**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.

<del></del>	NUMBER: 202	24C0035	REPORT FILE	Candidate	
NAME OF FILING COMMITTEE	E, CANDIDATE OR LOI	BBYIST	MICHAEL SCHL	OSSBERG	
STREET ADDRESS					
CITY		STATE		ZIP CODE 1	18104
TYPE OF REPORT Ann	nual				
NAME OF OFFICE SOUGHT	BY CANDIDATE	REPRESENT ASSEMBLY	TATIVE IN THE GEN	NERAL	
DISTRICT CODE 13	32		PART	Y CODE DEM	
DATE OF ELECTION	11/5/2024				
DATES OF REPORTING PER	RIOD	11/26/2024	то	12/31/2024	For Office Use Only
AMENDMENT REPORT?	NO	TER	MINATION REPO	RT? NO	
CASH BALANCE AT THE PERIOD:	END OF REPORTIN	IG	0.00		
	of a Political Committe of a Candidate, the Ca of a Contributing Lobb AGGREGATE RECEIPTS OF	ee or Candidate's andidate must si byist, the Lobbyis R DISBURSEMENTS	ign here. ist must sign here. S OR LIABILITIES INC	Curred during the Rep	ere. PORTING PERIOD INDICATED ABOVE DID BELIEF, TRUE, CORRECT AND COMPLETE
SWORN TO AND SUBSCRIBED E	BEFORE ME THIS				
day of		20 SIGNATURE OF PERSON SUBMITTING REPORT			
				SIGNATURE OF	PERSON SUBMITTING REPORT
	SIGNATURE				F PERSON SUBMITTING REPORT PRINTED NAME
1Y COMMISION EXPIRES	SIGNATURE  MO. DA	AY YR.			
ART II -	MO. DA		e. Candidate must	AREA CODE	PRINTED NAME
PART II - f statement is filed on behalf o I SWEAR (OR AFFIRM) THAT TO TH	MO. DA' of a Candidate's Autho	orized Committe	•	AREA CODE t sign here.	PRINTED NAME
PART II - f statement is filed on behalf o I SWEAR (OR AFFIRM) THAT TO TH	MO. DAY  of a Candidate's Autho  HE BEST OF MY KNOWLEE  MENDED.	orized Committe	•	AREA CODE t sign here.	PRINTED NAME  DAYTIME TELEPHONE NUMBER
PART II - f statement is filed on behalf o I SWEAR (OR AFFIRM) THAT TO TH 3, 1937 (P.L. 1333, No. 320) AS AI	MO. DAY  of a Candidate's Autho  HE BEST OF MY KNOWLEE  MENDED.	orized Committe	•	AREA CODE t sign here. MITTEE HAS NOT VIOLATE	PRINTED NAME  DAYTIME TELEPHONE NUMBER
3, 1937 (P.L. 1333, No. 320) AS AI <b>SWORN TO AND SUBSCRIBED B</b>	MO. DAY  of a Candidate's Autho  HE BEST OF MY KNOWLEE  MENDED.	orized Committe	•	AREA CODE t sign here. MITTEE HAS NOT VIOLATE	PRINTED NAME  DAYTIME TELEPHONE NUMBER  ED ANY PROVISIONS OF THE ACT OF JUI
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DAYTIME TELEPHONE NUMBER