	CA	MPAIGN	FINANCE REF	PORT			
· 	Name and A	ddress of	Filing Candidate	or Com	mitte	ee	
Name: Address: City, State	e, Zip:	New Sheriff Andy Campaign 3213 Clear Stream Dr Whitehall PA 18052 Report Filed By					
Candidate	e		Committee	;; <u>, , , , , , , , , , , , , , , , , , </u>		X	
Type of R	eport 30 Day Post	Election	Election Date	Amend	led	Termination	
TERMINA	ATION REPORT		11/08/2011	No		No	
Office Sought By Candidate Party Count				County	y		
Lehigh Co	unty Sheriff	<u>-</u>	R	Lehigh			
	Sumi	nary of R	eceipts & Expend	litures			
From:	10/25/2011		To:	11/28/2	011		
A. Amoun	t Brought Forwa	rd From L	ast Report		1,275.19		
B. Total M	Ionetary Contrib	utions & R	Receipts (from Sche	edule I)	2,80	00.00	
C. Total F	unds Available (S	of Lin	es A & B)	*,4	4,075.19		
D. Total E	D. Total Expenditures (from Schedule III)					3,995.21	
E. Ending	Cash Balance (St	ıbtract Lin	ne D from Line C)		79.9	8	
F. Value o	f In-Kind Contril	outions Re	ceived (from Sched	iule II)	390.	00	
G. Unpaid	Debts & Obligat	ions (from	Schedule IV)	-	1 94.3	4)	
*0	reports including						

^{*}Complete reports including signatures are on file in the Office of Voter Registration.

SCHEDULE I

PAGE 2 OF 12

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate		Reporting Period
New Sheriff Andy	Campaign	From 10-25-11 To 11-28-17

1. UNITEMIZED CONTRIBUTIONS A	ND RECEIPTS - \$50.00 OR LESS F	ER CONT	RIBUTOR	rije. Simonii
	TOTAL for the Reporting Period	(1)	\$ 300.00	

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)	
Contributions Received from Political Committees (Part A)	\$
All Other Contributions (Part B)	\$ 500.00
TOTAL for the Reporting Period (2)	\$

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)		The state of the s
Contributions Received from Political Committees (Part C)		\$
All Other Contributions (Part D)		\$ 2,000.00
TOTAL for the Reporting Period	(3)	\$

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS), ETC	(FROM PART B)
TOTAL for the Reporting Period	(4)	\$

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	\$ 2,800
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 Candidate			porting Pe	rrod	V-10-10-10-10-10-10-10-10-10-10-10-10-10-	
		F	rom		То	
			DATE		AMOUNT	
Full Name of Contributing Committee		-MO	DAY ((EAR	d.	
Mailing Address			DAY	/C.4.5	\$	
ing.mg //da/da		Exchange PAY (Consult)		3.52 Year (1911)	\$	
City State	Zip Code (Plus 4)	MO	DAY	EAR		
	-				\$	
Full Name of Contributing Committee		MO.	DAY (/EAR	*	
Mailing Address		100	DAY	JE AD	\$	
•			SAME AND A STREET OF STREET		\$	
City	Zip Code (Plus 4)	MO.	DAY	ÆAR -	_	
	_				\$	
Full Name of Contributing Committee		MO.	DAY	/EAR	\$	
Mailing Address		110	DAY	(EAR		
-					\$	
City State	Zip Code (Plus 4)	MO.	DAY (/EAR		
	_				\$	
Full Name of Contributing Committee		<u>№0.</u>	DAY	/EAR	\$	
Mailing Address	- 13 7 100 100 100	Mo	DAY	ÆAR.	Y	
-					\$	
City State	Zip Code (Plus 4)	MO	DAY	/EAR	——————————————————————————————————————	
					\$	
Full Name of Contributing Committee		MO.	DAY	/EAR	\$	
Mailing Address		мо.	DAY	/EAR		
		S1. 11. 11. 15. 11. 11. 11. 11. 11. 11. 1			\$	
City State	Zip Code (Plus 4)	MOV	DAY Y	/EAR	*	
	_				\$	
Full Name of Contributing Committee		MO.	DAY	YEAR	\$	
Mailing Address	:	MO.	DAY	/EAR	_	
					\$	
City State	Zip Code (Plus 4)	MO	DAY	/EAR		
		6.0.24.5			<u>\$</u>	
Full Name of Contributing Committee		MO.	DAY (10)	CEAR	\$	
Malling Address		MO.	DAY)	/EAR		
					\$	
City State	Zip Code (Flus 4)	MO :	DAY	'EAR	¢	
		Section Continues and	DAY	/FAB.	\$	
Full Name of Contributing Committee			DAT	FAG	\$	
Mailing Address		MO.	OAY \	/EAR	*	
					\$	
City State	Zip Code (Plus 4)	MO:	DAY	EAR	S	
		<u> </u>			PAGE TOTAL	
Enter Grand Total of Part A on Schedule	I, Detailed Summa	ry Page, S	Section			
					\$	
DSEB-502 (7-99)				-		

