

# Campaign Finance Report

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

<b>Filer Identification Number :</b> 20230291		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>			
<b>Name of Filing Committee, Candidate or Lobbyist:</b> FRIENDS OF NATE DAVIDSON											
<b>Street Address:</b> 2347 N 7TH ST,PO BOX 5447											
<b>City:</b> HARRISBURG					<b>State:</b> PA		<b>Zip Code:</b> 17102				
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3. X	AMENDMENT REPORT?	Yes	No <input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2025	<b>FILING METHOD ( ) CHECK ONE</b>		<b>PAPER</b> <input checked="" type="checkbox"/>		<b>DISKETTE</b>			
<b>Name of Office Sought by Candidate:</b>					<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
REPRESENTATIVE IN THE GENERAL ASSEMBLY					<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	103	STH	DEM	22
					11	4	2025	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>		
		5	6	2025		6	9	2025			
<b>A. Amount Brought Forward From Last Report</b>					\$		14,173.10				
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>					\$		11,690.00				
<b>C. Total Funds Available (Sum Of Lines A and B)</b>					\$		25,863.10				
<b>D. Total Expenditures (From Schedule III)</b>					\$		12,019.00				
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>					\$		13,844.10				
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>					\$		0.00				
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>					\$		2,956.94				

## AFFIDAVIT SECTION

### PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

### 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 subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
**Detailed Summary Page**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF NATE DAVIDSON	From: <u>5/6/2025</u> To: <u>6/9/2025</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 90.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 250.00
<b>All Other Contributions (Part B)</b>	\$ 350.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 600.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 11,000.00
<b>All Other Contributions (Part D)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 11,000.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)</b>	\$ 11,690.00
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**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.**

<b>Name of Filing Committee or Candidate</b>				<b>Reporting Period</b>			
FRIENDS OF NATE DAVIDSON				From: <u>5/6/2025</u> To: <u>6/9/2025</u>			
				<b>DATE</b>		<b>AMOUNT</b>	

  

<b>Full Name of Contributing Committee</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 75.00
PA CEMETERY, CREMATION, AND FUNERAL ASSOCIATION			2	13	2025	
<b>Mailing Address</b>	3051 GREEN POND RD					
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>				
EASTON	PA	180452506				

  

<b>Full Name of Contributing Committee</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
PENN HY-PAC			2	13	2025	
<b>Mailing Address</b>						
152 E VINE ST						
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>				
HATFIELD	PA	194402521				

  

<b>Full Name of Contributing Committee</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 75.00
SCHOOL NURSE PAC			2	13	2025	
<b>Mailing Address</b>						
422 CENTER ST						
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>				
HYDE PARK	PA	156419705				

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

<b>PAGE TOTAL</b>
\$ 250.00

**PART B**  
**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)**

<b>Name of Filing Committee or Candidate</b> FRIENDS OF NATE DAVIDSON	<b>Reporting Period</b> <b>From:</b> <u>5/6/2025</u> <b>To:</b> <u>6/9/2025</u>
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DATE	AMOUNT
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<b>Full Name of Contributor</b> MICHAEL VERBER			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 4 CONESTOGA LN			1	4	2025	
<b>City</b> MECHANICSBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 170508214				

<b>Full Name of Contributor</b> ROBERT WOLGEMUTH			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b> 907 LANDIS AVE			5	27	2025	
<b>City</b> LANCASTER	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 176032521				

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

<b>PAGE TOTAL</b>
\$ 350.00

# 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.**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF NATE DAVIDSON	<b>Reporting Period</b>  <b>From:</b> <u>5/6/2025</u> <b>To:</b> <u>6/9/2025</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
1776 PAC				2	18	2025	
Mailing Address 3031 A WALTON RD STE 201							
City	PLYMOUTH MEETING	State	Zip Code (Plus 4)				
		PA	194622369				
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
AFSCME COUNCIL 13				1	28	2025	
Mailing Address 4031 EXECUTIVE PARK DR							
City	HARRISBURG	State	Zip Code (Plus 4)				
		PA	171111507				
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
APSCUF CAP-PA				5	15	2025	
Mailing Address 319 N FRONT ST							
City	HARRISBURG	State	Zip Code (Plus 4)				
		PA	171011203				
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
CPA PAC				2	4	2025	
Mailing Address 500 N 3RD ST STE 200A							
City	HARRISBURG	State	Zip Code (Plus 4)				
		PA	171011111				
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 1,000.00
GREATER PA CARPENTERS PAC				3	25	2025	
Mailing Address 1803 SPRING GARDEN ST							
City	PHILADELPHIA	State	Zip Code (Plus 4)				
		PA	191303916				
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 1,000.00
LAWPAC				2	4	2025	
Mailing Address 212 N 3RD ST STE 101							
City	HARRISBURG	State	Zip Code (Plus 4)				
		PA	171011505				

Full Name of Contributing Committee			MO	DAY	YEAR	\$500.00
MALADY & WOOTEN PAC			4	1	2025	
Mailing Address	604 N 3RD ST					
City	HARRISBURG	State	PA	Zip Code (Plus 4)	171011114	

