### **Campaign Finance Report**

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

| Filer Identificati<br>Number :            | <b>on</b> 20                  | 03296      |        |                      |            | Rep<br>File |      |        | CAN     | ANDIDATE COMMITTEE LOBBYIST |          |             |             |                        | BYIST          |         |         |          |          |
|---|-------------------------------|------------|--------|----------------------|------------|-------------|------|--------|---------|-----------------------------|----------|-------------|-------------|------------------------|----------------|---------|---------|----------|----------|
| Name of Filing C                          | ommittee, Cand                | lidate or  | Lobb   | oyist:               |            | EMR         | ICK  | ,JOE   | COM     | ТО Е                        | LECT     |             |             |                        |                |         |         | •        |          |
| Street Address:                           | 2312 BLUE                     | JAY DR     |        |                      |            |             |      |        |         |                             |          |             |             |                        |                |         |         |          |          |
| City:                                     | NAZARETH                      |            |        |                      |            |             |      |        | State   | :                           | PA       |             |             | Zip Cod                | le: 18         | 064     |         |          |          |
| TYPE OF<br>REPORT                         | 6TH TUESDAY<br>PRE-PRIMARY    | 1.         |        | ND FRIDAY<br>RIMARY  | PRE-       | - 2         | 2.   | 30 DA  |         | Р                           | OST-     | 3. <b>X</b> |             | AMENDM<br>REPORT?      |                | Yes     | N       | O        | <b>√</b> |
| (place X to<br>the right of               | 6TH TUESDAY<br>PRE-ELECTION   | 4.         |        | ND FRIDAY<br>LECTION | / PRE      | - 5         | 5.   | 30 DA  |         | Р                           | POST- 6. |             |             | TERMINATION<br>REPORT? |                | Yes     | N       | O        | <b>\</b> |
| report type)                              |                               |            |        |                      |            |             |      | _      |         |                             | PAPER    |             | <b>√</b>    | DISK                   | ETTE           |         |         |          |          |
| Name of Office S                          | ought by Candi                | date:      | -      |                      |            | _           |      |        | DAT     | E O                         | F ELE    | CTIC        | ON          | District<br>Number     | Office<br>Code | Par     | ty Code | Cour     |          |
| REPRESENTATI                              | VF IN THE GEN                 | IFRAI AS   | SEM    | IBI Y                |            |             |      |        | МО      |                             | DAY      | Y           | EAR         |                        | STH            | REP     | )       | 48       |          |
|   |                               |            |        |                      |            |             |      |        |         | 11                          |          | 6           | 2007        |                        | (SEE INS       | TRUCTI  | ONS FOR | CODES    | )        |
| Summary of Expenditures                   |                               | МО         |        | DAY                  | YEAR       |             |      | _      | МО      |                             | DAY      | Y           | EAR         | FO                     | R OFFIC        | E USE   | ONLY    |          |          |
|   |                               |            | 1      | 1                    | 20         | 007         | Т    | 0      |         | 6                           |          | 4           | 2007        |                        |                |         |         |          |          |
| A. Amount Bro                             | ught Forward F                | rom Last   | Repo   | ort                  |            |             |      | \$     |         |                             |          | 2,          | 156.93      |                        |                |         |         |          |          |
| B. Total Moneta                           | ary Contribution              | s And Re   | ceip   | ts (From             | Sche       | dule        | I)   | \$     |         |                             |          | 1,          | 398.80      |                        |                |         |         |          |          |
| C. Total Funds                            | Available (Sum                | Of Lines   | A an   | nd B)                |            |             |      | \$     |         |                             |          | 3,          | 555.73      |                        |                |         |         |          |          |
| D. Total Expend                           | ditures (From S               | chedule 1  | III)   |                      |            |             |      | \$     |         |                             |          |             | 0.00        |                        |                |         |         |          |          |
| E. Ending Cash                            | Balance (Subtr                | act Line I | D Fro  | om Line C            | <b>:</b> ) |             |      | \$     |         |                             |          | 3,          | 555.73      |                        |                |         |         |          |          |
| F. Value Of In-                           | Kind Contribution             | ons Recei  | ved    | (From Sc             | hedul      | le II       | )    | \$     |         |                             |          |             | 90.00       |                        |                |         |         |          |          |
| G. Unpaid Debt                            | s And Obligatio               | ns (From   | Sch    | edule IV             | )          |             |      | \$     |         |                             |          | 2,          | 451.40      |                        |                |         |         |          |          |
|   |                               |            |        |                      | AFF        | IDA         | ١VI  | T SE   | CTIC    | N                           |          |             |             |                        |                |         |         |          |          |
| PART I - If this is                       |                               |            |        | _                    |            |             |      |        |         |                             |          |             | _           |                        |                |         |         |          |          |
| I swear (or affirm)<br>correct and comple |                               | ncluding t | he ati | tached sch           | edules     | filed       | l on | paper  | or by e | lectr                       | onic m   | ediun       | ı, are to t | he best o              | f my knov      | /ledge  | and bel | ief , tr | ue       |
| Sworn to and subs                         | cribed before me t            | this       | 20     | D                    |            |             |      |        |         |                             |          | :           | Signature   | of Perso               | 1 Submitt      | ing Rep | oort    |          | _        |
|   | Signa                         | ature      |        |                      |            |             |      | -<br>- |         | •                           |          |             |             | Prin                   | ted Name       |         |         |          | _        |
| My Commission Ex                          | pires                         |            |        |                      |            |             |      | _      |         | -                           |          |             |             | Emai                   | il             |         |         |          |          |
|   | МО                            |            | DAY    |                      | YR         |             |      |        |         |                             | Are      | ea Co       | de          | Daytim                 | e Teleph       | one Nu  | mber    |          |          |
| Part II- If this is                       | a report of a ca              | andidate'  | s aut  | thorized             | Comm       | itte        | e, C | andid  | ate sh  | alls                        | sign he  | ere.        |             |                        |                |         |         |          |          |
| I swear (or affirm)<br>No 320) as amende  |                               | of my know | vledg  | e and belie          | ef this    | polit       | ical | comm   | ittee h | as no                       | ot viola | ted a       | ny provis   | ions of the            | e act of Ju    | ine 3,1 | 937 (P. | L. 133   | 3,       |
| Sworn to and subsc                        | ribed before me the<br>day of | nis        | 7.     | 0                    |            |             |      |        |         |                             |          |             | s           | ignature o             | f Candida      | te      |         |          | _        |
| 20  |                               |            |        |                      |            | -           |      |        |         |                             |          | Printe      | d Name      |                        |                |         | -       |          |          |
|   | Signatu:                      | re         |        |                      |            |             |      | -      |         |                             |          |             |             |                        | _              |         |         |          |          |
| My Commission Exp                         | ires                          |            |        |                      |            |             |      | _      |         |                             |          |             |             | Emai                   |                |         |         |          |          |
|   | мо                            | _          | DAY    |                      | YR         |             |      | _      |         |                             | Area     | Code        |             | Da                     | ytime Te       | lephor  | ne Numi | ber      | _        |

