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	T NOMBER.	20240	c0226	REPORT	FILED ON BEHALF OF:	Candidate
NAME OF FILING COMMIT	TEE, CANDIDATE (OR LOBB	YIST	WAGGETT,	STEPHANIE	
STREET ADDRESS						
CITY			STATE		ZIP CODE 1.	5320
TYPE OF REPORT	Annual					
NAME OF OFFICE SOUG	HT BY CANDIDA	.TE	REPRESENT ASSEMBLY	TATIVE IN THE	GENERAL	
DISTRICT CODE	50th Legislative D	District		P/	ARTY CODE REP	
DATE OF ELECTION	11/5/2	2024				
DATES OF REPORTING	PERIOD	11	1/26/2024	то	12/31/2024	For Office Use Only
AMENDMENT REPORT?		NO	TERN	MINATION RI	EPORT? NO	
CASH BALANCE AT T PERIOD:	HE END OF REPO	ORTING		0.00		
TOTAL AMOUNT OF I DEBTS OR LIABILITY REPORTING PERIOD	IES AT THE END			0.00		
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AREA CODE

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