\$ 500,00

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.)

(Exclude contributi	ons from political comi	mittees reported in Part	A.)
Name of Filing Committee or Candidate		Reporting Period	
New Sherikk Andy	Campaign	From 10.28	-11 To 11-28-11
		DATE	AMOUNT
Full Name of Contributor Robert George Mailing Address Yth Ave		MO DAY YEAR 11 4 2611	\$ 200.00
Mailing Address Yth Ave		MO. DAY YEAR	\$
whitehall	State Zip Code (Plus 4)	MOJE STAY SYEARS	\$
Full Name of Contributor VICTOR Mazziotti		11 4 2011	\$ 100.00
2430 W. Washington	v S7	MO DAY YEAR	\$
ANentown	PA 18104 -	IIII Morae Maro Avida (MY - Avida)	\$
Full Name of Contributor Douglas & Jennifer Mailing Address	- Foster	aa MORSS and AVAEL EXTARISE	\$ 100.00
993 Congress S	trect	MANORE DAVE SYEAR	\$
993 Congress Si Whitehall	PA 18052	MO. DAY YEAR	\$
Full Name of contributor Richard Case & Un Mailing Address	da CASE	MOVE EDAYES EVEATE	\$ 100.00
7220 Edgewood A	ve	MO DAY YEAR	\$
2220 Edgewood A	PA 18045-	MOS SOAY EYEAF	\$
Full Name of Contributor	de describero v	WO THE STATE OF TH	\$
Mailing Address		MOZE DAY: YEAR	\$
City	State Zip Code (Plus 4)	MMOLTE MONTH MAYERS	\$
Full Name of Contributor		MC	\$
Mailing Address		MO. STOAY STYEARS	\$
City	State Zip Code (Plus 4)	MOZ. EDAY SYEAR	\$
Full Name of Contributor		MEMOTE EDAVE EVEATE	\$
Mailing Address		MO. DAY XEAR	\$
City	State Zip Code (Plus 4)	EMO. DAY YEAR	\$
Full Name of Contributor		MOUSE TOAY	\$
Mailing Address		Mo. DAV. YEAR	\$
City	State Zip Code (Plus 4)	MO: DAY YEAR	\$
			-D

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

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.

