

### LATE CONTRIBUTIONS - 24 HOUR REPORT

Name of Filing Committee or Candidate <i>Friends of Michael Recchiuti</i>	Filer Identification Number
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			DATE RECEIVED			
Full Name of Contributor	MO	DAY	YEAR			
<i>Sean Boyle</i>	<i>5</i>	<i>11</i>	<i>15</i>			
Mailing Address <i>2516 Ludwigs Ct</i>	Amount \$			<i>500.00</i>		
City <i>Malvern</i>	State <i>PA</i>	Zip Code (Plus 4) <i>18062</i>				
Full Name of Contributor	MO	DAY	YEAR			
Mailing Address	Amount \$					
City	State	Zip Code (Plus 4)				
Full Name of Contributor	MO	DAY	YEAR			
Mailing Address	Amount \$					
City	State	Zip Code (Plus 4)				
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Mailing Address	Amount \$					
City	State	Zip Code (Plus 4)				
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