

LATE CONTRIBUTIONS – 24 HOUR REPORT

Name of Filing Committee or Candidate <i>Friends of J. William Reynolds</i>	Filer Identification Number
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		DATE RECEIVED		
Full Name of Contributor <i>Kevin Kinross</i>		MO <i>10</i>	DAY <i>25</i>	YEAR <i>2021</i>
Mailing Address <i>2209 Ben Franklin Drive</i>		Amount \$ <i>500.00</i>		
City <i>Pittsburgh</i>	State <i>PA</i>	Zip Code (Plus 4) <i>15237-1503</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)		
Full Name of Contributor		MO	DAY	YEAR
Mailing Address		Amount \$		
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Mailing Address		Amount \$		
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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)		
Full Name of Contributor		MO	DAY	YEAR
Mailing Address		Amount \$		
City	State	Zip Code (Plus 4)		

Name of Person Submitting Report: *J. William Reynolds* Date of Report: *10/25/2021*

Contact Phone Number: *610-428-8692*

Email Address: *jwilliam@jwilliamreynolds.org*