Campaign Finance Report

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

Filer Identificat Number :	ion 2017	70123		-	Repor Filed		CANDI	DATE	СОМ	MITTEE	✓	LOB	BYIST	
	Committee, Candio	late or L	obbyist:			-	R JOSHU	IA KAIL						
Street Address:	1													
City:	BEAVER						State:	PA		Zip Co	de: 15	009		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	AY PRE	- 2.	30 DA PRIM		POST- 3	3.	AMENDI REPORT		Yes	No	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	ay pri	E- 5.	30 D/ ELEC		POST- 6	ö.	TERMIN REPORT		Yes	No	\checkmark
report type)	ANNUAL REPORT	7. X	Year 2024	ŀ			NG METHO CHECK O			PAPER		\checkmark	DISKE	TTE
Name of Office	L Sought by Candida	te:					DATE O	F ELEC	TION	District Number		Par	ty Code	County Code
							мо	DAY	YEAR			REF)	
				_			11	5	5 2024		(SEE INS	STRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAF			мо	DAY	YEAR	FC	OR OFFIC	E USE	ONLY	
Expenditure	s from:		11 26	5 2	024	0	12	31	L 2024					
A. Amount Bro	ought Forward Fro	m Last F	Report			\$			18,684.32	-				
B. Total Monetary Contributions And Receipts (From Schedule									3,031.86					
C. Total Funds Available (Sum Of Lines A and B)						\$		-	21,716.18					
D. Total Exper	nditures (From Sch	edule II	1)			\$]	13,922.40					
E. Ending Casl	n Balance (Subtrac	t Line D	From Line	C)		\$		7,793.78						
F. Value Of In	-Kind Contribution	s Receiv	ed (From S	Schedu	le II)	\$			0.00	-				
G. Unpaid Deb	ts And Obligations	6 (From	Schedule I	V)		\$			0.00					
				AFF	IDAV	IT SE	CTION							
	is a Committee rep	-	-							-				
I swear (or affirm correct and comp	i) that this report, ind lete.	luding th	e attached so	chedule	s filed on	paper	or by elect	ronic med	lium, are to	the best o	of my knov	vledge	and beli	ef , true
Sworn to and sub	scribed before me thi day of	S	20						Signatur	e of Perso	on Submitt	ing Rep	oort	
	Signati	ıre				_				Prir	nted Name			
My Commission E	xpires					_				Ema	ail			
	мо	D	AY	YR				Area	Code	Daytin	ne Teleph	one Nu	mber	
I swear (or affirm	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 subs	cribed before me this		20						S	Signature	of Candida	ite		
	day of					_				Printe	ed Name			
My Commission Ex	Signature					-				Ema	ail			
	-					_								
	MO DAY YR							Area Co	ode	D	aytime Te	elephor	ie Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** CITIZENS FOR JOSHUA KAIL From: <u>11/26/2024</u> **To:** 12/31/2024 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 0.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 0.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 3,031.86 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 3,031.86 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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 Candidat	e		Reporting Period				
			From	m:		То	
		·			DATE		AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code (Plus 4	4)				
							PAGE TOTAL
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.					\$ 0.00		

Use this Part to it	emize all other 50.01 to \$250.0	1 TO \$250.00 contribution 00 in the repo	s wi ortin	ith an ng per	aggreg iod.			rom
Name of Filing Committee or Candida	te		Rep	orting P	eriod			
			Fror	m:		Тс):	
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address	_	_					\$	0.00
City	State	Zip Code (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part A on	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	2.		\$	0.00

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		A	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			0.00
Mailing Address							\$		0.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTA	۹L
Enter Grand Total of Part C on Sched	lule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	C	0.00

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			Rep	orting Pe	riod			
			Froi	n:		Т):	
				D	ATE		АМ	IOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Pl	ıs 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page	e, Sectio	on 3.			P#	AGE TOTAL 0.00