Full Name of Contributing Committee			MO	DAY	YEAR	\$500.00
MCNEES PAC			2	4	2025	
Mailing Address	PO BOX 1166					
City	HARRISBURG	State	PA	Zip Code (Plus 4)	171081166	

Full Name of Contributing Committee			MO	DAY	YEAR	\$1,000.00
OPERATORS FOR SKILL PAC			2	4	2025	
Mailing Address	PO BOX 343					
City	HARRISBURG	State	PA	Zip Code (Plus 4)	171080343	

Full Name of Contributing Committee			MO	DAY	YEAR	\$500.00
PA OPTOMETRIC PAC			2	4	2025	
Mailing Address	218 NORTH ST					
City	HARRISBURG	State	PA	Zip Code (Plus 4)	171011124	

Full Name of Contributing Committee			MO	DAY	YEAR	\$500.00
PA REALTORS PAC			2	4	2025	
Mailing Address	500 N 12TH ST					
City	LEMOYNE	State	PA	Zip Code (Plus 4)	170431241	

Full Name of Contributing Committee			MO	DAY	YEAR	\$500.00
PENNSYLVANIA BUILDING AND CONSTRUCTION TRADES COUNCIL			2	4	2025	
Mailing Address	904 N 2ND ST					
City	HARRISBURG	State	PA	Zip Code (Plus 4)	171023119	

Full Name of Contributing Committee			MO	DAY	YEAR	\$1,000.00
PLUMBERS & PIPEFITTERS LOCAL 520			1	7	2025	
Mailing Address	7193 JONESTOWN RD					
City	HARRISBURG	State	PA	Zip Code (Plus 4)	171123649	

Full Name of Contributing Committee			MO	DAY	YEAR	\$1,000.00
SAUL EWING PAC			5	21	2025	
Mailing Address	2 N 2ND ST FL 7					
City	HARRISBURG	State	PA	Zip Code (Plus 4)	171011619	

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 500.00
SAXTON & STUMP LLC PAC			2	4	2025	
City	LANCASTER	State PA				

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 500.00
UGI UTILITIES PAC			3	4	2025	
City	DENVER	State PA				

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 500.00
WOJDAK FOR THE COMMONWEALTH			2	4	2025	
City	HARRISBURG	State PA				

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

<b>PAGE TOTAL</b>	
\$	11,000.00

**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.)**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
	<b>From:</b> <b>To:</b>

				DATE			AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00	
Mailing Address								
City	State	Zip Code (Plus 4)						
Employer Name				Occupation				
Employer Mailing Address/Principal Place of Business			City		State		Zip Code (Plus 4)	

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

<b>PAGE TOTAL</b>	
\$	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	Reporting Period	
	From:	To:

				DATE			AMOUNT	
Full Name					MO	DAY	YEAR	\$ 0.00
Mailing Address								
City		State	Zip Code (Plus 4)					
Receipt Description								

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
FRIENDS OF NATE DAVIDSON		From: <u>5/6/2025</u> To: <u>6/9/2025</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)		\$	0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)		\$	0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period (3)		\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)		\$	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: <span style="float: right;">To:</span>
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						<b>PAGE TOTAL</b>  \$ 0.00

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

Name of Filing Committee or Candidate	Reporting Period
	From: To:

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF NATE DAVIDSON	From <u>5/6/2025</u> To: <u>6/9/2025</u>

DATE				AMOUNT
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
6PAC				
<b>Mailing Address</b> 109 FAWN CT	2	20	2025	\$ 5,000.00
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 171103467	<b>Description of Expenditure</b> CONTRIBUTION	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
6PAC				
<b>Mailing Address</b> 109 FAWN CT	5	22	2025	\$ 5,000.00
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 171103467	<b>Description of Expenditure</b> CONTRIBUTION	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
ACTBLUE				
<b>Mailing Address</b> 366 SUMMER ST	1	31	2025	\$ 4.80
<b>City</b> SOMERVILLE	<b>State</b> MA	<b>Zip Code (Plus 4)</b> 021443132	<b>Description of Expenditure</b> MERCHANT SERVICE FEES	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
ACTBLUE				
<b>Mailing Address</b> 366 SUMMER ST	2	28	2025	\$ 0.30
<b>City</b> SOMERVILLE	<b>State</b> MA	<b>Zip Code (Plus 4)</b> 021443132	<b>Description of Expenditure</b> MERCHANT SERVICE FEES	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
ACTBLUE				
<b>Mailing Address</b> 366 SUMMER ST	3	31	2025	\$ 0.90
<b>City</b> SOMERVILLE	<b>State</b> MA	<b>Zip Code (Plus 4)</b> 021443132	<b>Description of Expenditure</b> MERCHANT SERVICE FEES	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
ACTBLUE				
<b>Mailing Address</b> 366 SUMMER ST	5	31	2025	\$ 1.50
<b>City</b> SOMERVILLE	<b>State</b> MA	<b>Zip Code (Plus 4)</b> 021443132	<b>Description of Expenditure</b> MERCHANT SERVICE FEES	

