

CAMPAIGN FINANCE REPORT

PAGE 1 OF

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(COVER PAGE)

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

Filer Identification Number: 		Report Filed By: 		CANDIDATE ^{1.}		COMMITTEE ^{2.} <input checked="" type="checkbox"/>		LOBBYIST ^{3.}		
Name of Filing Committee, Candidate or Lobbyist: <i>Friends of Hillary Kwiatek</i>										
Street Address: <i>638 Spring Street</i>										
City: <i>Bethlehem</i>					State: <i>PA</i>		Zip Code: <i>18018-</i>			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY ^{1.}		2ND FRIDAY PRE-PRIMARY ^{2.} <input checked="" type="checkbox"/>		30 DAY POST PRIMARY ^{3.}		AMENDMENT REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
	6TH TUESDAY PRE-ELECTION ^{4.}		2ND FRIDAY PRE-ELECTION ^{5.}		30 DAY POST ELECTION ^{6.}		TERMINATION REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>			
	ANNUAL REPORT ^{7.}		YEAR 		FILING METHOD () CHECK ONE 		PAPER <input type="checkbox"/> DISKETTE <input type="checkbox"/>			
Name of Office Sought by Candidate: <i>Lehigh County Commissioner</i>					DATE OF ELECTION		District Number		Office Code	
					MO. DAY YEAR <i>5 19 2009</i>		<i>5</i>		<i>OTH</i>	
									Party Code <i>DEM</i>	
									County Code <i>39</i>	
									(SEE INSTRUCTIONS FOR CODES)	
Summary of Receipts and Expenditures from: 					MO. DAY YEAR <i>2 19 2009</i>		MO. DAY YEAR <i>5 4 2009</i>		FOR OFFICE USE ONLY	
A. Amount Brought Forward From Last Report					\$ <i>0</i>					
B. Total Monetary Contributions and Receipts (From Schedule I)					\$ <i>1,293.00</i>					
C. Total Funds Available (Sum of Lines A and B)					\$ <i>1,293.00</i>					
D. Total Expenditures (From Schedule III)					\$ <i>210.22</i>					
E. Ending Cash Balance (Subtract Line D from Line C)					\$ <i>1,082.78</i>					
F. Value of In-Kind Contributions Received (From Schedule II)					\$ <i>75.00</i>					
G. Unpaid Debts and Obligations (From Schedule IV)					\$ <i>0.00</i>					

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, on paper or computer diskette, 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

Signature

Printed Name

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

Signature

Printed Name

My commission expires

MO. DAY YR.

Area Code

Daytime Telephone Number

Department of State • Bureau of Commissions, Elections and Legislation
 210 North Office Building • Harrisburg, PA 17120-0029 • (717) 787-5280

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate <i>Friends of Hillary Kwiatek</i>	Reporting Period From <i>2/19/09</i> To <i>5/4/09</i>
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ <i>890.00</i>

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)	
Contributions Received from Political Committees (Part A)	\$ <i>0.00</i>
All Other Contributions (Part B)	\$ <i>403.00</i>
TOTAL for the Reporting Period (2)	\$ <i>403.00</i>

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$ <i>0.00</i>
All Other Contributions (Part D)	\$ <i>0.00</i>
TOTAL for the Reporting Period (3)	\$ <i>0.00</i>

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)	
TOTAL for the Reporting Period (4)	\$ <i>0.00</i>

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 Page 1, Report Cover Page, Item B.)	\$ <i>1293.00</i>
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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.

Name of Filing Committee or Candidate <i>Friends of Hillary Kwiatek</i>	Reporting Period From <i>2/19/09</i> To <i>5/4/09</i>
--	--

				DATE			AMOUNT
				MO.	DAY	YEAR	
Full Name of Contributing Committee							\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
		-					
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
		-					
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
		-					
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
		-					
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
		-					
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
		-					
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
		-					
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
		-					
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
		-					
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
		-					