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			Report	ing Perio	d			
CITIZENS FOR JOSHUA KAIL			From:		<u>11/26/202</u>	<u>4</u> To:		<u>12/31/2024</u>
				D	ATE			AMOUNT
Full Name ARLECCHINO RISTORANTE				мо	DAY	YEAR		\$ 31.86
Mailing Address City MCMURRAY	State	Zip Code (Plus 4)	12	13	202	4	
	PA	15317						
Receipt Description REFUND	•							
Full Name LIBBY'S FINANCIAL SERVICES, LLC				мо	DAY	YEAR		\$ 3,000.00
Mailing Address	I	1		12	9	202	4	
City ALIQUIPPA	State PA	Zip Code (15001	Plus 4)					
Receipt Description REFUND	1							
		_		_				PAGE TOTAL
Enter Grand Total of Part E on Schedu	le I, Detailed Sumi	nary Page,	Section	4.			\$	3,031.86

SCHEDULE II IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS

E THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THING DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Perio	d	
CITIZENS FOR JOSHUA KAIL	From:	<u>11/26/2024</u> то:	<u>12/31/2024</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (3)	\$	0.00
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, 3		\$	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:			То:		
				DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address						\$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:						-		
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	e,		PAGE TOTA	<u>، ۱</u>
						\$		0.00

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

Name of Filing Committee or Candidate			Rep	porting F	Period		
			Fro	m:		То:	
					DATE		AMOUNT
Full Name of Contributor				мо	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code(Plus 4)					
Employer of Contributor		•		Occupa	tion		•
Employer Mailing Address/Principal Plac	e of Business C	lity	State	e Zip	Code(Plus 4)	Descri	ption of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-Kind	Contributions D	etaile	d			PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name	of Filing Committee or Candidate			Reporti	ng Period			
CITIZE	ENS FOR JOSHUA KAIL			From	<u>11/20</u>	5/2024	То:	<u>12/31/2024</u>
					DATE			AMOUNT
To Who	om Paid			мо	DAY	YEAR		
FRIEND	OS OF JEFF OLSOMMER							
Mailing	Address			11	27	2024	\$	1,000.00
City	SCRANTON	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	18505	CONTRI	BUTION			
To Who				мо	DAY	YEAR		
	SK SHEILA LLC							
Mailing	Address			12	1	2024	\$	500.00
City	HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		РА	17110	CONSU				
To Who	om Paid 5 FINANCIAL SERVICES, LLC			мо	DAY	YEAR		
	Mailing Address			12	1	2024	\$	3,000.00
		Chatte				_		
City	ALIQUIPPA	State PA	Zip Code (Plus 4) 15001	CAMPAI			S-DECI	EMBER 2024
		•		(REFUN	DED)			
To Who	om Paid	·						
	om Paid ADY OF THE VALLEY PARISH	·		MO	DED	YEAR		
OUR LA						YEAR 2024	\$	500.00
OUR LA	ADY OF THE VALLEY PARISH	State	Zip Code (Plus 4)	MO 12	DAY	2024	\$	500.00
OUR LA Mailing	ADY OF THE VALLEY PARISH Address	State PA	Zip Code (Plus 4) 15009	MO 12 Descrip	DAY 4 tion of Exp	2024 enditure		500.00 MAS JUBILEE
OUR LA Mailing City To Who	ADY OF THE VALLEY PARISH Address BEAVER DM Paid			MO 12 Descrip	DAY 4 tion of Exp	2024 enditure		
OUR LA Mailing City To Who NYC TA	ADY OF THE VALLEY PARISH Address BEAVER m Paid XXI CO			MO 12 Descrip DIAMON	DAY 4 tion of Exp	2024 enditure DRSHIP-(YEAR		MAS JUBILEE
OUR LA Mailing City To Who NYC TA	ADY OF THE VALLEY PARISH Address BEAVER DM Paid			MO 12 Descrip DIAMON	DAY 4 tion of Exp	2024 enditure DRSHIP-(
OUR LA Mailing City To Who NYC TA	ADY OF THE VALLEY PARISH Address BEAVER m Paid XXI CO			MO 12 Descrip DIAMON MO 12	DAY 4 tion of Exp ND SPONS(DAY	2024 enditure DRSHIP-(YEAR 2024		MAS JUBILEE
OUR LA Mailing City To Who NYC TA Mailing	ADY OF THE VALLEY PARISH Address BEAVER m Paid XXI CO Address	PA	15009	MO 12 Descrip DIAMON MO 12 Descrip	DAY 4 tion of Exp ND SPONS(DAY 6	2024 enditure DRSHIP-(YEAR 2024		MAS JUBILEE
OUR LA Mailing City To Who NYC TA Mailing	ADY OF THE VALLEY PARISH Address BEAVER m Paid XI CO Address QUEENS	PA	15009 Zip Code (Plus 4)	MO 12 Descrip DIAMON MO 12 Descrip	DAY 4 tion of Exp ND SPONS(DAY 6 tion of Exp	2024 enditure DRSHIP-(YEAR 2024		MAS JUBILEE
OUR LA Mailing City To Who NYC TA Mailing City To Who UBER	ADY OF THE VALLEY PARISH Address BEAVER m Paid XI CO Address QUEENS	PA	15009 Zip Code (Plus 4)	MO 12 Descrip DIAMON MO 12 Descrip TRAVEL	DAY 4 tion of Exp ND SPONSO DAY 6 tion of Exp EXPENSE	2024 enditure DRSHIP-(YEAR 2024 enditure		MAS JUBILEE
OUR LA Mailing City To Who NYC TA Mailing City To Who UBER	ADY OF THE VALLEY PARISH Address BEAVER m Paid XI CO Address QUEENS m Paid	PA	15009 Zip Code (Plus 4)	MO 12 Descrip DIAMON MO 12 Descrip TRAVEL MO 12	DAY 4 tion of Exp DAY 6 tion of Exp EXPENSE DAY	2024 enditure DRSHIP-0 YEAR 2024 enditure YEAR 2024	CHRIST \$	MAS JUBILEE 32.88