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

| Name of Filing Committee or Candidate  | Reporting | g Period |              |          |
|--|-----------|----------|--------------|----------|
| EMRICK,JOE COM TO ELECT  | From:     | 1/1/200  | <u>7</u> To: | 6/4/2007 |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor  |           |          |              |          |
| TOTAL for the Reporting  | g Period  | (1)      | \$           | 850.00   |
| 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)  |           |          |              |          |
| Contributions Received From Political Committees (Part A)  |           |          | \$           | 100.00   |
| All Other Contributions (Part B)   |           |          | \$           | 425.00   |
| TOTAL for the Reporting  | J Period  | (2)      | \$           | 525.00   |
| 3. Contributions Received Over \$250.00 (From Part C and Part D)   |           |          |              |          |
| Contributions Received From Political Committees (Part C)  |           |          | \$           | 0.00     |
| All Other Contributions (Part D)   |           |          | \$           | 0.00     |
| TOTAL for the Reporting  | y Period  | (3)      | \$           | 0.00     |
| 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)   |           |          |              |          |
| TOTAL for the Reporting  | g Period  | (4)      | \$           | 23.80    |
| Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa |           |          | \$           | 1,398.80 |

#### **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 Candidate | Reporting | Period   |     |          |
|---------------------------------------|-----------|----------|-----|----------|
| EMRICK,JOE COM TO ELECT               | From:     | 1/1/2007 | То: | 6/4/2007 |
|                                       |           | DATE     |     | AMOUNT   |

| Full Name of Contributing Committee FRIENDS OF DOUG REICHLEY |                                  |       |                   | МО | DAY | YEAR |              |
|--|----------------------------------|-------|-------------------|----|-----|------|--------------|
| Mailing Addres   | Mailing Address 10024 WEISS ROAD |       |                   |    |     |      | \$<br>100.00 |
| City BREIN   | IGSVILLE                         | State | Zip Code (Plus 4) | 5  | 24  | 2007 |              |
|  |                                  | PA    | 18037             |    |     |      |              |