New Shenff Andy	Campaign	From 10-25	11 To 11-28-11
		DATE	AMOUNT
Full Name of Contributing Committee		MOSE SOAY SEYEAR	\$
Mailing Address		Mo: DAY YEAR	\$
City State	Zip Code (Pius 4)	MO. DAY YEAR	\$
Full Name of Contributing Committee	A	MO. TOAY YEAR	\$
Mailing Address		TOTAL NO POWER SERVICES SINCE	\$
City State	Zip Code (Plus 4)	MO. DAY YEAR	s
Full Name of Contributing Committee		MO POW MEAS	\$
Mailing Address		MO DAY YEAR	\$
City State	Zip Code (Plus 4)	MO. DAY YEAR	s
Full Name of Contributing Committee		MOUS CLOAY YEAR	\$
Mailing Address		MO	\$
City	Zip Code (Plus 4)	MO. DAY YEAR	\$
Full Name of Contributing Committee		MG. DAY YEAR	s
Mailing Address		MORES SOAVES TAYEN	\$
City	Zip Code (Plus 4)	MO DAY YEAR	\$
Full Name of Contributing Committee		MO DAY YEAR	\$
Mailing Address		MO DAY YEAR	\$
City	Zip Code (Plus 4)	MO. III PIDAY	\$
Full Name of Contributing Committee		OAY on Stry FAR	\$
Mailing Address		MO. DAY YEAR	\$
City	Zip Code (Plus 4)	MG. PAY YEAR	\$
Full Name of Contributing Committee		MO DAY YEAR	\$
Mailing Address		MO, TOAY YEAR	\$
City State	Zip Code (Plus 4)	PRINCIPLE PRINCI	\$
			PAGE TOTAL
Enter Grand Total of Part C on Schedule I	, Detailed Summary	/ Page, Section 3.	\$

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		Reporting	Period	
New Sheritof Andy Comp	aign	From /	0-25-1	1 To 11-28-11
Full Name of Contributor	E	DATE		AMOUNT
Full Name of Contributor LISA J. Scheller Wayne Wood Mailing Address	iman I	1/ 2	YEAR 2011	\$ 500.00
Mailing Address		O DAY		
751 Benner Rd City Allentown RA 181				\$
City State Zip	Code (Plus 4)	O. DAY	YEAR	
Allentown RA 181	04-			\$
Employer Name	Occi	upation	'	
Silberline Mtg Co	(Chairn	nan	
Employer Mailing Address/Principal Place of Business				
Full Name of Contributor	<u>Maria</u>	D. DAY	YEAR	\$ 1500.00
Jean & Michael Gradaris		<u> </u>	2011	\$ 1,500.00
Mailing Address	<u>*</u>	O DAY	YEAR	S
do 101 Herring way				
Romata Commar F1 2211	200e (Plus 4)	O. DAY	WEAR	\$
Full Name of Contributor Tean & Michael Grabarits Mailing Address 28184 Herring Way City Conita Springs FL 3411 Employer Name	3.3	upation		4
Self-Employed	000	nwi (er	
Employer Mailing Address/Principal Place of Business			· · · · · · · · · · · · · · · · · · ·	
Full Name of Contributor	55 (or € €	O DAY	YEAR	
Tall Halle of Commodity			The second	\$
Mailing Address	· · · · · · · · · · · · · · · · · · ·	DAY	YEAR	
				\$
City State Zip	Code (Plus 4)	O. DAY	YEAR	
	-			\$
Employer Name	Occi	apation		
Employer Mailing Address/Principal Place of Business				

Full Name of Contributor	MARIN M	O DAY	YEAR	\$
	- 11000000	55.52.120097	,	9
Mailing Address		0 DAY	YEAR	\$
City State Zip (Code (Plus 4)			,
2.10		O. DAY	YEAR	\$
Employer Name	Ozzal	spation	<u> </u>	· · · · · · · · · · · · · · · · · · ·
		zputton		
Employer Mailing Address/Principal Place of Business				
• •				
Full Name of Contributor	S 21	O. DAY	YEAR	
THE PROPERTY OF CONTROL OF	**************************************	0,112 0.5 07 1.5	EJAN	\$
Mailing Address	ESIN	O. DAY	YEAR	
				\$
City State Zip (Code (Plus 4) M	O. DAY	YEAR	*
				\$
Employer Name	Oce	pstion	***************************************	
Employer Mailing Address/Principal Place of Business				
Enter Grand Total of Part D on Schedule I, Detail	ad Summary Da	an Santin	2	PAGE TOTAL
	www.minimiy F4	ge, Jevill	··· •	\$ 2,000-00
CEB-EAG /7-001			1	■ . · · · · · · · · · · · · · · · · · ·

