contribution ર
Full Name of Contributor CITIZENS ALLIANCE OF PA PAC					М	0	DAY	YEAR	
Mailing Address 20 ERFORD ROAD					4		28	2022	\$ 37,500.00
City LEMOYNE State Zip Code(Plus 4)									
PA 17043									
Employer of Contributor			•		00	ccupa	tion		
Employer Mailing Address/Principal Plac	e of Business	Cit	ty	State	е	Zip (Code(Plus 4)	1	otion of Contribution
Full Name of Contributor CITIZENS ALLIANCE OF PA PAC					М	0	DAY	YEAR	
Mailing Address 20 ERFORD ROAD					5		1	2022	\$ 80,169.00
City LEMOYNE	State PA		Zip Code(Plus 4) 17043						
Employer of Contributor					00	ccupa	tion		
Employer Mailing Address/Principal Plac	e of Business	Cit	ty	State	е	Zip (Code(Plus 4)	Descri	otion of Contribution
Full Name of Contributor CITIZENS ALLIANCE OF PA PAC					М	0	DAY	YEAR	
Mailing Address 20 ERFORD RD					4	5	2022	\$ 73,796.52	
City LEMOYNE	State PA		Zip Code(Plus 4)						
Employer of Contributor			<u> </u>		<u>۔</u>	ccuna	ll tion		
Employer of Contributor Employer Mailing Address/Principal Place of Business City					Occupation State Zip Code(Plus 4)		Description of Contribution IN KIND MAILER		

								PAGE	12
Full Name of Contributor					мо	DAY	YEAR		
CITIZENS ALLIANCE OF PA PAC								_	26 000 26
Mailing Address 20 ERFORD RD					4	10	2022	\$	36,989.26
City LEMOYNE	State	2	Zip Code(Plus 4)						
	PA	1	17043						
Employer of Contributor		-			Occupa	tion		•	
Employer Mailing Address/Principal Plac	e of Business	City	,	State	e Zip	Code(Plus 4)	Descri	ption of Con	tribution
Full Name of Contributor CITIZENS ALLIANCE OF PA PAC		•			мо	DAY	YEAR		
Mailing Address 20 ERFORD RD					4	14	2022	\$	61,635.00
	Gr. L.	Zip Code(Plus 4)							
City LEMOYNE	State								
PA 1704:									
Employer of Contributor					Occupa	tion			
Employer Mailing Address/Principal Place	e of Business	City	,	State	Zip	Code(Plus 4)	Descri MEDIA	ption of Con BUY	tribution
Full Name of Contributor					МО	DAY	YEAR		
CITIZENS ALLIANCE OF PA PAC					МО	DAY	YEAK		
Mailing Address 20 ERFORD RD					4	15	2022	\$	10,000.00
City LEMOYNE	State	Z	Zip Code(Plus 4)						
	PA	1	17043						
Employer of Contributor	!				Occupa	tion			
Employer Mailing Address/Principal Place of Business						Code(Plus 4)	Descrip	ption of Con	tribution
							PRODU	JCTION CO	ST
Enter Grand Total of Part G on Sch	edule II In-Kir	nd C	ontributions D	etaile	d			PA	GE TOTAL
Summary Page, Section 3.					-				336,988.04

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period			
PATRIOTS FOR COLEMAN	From	3/29/2022	То:	<u>5/2/2022</u>

					DATE		AMOUNT			
To Whom Paid				МО	DAY	YEAR				
REAM PRINTING	COMPANY INC			1-10		ILAK				
Mailing Address	515 FARMBROOK LN	I PO BOX 2891		4	2	2022	\$	10,343.16		
City YORK State Zip Code (Plus 4)			Descrip							
	PA 17405			MAILER						
To Whom Paid				мо	DAY	YEAR				
REAM PRINTING	COMPANY INC			1-10		ILAK				
Mailing Address	515 FARMBROOK LN	N PO BOX 2891		4	11	2022	\$	11,202.16		
City YORK State Zip Code (Plus 4)			Description of Expenditure							
PA 17405				MAILER						
To Whom Paid				мо	DAY	YEAR				
REAM PRINTING										
Mailing Address	ailing Address 515 FARMBROOK LN PO BOX 2891			4	18	2022	\$	25,686.42		
City YORK State Zip Code (Plus 4) PA 17405			Description of Expenditure							
			MAILER							
To Whom Paid				МО	DAY	YEAR				
REAM PRINTING										
Mailing Address	515 FARMBROOK LN	N PO BOX 2891		4	27	2022	\$	25,868.42		
City YORK State Zip Code (Plus 4) PA 17405			Description of Expenditure							
			MAILER							
To Whom Paid				мо	DAY	YEAR				
EMBASSY BANK				1-10		ILAK				
Mailing Address 4148 TILGHMAN ST			4	5	2022	\$	12.00			
City ALLENTOWN State Zip Code (Plus 4) PA 18104			Description of Expenditure							
			BANK FEE							
								PAGE TOTAL		
Enter Grand To	tal of Expenditures o	on Page 1, Report	Cover Page, Item D).			\$	73,112.16		

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			Reporting Period							
PATRIOTS FOR COLEMAN From:			From:	3/29/2022 To:			<u>5/2/2022</u>			
<u>. </u>				DATE				Outstanding Balance of Debt		
Name of Creditor LAURA BACHENBERG				мо	DAY	YEAR				
Mailing Address 3835 MAUCH CHUNK RD				4	1	202	2 \$	50,000.00		
City ALLENTOWN	LLENTOWN State Zip Code (Plus 4)				Description of Debt					
	PA	18104		LOAN						
Name of Creditor WILLIAM BACHENBERG					DAY	YEAR				
Mailing Address 3835 MAUCH CHUNK RD.					27	7 202	2 \$	20,000.00		
City ALLENTOWN	State	Zip Code (P	lus 4)	Description of Debt						
	PA	18104	LOAN							
							PAGE TOTAL			
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.					\$	70,000.00				