To WI	hom Paid			мо	DAY	YEAR		
UBER				MO				
Mailin	ng Address			12	6	2024	\$	37.07
City	SAN FRANCISCO	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		CA	94158	TRAVEL	EXPENSE			
To Wi	hom Paid			мо	DAY	YEAR		
DOUE	BLE TREE BY HILTON			MO		TEAR		
Mailin	ng Address			12	9	2024	\$	1,912.74
City	NEW YORK	State	Zip Code (Plus 4)	Descrip	L tion of Exp	enditure	I	
		NY	10018	HOTEL	EXPENSE F	OR CAM	PAIGN TRIP)
To Wi	hom Paid	·	·			VELD		
DUON	MO 51			мо	DAY	YEAR		
Mailin	ng Address			12	9	2024	\$	106.91
City	NEW YORK	State	Zip Code (Plus 4)	Descrip	l tion of Exp	enditure		
		NY	10019	LUNCH	WITH POT	ENTIAL C	ONOR	
To Wi	hom Paid				DAY	VEAD		
PITTS	SBURGH INTERNATIONAL AIR	PORT PARKING		мо	DAY	YEAR		
Mailin	ng Address			12	9	2024	\$	108.00
City	PITTSBURGH	State	Zip Code (Plus 4)	4) Description of Expenditure				
		PA	15231	AIRPORT PARKING FOR CAMPAIGN TRIP				
To Wi	hom Paid		•			VEAD		
UBER	L			мо	DAY	YEAR		
Mailin	ng Address			12	9	2024	\$	92.38
City	SAN FRANCISCO	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		CA	04150		EVDENCE			
To W			94158	TRAVEL	LAFLINGL			
	hom Paid		94158			VEAD		
UBER			94158	MO	DAY	YEAR		
UBER			94158			YEAR 2024	\$	32.93
UBER	2	State	22ip Code (Plus 4)	MO	DAY	2024	\$	32.93
UBER Mailin	ng Address			MO 12 Descript	DAY 9	2024	\$	32.93
UBER Mailin City	ng Address	State	Zip Code (Plus 4)	MO 12 Descrip TRAVEL	DAY 9 tion of Exp EXPENSE	2024 enditure	\$	32.93
UBER Mailin City	ng Address SAN FRANCISCO hom Paid	State	Zip Code (Plus 4)	MO 12 Descript	DAY 9 tion of Exp	2024	\$	32.93
UBER Mailin City To WH	ng Address SAN FRANCISCO hom Paid	State	Zip Code (Plus 4)	MO 12 Descrip TRAVEL	DAY 9 tion of Exp EXPENSE	2024 enditure	\$	32.93
UBER Mailin City To WH	ng Address SAN FRANCISCO hom Paid	State	Zip Code (Plus 4)	MO 12 Descrip TRAVEL MO 12	DAY 9 tion of Exp EXPENSE DAY	2024 enditure YEAR 2024		
UBER Mailin City To Wi UBER Mailin	ng Address SAN FRANCISCO hom Paid	State CA	Zip Code (Plus 4) 94158	MO 12 Descrip TRAVEL MO 12 Descrip	DAY 9 tion of Exp EXPENSE DAY 9	2024 enditure YEAR 2024		
UBER Mailin City To WI UBER Mailin City	ng Address SAN FRANCISCO hom Paid	State CA State	Zip Code (Plus 4) 94158 Zip Code (Plus 4)	MO 12 Descrip TRAVEL MO 12 Descrip TRAVEL	DAY 9 tion of Exp EXPENSE DAY 9 tion of Exp EXPENSE	2024 enditure YEAR 2024 enditure		
UBER Mailin City To WI UBER Mailin City	hom Paid SAN FRANCISCO SAN FRANCISCO SAN FRANCISCO	State CA State	Zip Code (Plus 4) 94158 Zip Code (Plus 4)	MO 12 Descrip TRAVEL MO 12 Descrip	DAY 9 tion of Exp EXPENSE DAY 9 tion of Exp	2024 enditure YEAR 2024		
UBER Mailin City UBER Mailin City UBER	hom Paid SAN FRANCISCO SAN FRANCISCO SAN FRANCISCO	State CA State	Zip Code (Plus 4) 94158 Zip Code (Plus 4)	MO 12 Descrip TRAVEL MO 12 Descrip TRAVEL	DAY 9 tion of Exp EXPENSE DAY 9 tion of Exp EXPENSE	2024 enditure YEAR 2024 enditure		
UBER Mailin City UBER Mailin City UBER	Address SAN FRANCISCO hom Paid SAN FRANCISCO SAN FRANCISCO hom Paid	State CA State	Zip Code (Plus 4) 94158 Zip Code (Plus 4)	MO 12 Descrip TRAVEL MO 12 Descrip TRAVEL MO 12 12	DAY 9 tion of Exp EXPENSE DAY 9 tion of Exp EXPENSE DAY	2024 enditure YEAR 2024 enditure YEAR 2024	\$	39.99

