

COMMONWEALTH OF PENNSYLVANIA
CAMPAIGN FINANCE STATEMENT

File this in lieu of a full report *only if* aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period.

FILER IDENTIFICATION NUMBER	REPORT FILED ON BEHALF OF	CANDIDATE <input checked="" type="checkbox"/>	COMMITTEE <input type="checkbox"/>	LOBBYIST <input type="checkbox"/>												
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST CARLA J. DEL FUOCO																
STREET ADDRESS 3036 GODFREY PLACE																
CITY TALLAHASSEE, 1		STATE FL	ZIP CODE 32309 -													
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE FAIRVIEW SCHOOL (PA) BOARD DIRECTOR		DISTRICT NO.	PARTY												
	DATE OF ELECTION															
6TH TUESDAY PRE-PRIMARY 1.			MO. 11	DAY 08 YEAR 2011												
2ND FRIDAY PRE-PRIMARY 2.																
30 DAY POST-PRIMARY 3.																
6TH TUESDAY PRE-ELECTION 4.																
2ND FRIDAY PRE-ELECTION 5.																
30 DAY POST-ELECTION 6.																
ANNUAL REPORT 7. <input checked="" type="checkbox"/>																
DATES OF REPORTING PERIOD		FOR OFFICE USE ONLY														
<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>12</td><td>31</td><td>20</td></tr> </table> TO <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>12</td><td>31</td><td>21</td></tr> </table>		MO.	DAY	YEAR	12	31	20	MO.	DAY	YEAR	12	31	21	ERIE COUNTY JAN 31 2022 VOTER REGISTRATION		
MO.	DAY	YEAR														
12	31	20														
MO.	DAY	YEAR														
12	31	21														
CASH BALANCE AT END OF REPORTING PERIOD: \$ <u>275.75</u>																
TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u>0-</u>																
<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td>AMENDMENT REPORT?</td><td>YES</td><td>NO</td></tr> <tr><td>TERMINATION REPORT?</td><td>YES</td><td>NO</td></tr> </table>		AMENDMENT REPORT?	YES	NO	TERMINATION REPORT?	YES	NO									
AMENDMENT REPORT?	YES	NO														
TERMINATION REPORT?	YES	NO														

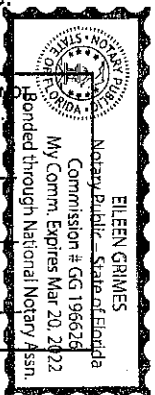
AFFIDAVIT SECTION

PART I -

If statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.
 If statement is filed on behalf of a Candidate, the Candidate must sign here.
 If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.

I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT EXCEED TWO HUNDRED AND FIFTY DOLLARS (\$250.00) AND THIS REPORT IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.

SWORN TO AND SUBSCRIBED BEFORE ME THIS <u>30th</u> DAY OF <u>January</u> 20 <u>12</u> SIGNATURE MY COMMISSION EXPIRES <u>03 26 2012</u> MO. DAY YR.	 SIGNATURE OF PERSON SUBMITTING REPORT <u>CARLA J. DEL FUOCO</u> PRINTED NAME <u>850</u> <u>320-5372</u> AREA CODE DAYTIME TELEPHONE NUMBER
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PART II -

If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must 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 MY COMMISSION EXPIRES _____ MO. DAY YR.	_____ SIGNATURE OF CANDIDATE _____ PRINTED NAME _____ AREA CODE DAYTIME TELEPHONE NUMBER
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