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Reporting Period

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	1 1	0	Reporting		
New Sheriff	Hndy	(ampaig)	1 From _	То	
		Action 1881 de la company			
ull Name					
failing Address	·				
lity	State	Zip Code (Plus 4)	m MO. DAY	YEAR Amount	
,	12.310	-		\$	
eceipt Description					
uti Name					· . · · · · · · · · · · · · · · · · · ·
				<u> </u>	
failing Address				****	
ity	State	Zip Code (Plus 4)	MO. DAY	Amount \$	
leceipt Description					
ull Name					
Moiling Address					
334		71_	TEMO EM PEDAYE	yean Amount	
Sity	State	Zip Code (Plus 4) —	MU DATE	\$	
Receipt Description					
Full Name	<u>-</u> .			The second secon	\\\\
				· · · · · · · · · · · · · · · · · · ·	
Meiling Address					
City	State	Zip Code (Plus 4)	MO DAY	YEAR Amount	
		<u> </u>		\$	······································
eceipt Description					
ull Name		· · · · · · · · · · · · · · · · · · ·			
Mailing Address					
-					
City	State	Zip Code (Plus 4)	CMGE CAY	Amount \$	
Receipt Description		· · · · · · · · · · · · · · · · · · ·	1		
Tivi Na					
ull Name					
Mailing Address					
zīty	State	Zip Code (Plus 4)	SEMORIE ESCAVE	YEAR AMOUNT	
		1400		\$	
Receipt Description					
				PAGE TOTA	L
Enter Grand Total of Part E o	n Schedule I.	Detailed Summar	y Page, Section	on 4. \$	•
SEB-502 (7-99)			,		

SCHEDULE II

PAGE 8 OF 12

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 New Sheriff Andy Campaign	Reporting Per From		, 11-28-1/
1. UNITEMIZED INSKIND CONTRIBUTIONS RECEIVED - VALUE OF	\$50.00 OR 1	ESS PER C	ONTRIBUTOR :::
TOTAL for the Reporting Perio	od (1)	\$ 6	3
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$2	250.00 (FRON	DAR F	
TOTAL for the Reporting Perio	od (2)	\$ 0	
3 IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FR	OM PART G	TRANSPORT OF THE PROPERTY OF T	TO THE REPORT OF THE PERSON OF
TOTAL for the Reporting Perio	od (3)	\$ 39	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, Report Cover Page, Item F.)		\$	

SCHEDULE II PART F

IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

New Sheriff Andy	Campagn	Reporting From /		1/ To 11-28-11
		DATE		AMOUNT
Full Name of Contributor		MO E DAY	YEAR	s
Mailing Address	ANNA	MO MEDAYAN	EYEAR	s
City State	Zip Code (Plus 4)	MO. S. DAY	YEAR	\$
Description of Contribution:			<u>.L</u>	
Full Name of Contributor		I MOZE E DAYE	YEAR	777 - AMMARIAAAAA
				\$
Mailing Address		MO. DAY	- YEAR	\$
Çity State	Zip Code (Plus 4) —	MO. DAY	YEAR	\$
Description of Contribution:		<u> </u>	I .	I
Full Name of Contributor	ware and a second	MO. DAY	YEAR	.
Mailing Address		ELMO ELLOWA	YEAR	\$
			TEAR	\$
City State	Zip Code (Plus 4)	= MO. = CAY	YEAR	\$
Description of Contribution:			.	<u> </u>
Full Name of Contributor		MG DAY	YEAR	\$
Mailing Address		MO G BOAY	VEAR	₽
				\$
City	Zip Code (Plus 4) —	EMOLE ENDAY	YEAR	\$
Description of Contribution:				
Full Name of Contributor		MG. DAY	YEAR	\$
Mailing Address		MO. DAY	YEAR	
City State				\$
City State	Zip Code (Plus 4) —	HARMSHAID LA DAVARA	YEAR	\$
Description of Contribution:				
Full Name of Contributor		MO DAY	YEAR	\$
Mailing Address	, a	MO. PAY	YEAR	
City State	Zin Code (Q) 45			\$
	Zip Code (Plus 4)	MO	YEAR	\$
Description of Contribution:				
Enter Grand Total of Part F on Schedule II,	In-Kind Contribut	ions Detailed		PAGE TOTAL
Summary Page, Section 2.	m-Kiliq Contribut	IVID DEFRIED		\$
•				