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

PAGE TOTAL

\$ -0-

PART B
ALL OTHER CONTRIBUTIONS

PAGE 4 OF 12

\$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 Candidate <i>Friends of Hillary Kwiatek</i>	Reporting Period From <i>2/19/09</i> To <i>5/4/09</i>
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				DATE			AMOUNT
Full Name of Contributor	MO.	DAY	YEAR				
<i>Lane E. Wider</i>	<i>5</i>	<i>3</i>	<i>09</i>				\$ <i>103.00</i>
Mailing Address <i>730 Prospect Ave.</i>	MO.	DAY	YEAR				\$
City <i>Bethlehem</i>	State <i>PA</i>	Zip Code (Plus 4) <i>18018-</i>		MO.	DAY	YEAR	\$
<i>Rosalind Glatt</i>	<i>3</i>	<i>26</i>	<i>09</i>				\$ <i>100.00</i>
Mailing Address <i>5012 Adrian St.</i>	MO.	DAY	YEAR				\$
City <i>Rockville</i>	State <i>MD</i>	Zip Code (Plus 4) <i>20853-</i>		MO.	DAY	YEAR	\$
<i>Joseph S. Kwiatek</i>	<i>3</i>	<i>26</i>	<i>09</i>				\$ <i>100.00</i>
Mailing Address <i>1234 N. 19th</i>	MO.	DAY	YEAR				\$
City <i>Allentown</i>	State <i>PA</i>	Zip Code (Plus 4) <i>18104-</i>		MO.	DAY	YEAR	\$
<i>Stephen Zakos</i>	<i>3</i>	<i>5</i>	<i>09</i>				\$ <i>100.00</i>
Mailing Address <i>252 North St.</i>	MO.	DAY	YEAR				\$
City <i>Emmaus</i>	State <i>PA</i>	Zip Code (Plus 4) <i>18049-</i>		MO.	DAY	YEAR	\$
Full Name of Contributor	MO.	DAY	YEAR				\$
Mailing Address	MO.	DAY	YEAR				\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Full Name of Contributor	MO.	DAY	YEAR				\$
Mailing Address	MO.	DAY	YEAR				\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Full Name of Contributor	MO.	DAY	YEAR				\$
Mailing Address	MO.	DAY	YEAR				\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Full Name of Contributor	MO.	DAY	YEAR				\$
Mailing Address	MO.	DAY	YEAR				\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$

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

PAGE TOTAL

\$ *403.00*

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 over \$250.00 in the reporting period.

Name of Filing Committee or Candidate				Reporting Period			
<i>Friends of Hillary Kwiatek</i>				From <i>2/19/09</i> To <i>5/4/09</i>			
				DATE			AMOUNT
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$

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

PAGE TOTAL

\$ *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 <i>Friends of Hillary Kwiatek</i>	Reporting Period From <i>2/19/09</i> To <i>5/4/09</i>
--	--

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

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

PAGE TOTAL

\$ 0.00

**PART E
OTHER RECEIPTS**

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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 <i>Friends of Hillary Kwiatek</i>	Reporting Period From <i>2/19/02</i> To <i>5/4/09</i>
--	--

Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
		—				\$
Receipt Description						

Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
		—				\$
Receipt Description						

Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
		—				\$
Receipt Description						

Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
		—				\$
Receipt Description						

Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
		—				\$
Receipt Description						

Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
		—				\$
Receipt Description						

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

PAGE TOTAL

\$ *0.00*

IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVEDUSE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS
DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate

Friends of Hillary Kwiatek

Reporting Period

From 2/19/09 To 5/4/09**1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR**

TOTAL for the Reporting Period (1) \$

2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)TOTAL for the Reporting Period (2) \$ 75.00**3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)**

TOTAL for the Reporting Period (3) \$

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, Report Cover Page, Item F.)\$ 75.00

SCHEDULE II
PART F

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IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate <i>Friends of Hillary Kwiatek</i>	Reporting Period From <i>2/19/09</i> To <i>5/4/09</i>
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Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
<i>Larry Glatt Photography</i>	<i>3</i>	<i>1</i>	<i>09</i>	\$ <i>75.00</i>
Mailing Address <i>5012 Adrian St.</i>	MO.	DAY	YEAR	\$
City <i>Rockville</i>	MO.	DAY	YEAR	\$
State <i>MD</i>				
Zip Code (Plus 4) <i>20853 -</i>				

Description of Contribution:

Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				

Description of Contribution:

Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				

Description of Contribution:

Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				

Description of Contribution:

Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				

Description of Contribution:

Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				

Description of Contribution:

Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				

Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.