					I	1	PA	GE 13
To Wh	om Paid			мо	DAY	YEAR		
UBER								
Mailin	g Address			12	9	2024	\$	54.58
City	SAN FRANCISCO	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		CA	94158	TRAVEL	EXPENSE			
To Wh	om Paid			мо	DAY	YEAR		
BEAVE	ER GIRLS BASKETBALL BOOST	ERS						
Mailin	g Address			12	13	2024	\$	500.00
City	BEAVER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
		PA	15009	PLATIN	UM SPONS	OR		
To Wh	om Paid			мо	DAY	YEAR		
PERIC	H FOR STATE REP (WINRED)			MO				
Mailin	g Address			12	13	2024	\$	312.30
City	ALIQUIPPA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	1	
		PA	15001	CONTRI	BUTION			
To Wh	om Paid			NO	DAY	YEAR		
JACK	BOWSER			мо		TEAR		
Mailin	g Address			12	16	2024	\$	1,350.00
City	WORTHINGTON	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	16262		OR CHRIS			N FOR
To Wh	om Paid			мо	DAY	YEAR		
TARYN	N SCHERER			мо		TEAR		
Mailin	g Address			12	16	2024	\$	65.00
City	INFO REQUESTED	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
		ΡΑ	16101	PAYMEN	NT FOR SEI	RVICES R VOLUNTE	ENDERED	FOR
To Wh	om Paid			мо	DAY	YEAR		
BEAVE	ER SUPERMARKET			МО				
Mailin	g Address			12	16	2024	\$	108.00
City	BEAVER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		РА	15009		OR CHRIS			N FOR
To Wh	om Paid					VEAD		
KRETO	CHMAR'S BAKERY			мо	DAY	YEAR		
Mailin	g Address			12	16	2024	\$	63.20
City	BEAVER	State	Zip Code (Plus 4)	Descrip	l tion of Exp	enditure	1	
PA 15009			FOOD F	OR CHRIS	TMAS CE	LEBRATIO	N FOR	