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	Reporting Period
New Sheritt Andy Campaign	From 10-25-11 To 31-28-11
	DATE AMOUNT
Full Name of Contributor Glenn EcKhart	11 3 2011 \$ 390. 50
Full Name of Contributor Glenn EcKhart Mailing Address SII East Federal St. City AMentoun Employer of Contributor Employer of Contributor	MO. DAY WEAR \$
Allen town State Zip Code (Plus 4) Allen town PA 18103-	S S
Employer of Contributor Seif-Employed Employer Mailing Address (Prince Prince Prince	Occupation
Employer Mailing Address/Principal Place of Business	Description of Contribution Mailer
Full Name of Contributor	MOZ BEDAY PENSAR \$
Meiling Address	MG. DAY YEAR \$
City State Zip Code (Plus 4)	S S
Employer of Contributor	Occupation
Employer Mailing Address/Principal Place of Business	Description of Contribution
Full Name of Contributor	* S
Mailing Address	MO. S DAYS YEAR \$
City State Zip Code (Plus 4)	MO DAY YEAR \$
Emplayer of Contributor	Occupation
Employer Mailing Address/Principal Place of Business	Description of Contribution
Full Name of Contributor	MG. DAY YEAR
Mailing Address	\$
	MO DAY YEAR \$
Gity State Zip Code (Plus 4)	MO. PAY YEAR \$
Employer of Contributor	Occupation
Employer Mailing Address/Principal Place of Business	Description of Contribution
Full Name of Contributor	MG. DAY YEAR \$
Mailing Address	MO STATE TYPEAR S
City State Zip Code (Plus 4)	MG. YEAR S
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 Contribut Summary Page, Section 3.	tions Detailed \$ 3 90, 00

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SCHEDULE III

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
New Sheritt Andy Campaia	12 From 10-28-11 To 11-28-11
To Whom Paid RS Print LLC - Vandon Coup Malling Address	er MO DAY YEAR Amount \$225.00
Mailing Address 2861 Mandela Parkway City State Zip Code	e (Plus 4)
Oallland CA 9466	8- Website-Facebook
To Wham Paid PS Print LLC Mailing Address	MO. DAY TEAR Amount 10 27 2011 \$ 221.02 Description of Expenditure
2861 Mandela Parkway	Post Cards
2861 Mandela Parkway City Oakland CA 9460	C (Plus 4) F-
Joanne Barrett	MO DAY YEAR Amount 11 & 2011 \$ 69.63 Description of Expenditure
42 & Summer Mtn Rond	office Supplies
Lehighton RA 1823	STAPLES
Communication Concepts	11 5 2011 \$ 1,607.20
Mailing Address	Description of Expenditure Media Services
City State Zip Code	e (Pius 4)
Easton PA	
To Whom Paid POST Master	MO DAY YEAR Amount 3 48,00 Description of Expenditure
Mailing Address Schadt Ave	Pospage
whitehall RA 1805	2 (Plus 4)
To Whom Paid J Clay tun SmiTH Mailing Address	MG. DAY YEAR Amount /0 28 1/ \$ 600,00
Mailing Address	Description of Expenditure Mailing Services
Macunga State Zip Code	Plus 4
To Whom Paid J. Clay TON SmiTH	MO GAY YEAR Amount \$ 770.00
Mailing Address	Description of Expenditure
	mailing Services
Macung 12 PA	
Chery L Cors A	10 30 11 \$ 119.36
Mailing Address Stark Rd	Description of Expanditure Tanget Mailing Services
Chery L Cors A Mailing Address Stark Rd City Bethlehem RA State Zip Code	c (Plus 4)
SST 100 100 100 100 100 100 100 100 100 10	PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report	Cover Page, Item D. \$ 3,955-21

