Commonwealth of Pennsylvania

Campaign Finance Statement



File this in lieu of a full report only if aggregate receipts, expenditures, or liabilities

incurred each did not exceed \$250.00 during the reporting period.								
FILER IDENTIFICATION NUMBER:	2024C0173	.73 REPORT FILED ON BEHALF OF:		Candidate				
NAME OF FILING COMMITTEE, CANDIDATE O	R LOBBYIST	CRIS DUSH						
STREET ADDRESS								
CITY	STATE		ZIP CODE 1582	5				
TYPE OF REPORT 2nd Friday Pre-Election								
NAME OF OFFICE SOUGHT BY CANDIDATE SENATOR IN THE GENERAL ASSEMBLY								
DISTRICT CODE 25		PARTY C	ODE REP					
DATE OF ELECTION 11/5/20)24							
DATES OF REPORTING PERIOD	9/17/2024	то	10/21/2024	For Office Use Only				
AMENDMENT REPORT?) TER	MINATION REPORT	? NO					
CASH BALANCE AT THE END OF REPORTED CONTROL OF FILER'S OUTSTAND DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:	DING	0.00						
-		<u> </u>						
PART I - If statement is filed on behalf of a Political Com If statement is filed on behalf of a Candidate, th If statement is filed on behalf of a Contributing I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIF NOT EXCEED TWO HUNDRED AND FIFTY DOLLARS (\$:	mittee or Candidate ne Candidate must s Lobbyist, the Lobby TS OR DISBURSEMENT	ign here. ist must sign here. 'S OR LIABILITIES INCURF	RED DURING THE REPORTII					

I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT EXCEED TWO HUNDRED AND FIFTY DOLLARS (\$250.00) AND THIS REPORT IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.							
SWORN TO AND SUBSCRIBED BEFORE ME THIS							
day of			20				
				SIGNA	TURE OF PERSON SUBMITTING REPORT		
					_		
SIGNATURE				PRINTED NAME			
MY COMMISION EXPIRES	MO.	DAY	YR.	AREA CODE	DAYTIME TELEPHONE NUMBER		

PART II -

If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must 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 PERSON SUBMITTING REPORT		
SIGNATURE				PRINTED NAME				
MY COMMISION EXPIRES		DAY						
MT COMMISION EXPIRES	MO.	DAY	YR.		AREA CODE	DAYTIME TELEPHONE NUMBER		