<b>To Whom Paid</b> CUMBERLAND COUNTY DEMOCRATIC COMMITTEE			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b> 46 W LOUTHER ST			5	28	2025	
<b>City</b> CARLISLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 170132935	<b>Description of Expenditure</b> CONTRIBUTION			

<b>To Whom Paid</b> FRIENDS OF SASHA SACAVAGE			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b> 2 BRENTWOOD RD			5	8	2025	
<b>City</b> CAMP HILL	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 170112503	<b>Description of Expenditure</b> CONTRIBUTION			

<b>To Whom Paid</b> STRIPE			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 7.73
<b>Mailing Address</b> 354 OYSTER POINT BLVD			1	31	2025	
<b>City</b> SOUTH SAN FRANCISCO	<b>State</b> CA	<b>Zip Code (Plus 4)</b> 940801912	<b>Description of Expenditure</b> PROCESSING FEES			

<b>To Whom Paid</b> STRIPE			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 0.67
<b>Mailing Address</b> 354 OYSTER POINT BLVD			2	28	2025	
<b>City</b> SOUTH SAN FRANCISCO	<b>State</b> CA	<b>Zip Code (Plus 4)</b> 940801912	<b>Description of Expenditure</b> PROCESSING FEES			

<b>To Whom Paid</b> STRIPE			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 0.67
<b>Mailing Address</b> 354 OYSTER POINT BLVD			3	31	2025	
<b>City</b> SOUTH SAN FRANCISCO	<b>State</b> CA	<b>Zip Code (Plus 4)</b> 940801912	<b>Description of Expenditure</b> PROCESSING FEES			

<b>To Whom Paid</b> STRIPE			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 2.43
<b>Mailing Address</b> 354 OYSTER POINT BLVD			5	31	2025	
<b>City</b> SOUTH SAN FRANCISCO	<b>State</b> CA	<b>Zip Code (Plus 4)</b> 940801912	<b>Description of Expenditure</b> PROCESSING FEES			

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 12,019.00

**SCHEDULE IV**  
**STATEMENT OF UNPAID DEBTS**  
 Use this Section to itemize all unpaid debts and obligations  
 which are outstanding at the end of the reporting period

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF NATE DAVIDSON	<b>From:</b> <u>5/6/2025</u> <b>To:</b> <u>6/9/2025</u>

				DATE	Outstanding Balance of Debt
<b>Name of Creditor</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>		
NATHAN DAVIDSON					
<b>Mailing Address</b> 2013 GREEN ST	1	11	2024	\$	90.07
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 171022128	<b>Description of Debt</b> OFFICE SUPPLIES		
<b>Name of Creditor</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>		
NATHAN DAVIDSON					
<b>Mailing Address</b> 2013 GREEN ST	1	14	2024	\$	102.80
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 171022128	<b>Description of Debt</b> OFFICE SUPPLIES		
<b>Name of Creditor</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>		
NATHAN DAVIDSON					
<b>Mailing Address</b> 2013 GREEN ST	1	20	2024	\$	132.00
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 171022128	<b>Description of Debt</b> STAMPS		
<b>Name of Creditor</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>		
NATHAN DAVIDSON					
<b>Mailing Address</b> 2013 GREEN ST	2	11	2024	\$	539.52
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 171022128	<b>Description of Debt</b> OFFICE SUPPLIES		
<b>Name of Creditor</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>		
NATHAN DAVIDSON					
<b>Mailing Address</b> 2013 GREEN ST	2	15	2024	\$	47.69
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 171022128	<b>Description of Debt</b> OFFICE SUPPLIES		
<b>Name of Creditor</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>		
NATHAN DAVIDSON					
<b>Mailing Address</b> 2013 GREEN ST	2	21	2024	\$	257.50
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 171022128	<b>Description of Debt</b> EVENT COSTS		

Name of Creditor NATHAN DAVIDSON			MO	DAY	YEAR	\$ 277.08
Mailing Address 2013 GREEN ST			2	21	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 171022128	Description of Debt EVENT COSTS			

Name of Creditor NATHAN DAVIDSON			MO	DAY	YEAR	\$ 64.28
Mailing Address 2013 GREEN ST			2	24	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 171022128	Description of Debt OFFICE SUPPLIES			

Name of Creditor NATHAN DAVIDSON			MO	DAY	YEAR	\$ 393.00
Mailing Address 2013 GREEN ST			2	26	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 171022128	Description of Debt EVENT COSTS			

Name of Creditor NATHAN DAVIDSON			MO	DAY	YEAR	\$ 917.00
Mailing Address 2013 GREEN ST			3	12	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 171022128	Description of Debt EVENT COSTS			

Name of Creditor NATHAN DAVIDSON			MO	DAY	YEAR	\$ 136.00
Mailing Address 2013 GREEN ST			4	1	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 171022128	Description of Debt STAMPS			

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.						PAGE TOTAL \$ 2,956.94
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