STATEMENT OF UNPAID DEBTS

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

New Sheriff Andy Co	ampargi	1	eporting From <u>1</u>		41 To 11-28-11	/
Name of Creditor Gillespie Printing					Outstanding Balance of \$ 9434	Debt
Gillespie Printing Mailing Address 709 Robbe Rd City AMENTOWN	DATE DEBT INCURRED	/ / State	DAY 7 Zip Code) / (Plus 4)		
Description of Debt Printing Business C	ards f		11 1		ere	
Name of Creditor		<u>у</u> -			Outstanding Balance of	Debt
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR		CVV.
City		State	Zip Code —	(Pius 4)		
Description of Debt						14 14 CAS
Name of Craditor		and the second second			Outstanding Balance of	Debt
Mailing Address	DATE DEBT INCURRED	Mo.	/ DAY	FRANK		
City Description of Debt		State	Zip Code	(Plus 4)		
Name of Creditor		·			Outstanding Balance of	Debt
Mailing Address	DATE DEST INCURRED	Mo.∼	B A Y.			Debt
Mailing Address City	DEST		DAY			Debt
Mailing Address City Description of Debt	DEST					Debt
Mailing Address City Description of Debt Name of Creditor	DEBT INCURRED	State	Zip Code			
Mailing Address City Description of Debt Name of Creditor Mailing Address	DEST	State	Zip Code	(Plus 4)	\$ Outstanding Balance of	
Mailing Address City Description of Debt Name of Creditor Mailing Address City	DEBT INCURRED	State	Zip Code	(Plus 4)	\$ Outstanding Balance of	
Mailing Address City Description of Debt Name of Creditor Mailing Address City Description of Debt	DEBT INCURRED	State	Zip Code	(Plus 4)	Outstanding Balance of \$	Debt
Mailing Address City Description of Debt Name of Creditor Mailing Address City Description of Debt Name of Creditor	DEBT INCURRED	State	Zip Code	(Plus 4)	\$ Outstanding Balance of	Debt
Mailing Address City Description of Debt Name of Creditor Mailing Address City Description of Debt Name of Creditor Mailing Address	DEBT INCURRED	State	Zip Code	(Plus 4)	Outstanding Balance of \$ Outstanding Balance of	Debt
Mailing Address City Description of Debt Name of Creditor Mailing Address City Description of Debt Name of Creditor Mailing Address City City City Mailing Address	DATE DEBT INCURRED	State State	Zip Code	(Plus 4) YEAR YEAR	Outstanding Balance of \$ Outstanding Balance of	Debt
Mailing Address City Description of Debt Name of Creditor Mailing Address City Description of Debt Name of Creditor Mailing Address City	DATE DEBT INCURRED	State State	Zip Code Zip Code	(Plus 4) YEAR YEAR	Outstanding Balance of \$ Outstanding Balance of	Debt
Mailing Address City Description of Debt Name of Creditor Mailing Address City Description of Debt Name of Creditor	DATE DEBT INCURRED DATE DEBT INCURRED	State State State	Zip Code	(Plus 4) YEAR YEAR	Outstanding Balance of \$ Outstanding Balance of	Debt