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

**PAGE TOTAL \$** 100.00

## 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)

| Name of Filing Committee or Candidat             | :e                 |                                       | Reporting | Period |                        |                  |  |  |
|--|--------------------|---------------------------------------|-----------|--------|------------------------|------------------|--|--|
| EMRICK,JOE COM TO ELECT                          |                    |                                       | From:     | 1/1/   | <u>2007</u> <b>T</b> o | 6/4/2007         |  |  |
|  |                    |                                       |           | DATE   |                        | AMOUNT           |  |  |
| Full Name of Contributor CRAIG DALLY             |                    |                                       | МО        | DAY    | YEAR                   |                  |  |  |
| Mailing Address 422 SCHOENECK A                  | VE                 |                                       |           |        |                        | <b>\$</b> 100.00 |  |  |
| City NAZARETH                                    | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18064-918 | 5         | 12     | 2007                   |                  |  |  |
| Full Name of Contributor  MARK & STACEY HEMPHILL |                    |                                       | МО        | DAY    | YEAR                   |                  |  |  |
| Mailing Address 4546 PHEASANT RI  City BETHLEHEM | JN CT.  State PA   | <b>Zip Code (Plus 4)</b><br>18020-951 | 4         | 20     | 2007                   | <b>\$</b> 125.00 |  |  |
| Full Name of Contributor JOHN BRINSON            | l                  | I                                     | МО        | DAY    | YEAR                   |                  |  |  |
| Mailing Address PO BOX 713  City ALLENTOWN       | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18105-071 | 5         | 8      | 2007                   | <b>\$</b> 100.00 |  |  |
| Full Name of Contributor JOANN CARDELLO          |                    |                                       | МО        | DAY    | YEAR                   |                  |  |  |
| Mailing Address PO BOX 121                       |                    |                                       |           |        |                        | <b>\$</b> 100.00 |  |  |
| City TANNERSVILLE                                | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18372     | 5         | 1      | 2007                   |                  |  |  |
|  |                    |                                       |           |        |                        | PAGE TOTAL       |  |  |

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

425.00

#### **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 Candi | me of Filing Committee or Candidate Rep |               |             | Reporting Period |     |      |    |            |  |
|-----------------------------------|---|---------------|-------------|------------------|-----|------|----|------------|--|
|                                   |   |               | From:       |                  |     | То:  |    |            |  |
|                                   |   |               |             | DA               | TE  |      | Α  | MOUNT      |  |
| Full Name of Contributing Commit  | tee                                     |               |             | мо               | DAY | YEAR |    |            |  |
| Mailing Address                   |   |               |             |                  |     |      | \$ | 0.00       |  |
| City                              | State                                   | Zip Cod       | e (Plus 4)  |                  |     |      |    |            |  |
|                                   |   |               |             |                  |     |      |    | PAGE TOTAL |  |
| Enter Grand Total of Part C on S  | Schedule I, Detail                      | ed Summary Pa | age, Sectio | n 3.             |     |      | \$ | 0.00       |  |

## 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               | ame of Filing Committee or Candidate |                |         | Reporting Period |       |      |          |             |  |
|---|--------------------------------------|----------------|---------|------------------|-------|------|----------|-------------|--|
|   |                                      |                | Fron    | n:               |       | То   | То:      |             |  |
|   |                                      |                |         | D/               | ATE   |      | ı        | AMOUNT      |  |
| Full Name of Contributor                            |                                      |                |         | МО               | DAY   | YEAR |          |             |  |
| Mailing<br>Address                                  |                                      |                |         |                  |       |      | \$       | 0.00        |  |
| City  | State                                | Zip Code (Plus | s 4)    |                  |       |      |          |             |  |
| Employer Name                                       |                                      |                |         | Occupat          | tion  |      |          |             |  |
| Employer Mailing Address/Principal Plac<br>Business | e of                                 | City           |         |                  | State |      | Zip Co   | de (Plus 4) |  |
| Enter Grand Total of Part C on Sche                 | dule I, Detailed Su                  | ımmary Page,   | Section | on 3.            |       |      |          | PAGE TOTAL  |  |
|   |                                      |                |         |                  |       |      | <b>•</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.