PAGE TOTAL
\$ *75.00*

**SCHEDULE II
PART G**

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IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate <i>Friends of Hillary Kwiatek</i>	Reporting Period From <i>2/19/09</i> To <i>5/4/09</i>
--	--

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

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.

PAGE TOTAL

\$ - 0 -

SCHEDULE III
STATEMENT OF EXPENDITURES

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Name of Filing Committee or Candidate <u>Friends of Hillary Kwiatek</u>	Reporting Period From <u>2/19/09</u> To <u>5/4/09</u>
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To Whom Paid <u>Lehigh County Democratic Committee</u>			MO. <u>4</u>	DAY <u>3</u>	YEAR <u>09</u>	Amount \$ <u>154.25</u>
Mailing Address <u>P.O. Box 33</u>			Description of Expenditure <u>voter registration file</u>			
City <u>Allentown</u>	State <u>PA</u>	Zip Code (Plus 4) <u>18105 -</u>				
To Whom Paid <u>Click and Pledge</u>			MO. <u>4</u>	DAY <u>10</u>	YEAR <u>09</u>	Amount \$ <u>50.00</u>
Mailing Address <u>2200 Kraft Dr., Suite 1175</u>			Description of Expenditure <u>on-line donations activation</u>			
City <u>Blacksburg</u>	State <u>VA</u>	Zip Code (Plus 4) <u>24060 -</u>				
To Whom Paid <u>Icontact</u>			MO. <u>4</u>	DAY <u>15</u>	YEAR <u>09</u>	Amount \$ <u>5.97</u>
Mailing Address <u>2635 Meridian Parkway</u>			Description of Expenditure <u>monthly account fee;</u> <u>on-line contributions</u>			
City <u>Durham</u>	State <u>NC</u>	Zip Code (Plus 4) <u>27113 -</u>				
To Whom Paid			MO.	DAY	YEAR	Amount \$
Mailing Address			Description of Expenditure			
City	State	Zip Code (Plus 4)				
To Whom Paid			MO.	DAY	YEAR	Amount \$
Mailing Address			Description of Expenditure			
City	State	Zip Code (Plus 4)				
To Whom Paid			MO.	DAY	YEAR	Amount \$
Mailing Address			Description of Expenditure			
City	State	Zip Code (Plus 4)				
To Whom Paid			MO.	DAY	YEAR	Amount \$
Mailing Address			Description of Expenditure			
City	State	Zip Code (Plus 4)				
To Whom Paid			MO.	DAY	YEAR	Amount \$
Mailing Address			Description of Expenditure			
City	State	Zip Code (Plus 4)				

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL
\$ 210.22

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.

Name of Filing Committee or Candidate <i>Friends of Hillary Kwiatek</i>	Reporting Period From <i>2/19/09</i> To <i>5/4/09</i>
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Name of Creditor					Outstanding Balance of Debt \$	
Mailing Address		DATE DEBT INCURRED	MO.	DAY	YEAR	
City						
		State	Zip Code (Plus 4)			
Description of Debt						

Name of Creditor					Outstanding Balance of Debt \$	
Mailing Address		DATE DEBT INCURRED	MO.	DAY	YEAR	
City						
		State	Zip Code (Plus 4)			
Description of Debt						

Name of Creditor					Outstanding Balance of Debt \$	
Mailing Address		DATE DEBT INCURRED	MO.	DAY	YEAR	
City						
		State	Zip Code (Plus 4)			
Description of Debt						

Name of Creditor					Outstanding Balance of Debt \$	
Mailing Address		DATE DEBT INCURRED	MO.	DAY	YEAR	
City						
		State	Zip Code (Plus 4)			
Description of Debt						

Name of Creditor					Outstanding Balance of Debt \$	
Mailing Address		DATE DEBT INCURRED	MO.	DAY	YEAR	
City						
		State	Zip Code (Plus 4)			
Description of Debt						

Name of Creditor					Outstanding Balance of Debt \$	
Mailing Address		DATE DEBT INCURRED	MO.	DAY	YEAR	
City						
		State	Zip Code (Plus 4)			
Description of Debt						

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.

PAGE TOTAL

\$ *-0.00*