							PAG	E 14			
To Who	om Paid			мо	DAY	YEAR					
VESUVIO'S Mailing Address											
					16	2024	\$	67.22			
City	MONACA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
		PA	15061		OR CHRIS		LEBRATION FEERS	FOR			
To Who	om Paid			мо	DAY	YEAR					
W H SILVERMAN DISTRIBUTING COMPANY					DAT	TEAK					
Mailing Address					16	2024	\$	197.98			
City	BEAVER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
		PA	15009		HMENTS C		AS CELEBRA	TION FOR			
To Who	om Paid			мо	DAY	YEAR					
WINE A	AND SPIRITS										
Mailing	Address			12	16	2024	\$	197.18			
City	MONACA State Zip Code (Plus 4)				Description of Expenditure						
	PA 15061					REFRESHMENTS CHRISTMAS CELEBRATION FOR SUPPORTERS AND					
To Whom Paid					DAY	YEAR					
WINE A	AND SPIRITS			мо							
Mailing Address					16	2024	\$	810.15			
City	ROCHESTER State Zip Code (Plus 4)			Description of Expenditure							
		PA	15074		HMENTS C		AS CELEBRA	TION FOR			
To Who	om Paid			мо	DAY	YEAR					
SHERE	NE PIERCE			MO		TLAK					
Mailing Address					17	2024	\$	75.00			
City	NEW CASTLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•				
		PA 16101			PAYMENT FOR SERVICES RENDERED FOR SUPPORTER AND VOLUNTEER						
To Who	om Paid			мо	DAY	YEAR					
KISS THE COOK						TEAR					
Mailing Address					17	2024	\$	275.00			
City	NEW CASTLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•				
		PA 16101			PAYMENT FOR SERVICES RENDERED FOR SUPPORTER AND VOLUNTEER						
To Who	om Paid			мо	DAY	YEAR					
MIKE DITKAS RESTAURANT											
Mailing Address					17	2024	\$	108.80			
City	PITTSBURGH	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
		PA	15205	STRATE	GY DINNE	R					

To Wh	om Paid			мо	DAY	YEAR				
MILLER'S PROFESSIONAL IMAGING										
Mailin	g Address	12	18	2024	\$	934.92				
City	COLUMBIA	State	Description of Expenditure							
		MD	65201	CHRIST	MAS CARD	S FOR S	UPPORTER	S AND		
To Wh	om Paid			мо	DAY	YEAR				
JACK BOWSER										
Mailing Address					20	2024	\$	228.00		
City	WORTHINGTON	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•			
	PA 16262 FOOD FOR CHRISTM SUPPORTERS AND VO						AS CELEBRATION FOR OLUNTEERS			
To Whom Paid JENNIFER FERRANTE-GENNARO					DAY	YEAR				
Mailing Address					20	2024	\$	75.00		
City	NEW CASTLE State Zip Code (Plus 4)				Description of Expenditure					
		PA	16101	PAYMENT FOR SERVICES RENDERED FOR SUPPORTER AND VOLUNTEER						
To Whom Paid				мо	DAY	YEAR				
CLASS	SIC TENT AND PARTY REN	TAL								
Mailing Address					23	2024	\$	430.00		
City	BOARDMAN	Description of Expenditure								
		ОН	44512	RENTAL FOR CAMPAIGN EVENT						
To Wh	om Paid			мо	DAY	YEAR				
CVS PHARMACY										
Mailing Address					23	2024	\$	554.80		
City	BEAVER FALLS	EAVER FALLS State Zip Code (Plus 4) Description of Expenditure								
		PA	15010	STAMPS FOR CHRISTMAS C SUPPORTERS AND VOLUNT			CARDS FO TEERS	R		
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.								PAGE TOTAL		
Enter	Grand Total of Expendi	itures on Page 1, Re	port Cover Page, Item D				\$	13,922.40		

9/15/2025 11:54:51 AM