**Reporting Period** 

| EMRICK,JOE COM TO ELECT           | From:    |    | 1/1/200 | <u>7</u> To: | 6/4/2007        |
|-----------------------------------|----------|----|---------|--------------|-----------------|
|                                   |          | D  | ATE     |              | AMOUNT          |
| Full Name CHRISTINE EMRICK        |          | мо | DAY     | YEAR         |                 |
| Mailing Address 2312 BLUE JAY DR. |          | _  |         |              | <b>\$</b> 23.80 |
| City NAZADETH State Zip Code      | (Plus 4) | 5  | 18      | 2007         |                 |

18064

**Receipt Description** REIMBURSEMENT FOR POSTAGE STAMPS

Name of Filing Committee or Candidate

NAZARETH

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

PA

**PAGE TOTAL** \$ 23.80

#### **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

| Name of Filing Committee or Candidate  | Reporting Period | d                          |                 |
|--|------------------|----------------------------|-----------------|
| EMRICK,JOE COM TO ELECT  | From:            | <u>1/1/2007</u> <b>To:</b> | <u>6/4/2007</u> |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P  | PER CONTRIBUTOR  |                            |                 |
| TOTAL for the Reporting Pe   | eriod (1)        | \$                         | 0.00            |
| 2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR   | T F)             |                            |                 |
| TOTAL for the Reporting Pe   | eriod (2)        | \$                         | 90.00           |
| 3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)   |                  |                            |                 |
| TOTAL for the Reporting Pe   | eriod (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, | •                | \$                         | 90.00           |

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

| Name of Filing Committee or Car             | ndidate               |                      | Reporting | Period   |          |          |            |
|---|-----------------------|----------------------|-----------|----------|----------|----------|------------|
| EMRICK,JOE COM TO ELECT                     |                       |                      | From:     | <u>;</u> | 1/1/2007 | То:      | 6/4/2007   |
|   |                       | •                    |           | DATE     |          |          | AMOUNT     |
| Full Name of Contributor JOHN & JERI EMRICK |                       |                      | мо        | DAY      | YEAR     |          |            |
| Mailing Address 104 SOUTH                   | l B'WAY               |                      | 5         | 1        | 2007     | \$<br>\$ | 90.00      |
| City WINDGAP                                | State                 | Zip Code (Plus 4)    | 7         |          |          |          |            |
|   | PA                    | 18072                |           |          |          |          |            |
| Description of Contribution:                | FOOD FOR FUNDRAISER   | ₹                    | ·         |          |          |          |            |
| Enter Grand Total of Part F o Section 2.    | n Schedule II, In-Kin | d Contributions Deta | iled Sum  | mary Pag | je,      |          | PAGE TOTAL |
| occion zi                                   |                       |                      |           |          | 4        | •        | 90.00      |

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

| Name of Filing Committee or Candidat                          | ame of Filing Committee or Candidate |         |            |         | Re    | porting F | Period    |        |           |                    |
|---|--------------------------------------|---------|------------|---------|-------|-----------|-----------|--------|-----------|--------------------|
|   |                                      |         |            |         | Fro   | om:       |           | To:    |           |                    |
|   |                                      |         |            |         |       |           | DATE      |        |           | AMOUNT             |
| Full Name of Contributor                                      |                                      |         |            |         |       | мо        | DAY       | YEAR   |           |                    |
| Mailing Address   |                                      |         |            |         |       |           |           |        | <b>\$</b> | 0.00               |
| City  | State                                |         | Zip Code(F | Plus 4) |       |           |           |        |           |                    |
| Employer of Contributor                                       | •                                    |         | •          |         |       | Occupa    | tion      |        | •         |                    |
| Employer Mailing Address/Principal Pla<br>Business            | ace of                               | City    |            | State   |       | Zip<br>4) | Code(Plus | Descri | ption     | of Contribution    |
| Enter Grand Total of Part G on Sc<br>Summary Page, Section 3. | hedule II, I                         | In-Kind | Contributi | ons De  | taile | ed        |           |        |           | PAGE TOTAL<br>0.00 |

# SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or (  | Name of Filing Committee or Candidate |                         |        |             |           | Reporting Period |            |  |  |  |  |
|--|---------------------------------------|-------------------------|--------|-------------|-----------|------------------|------------|--|--|--|--|
|  | From                                  |                         |        | То:         |           |                  |            |  |  |  |  |
|  |                                       |                         |        | DATE        |           |                  | AMOUNT     |  |  |  |  |
| To Whom Paid   |                                       |                         | МО     | DAY         | YEAR      |                  |            |  |  |  |  |
| Mailing Address  |                                       |                         |        |             |           | \$               | 0.00       |  |  |  |  |
| City   | State                                 | Zip Code (Plus 4)       | Descri | ption of Ex | penditure |                  |            |  |  |  |  |
| Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D |                                       |                         |        |             |           |                  | PAGE TOTAL |  |  |  |  |
| Enter Grand Total of Expen   | laitures on Page 1, Re                | port Cover Page, Item D | ).     |             |           | \$               | 0.00       |  |  |  |  |

## STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

| Name of Filing Committee or Candidate Reporting |                  |                    | ng Period              |       |                                       |                                       |        |    |                                |
|---|------------------|--------------------|------------------------|-------|---------------------------------------|---------------------------------------|--------|----|--------------------------------|
| EMRICK,JOE COM T                                | O ELECT          |                    |                        | From: |                                       | 1/1/2007                              | То:    |    | 6/4/2007                       |
|   |                  |                    |                        |       |                                       | DATE                                  |        |    | Outstanding<br>Balance of Debt |
| Name of Creditor  JOE EMRICK                    |                  |                    |                        |       | МО                                    | DAY                                   | YEAR   |    |                                |
| Mailing Address                                 | 2312 BLUE JAY DR |                    |                        |       | 10                                    | 27                                    | 2003   | \$ | 151.40                         |
| City NAZARETH                                   |                  | <b>State</b><br>PA | Zip Code (Plu<br>18064 | ıs 4) |                                       | otion of Del                          |        |    |                                |
|   |                  |                    |                        |       |                                       | DATE                                  |        |    | Outstanding<br>Balance of Debt |
| Name of Creditor JOE EMRICK                     |                  |                    |                        |       | МО                                    | DAY                                   | YEAR   |    |                                |
| Mailing Address 2312 BLUE JAY DR                |                  |                    | 11                     | 17    | 2003                                  | \$                                    | 200.00 |    |                                |
| <b>City</b> NAZARETH                            |                  | <b>State</b><br>PA | Zip Code (Plu<br>18064 | ıs 4) | Description of Debt LOAN TO COMMITTEE |                                       |        |    |                                |
|   |                  |                    |                        |       |                                       | DATE                                  |        |    | Outstanding<br>Balance of Debt |
| Name of Creditor JOE EMRICK                     |                  |                    |                        |       | МО                                    | DAY                                   | YEAR   |    |                                |
| Mailing Address                                 | 2312 BLUE JAY DR |                    |                        |       | 2                                     | 6                                     | 2004   | \$ | 100.00                         |
| <b>City</b> NAZARETH                            |                  | <b>State</b><br>PA | Zip Code (Plu<br>18064 | ıs 4) |                                       | Description of Debt  OAN TO COMMITTEE |        |    |                                |
|   |                  |                    |                        |       |                                       | DATE                                  |        |    | Outstanding<br>Balance of Debt |
| Name of Creditor JOE EMRICK                     |                  |                    |                        |       | мо                                    | DAY                                   | YEAR   |    |                                |
| Mailing Address 2312 BLUE JAY DR                |                  |                    |                        |       | 4                                     | 30                                    | 2004   | \$ | 500.00                         |
| City NAZARETH                                   |                  | <b>State</b><br>PA | Zip Code (Plu<br>18064 | ıs 4) |                                       | otion of Del                          |        |    |                                |

|   |       |                   |                     | DATE      |      |    | Outstanding<br>Balance of Debt |  |  |
|---|-------|-------------------|---------------------|-----------|------|----|--------------------------------|--|--|
| Name of Creditor JOE EMRICK   |       |                   |                     | DAY       | YEAR |    |                                |  |  |
| Mailing Address 2312 BLUE JAY DR  |       |                   | 7                   | 20        | 2004 | \$ | 1,500.00                       |  |  |
| City NAZARETH   | State | Zip Code (Plus 4) | Description of Debt |           |      |    |                                |  |  |
| IV WETT   | PA    | 18064             |                     | го сомміт |      |    |                                |  |  |
|   | I     |                   |                     |           |      |    | PAGE TOTAL                     |  |  |
| Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G. |       |                   |                     |           |      |    | 2,451.40                       |  |  |
|   |       |                   |                     |           |      |    |                                |  |  |
|   |       |                   |                     |           |      |    |                                |  |  |
|   |       |                   |                     |           |      |    |                                |  |  |
|   |       |                   |                     |           |      |    |                                |  |  |
|   |       |                   |                     |           |      |    |                                |  |  |
|   |       |                   |                     |           |      |    |                                |  |  |
|   |       |                   |                     |           |      |    |                                |  |  |