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	' ×	COMMITTEE	2.	LOBBYIST	3.
NAME OF FILING COMM Bryan	Calla	ANDIDATE OR LOBBYIST Nan					,		
STREET ADDRESS	33 M	ain St							
Bethleh	em		STATE PA		zip co 18() 15			
TYPE OF REPO (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE Bethlehem City Council	DISTRICT NO.	PARTY Den	1	MO.	DA		är 2020
OTH TUESDAY PRE-PRIMARY 2ND FRIDAY PRE-PRIMARY 30 DAY POST-PRIMARY 6TH TUESDAY PRE-ELECTION 2ND FRIDAY PRE-ELECTION	3. 4. 5.	CASH BALANCE AT END OF REPORTING PERIOD: TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:				11 FOR		USE ONLY	
30 DAY POST-ELECTION ANNUAL REPORT	8. 7.	REPORTY	NO X						Market 1 (1)

AFFIDAVIT SECTION

PART I -

If statement is filed on behalf of a <u>Political Committee or Candidates's Committee</u>, the Treasurer must sign here. If statement is filed on behalf of a <u>Candidate</u>, the <u>Candidate</u> must sign here. If statement is filed on behalf of a <u>Contributing Lobovist</u>, the <u>Cobbyist</u> must sign here.



Unsworn Declaration in Lieu of Sworn Statement for Campaign Finance Statements

Note: Per Act 2020-15, which was signed into law on April 20, 2020 and allows for unsworn declarations, Campaign Finance Reports (form DSEB-502), Campaign Finance Statements in lieu of full reports (form DSEB-503), Non-Bid Contract Reporting Form (DSEB-504) and Independent Expenditure Reports (form DSEB-505) need not be notarized. Instead, the filer may file with each report or statement the corresponding version of this form signed by the required individual(s). **This particular form is to be used only for Campaign Finance Statements.** This form must be signed by hand where a signature is required.

Name of Filing (Name of Filing Committee, Candidate, or Lobbyist Bryan Callahan										
Reporting Cycle Name											
☐ Cycle 1 6 th Tuesday Pre-Primary	□ Cycle 2 2 nd Friday Pre-Primary	Cycle 3 30 Day Post Primary		Cycle 4 uesday Election	☐ Cycle 5 2 nd Friday Pre-Election						
☐ Cycle 6 30 Day Post-Election	Cycle 7 Annual Report	☐ Cycle 8 2 nd Friday Pre-Specia	l Election	•	cle 9 ost-Special Election						

Part I – If this form is submitted with a statement in lieu of full report by a political committee, the treasurer must sign here. If this form is submitted with a statement in lieu of a full report by a candidate, the candidate must sign here. If this form is submitted with a statement in lieu of full report by a contributing lobbyist, the lobbyist must sign here.

I declare under penalty of periury under the law of the Commonwealth of Pennsylvania



Unsworn Declaration in Lieu of Sworn Statement for Campaign Finance Reports

Note: Per Act 2020-15, which was signed into law on April 20, 2020 and allows for unsworn declarations, Campaign Finance Reports (form DSEB-502), Campaign Finance Statements in lieu of full reports (form DSEB-503), Non-Bid Contract Reporting Form (DSEB-504) and Independent Expenditure Reports (form DSEB-505) need not be notarized. Instead, the filer may file with each report or statement the corresponding version of this form signed by the required individual(s). **This particular form is to be used only for Campaign Finance Reports.** This form must be signed by hand where a signature is required.

Name of Filing (Name of Filing Committee, Candidate, or Lobbyist									
	Fı	riends of Bryan Callaha	n							
Reporting Cycle	Name									
☐ Cycle 1 6 th Tuesday Pre-Primary	☐ Cycle 2 2 nd Friday Pre-Primary	☐ Cycle 3 30 Day Post Primary	6 th T	Cycle 4 uesday Election	□ Cycle 5 2 nd Friday Pre-Election					
☐ Cycle 6 30 Day Post-Election	➤ Cycle 7 Annual Report	☐ Cycle 8 2 nd Friday Pre-Special Election		•	rcle 9 ost-Special Election					

Part I - If this form is submitted with a Committee report, the treasurer must sign here. If this form is submitted with a Candidate report, the candidate must sign here. If this report is submitted with a report by a contributing lobbyist, the lobbyist must sign here.



Pennsylvania Department of State

Bureau of Campaign Finance & Civic Engagement
210 North Office Building, Harrisburg, PA 17120 • 717.787.5280 (Option 4)
www.dos.pa.gov/campaignfinance • ra-stcampaignfinance@pa.gov

Part II - If this form is submitted with a report by a Candidate's Authorized Committee, the candidate must sign here.

I declare under penalty of perjury under the law of the Commonwealth of Pennsylvania that the accompanying Campaign Finance Report is true and correct.

DSEB-502R Updated 1/22/2021



Campaign Finance Report

345492

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

Filer Identificat Number :	er Identification Imber : Ime of Filing Committee, Candidate or Lobbyist:					por ed E		CAN	IDID	ATE		сомм	ITTEE	4	LOBI	BYIST	
Name of Filing	Committee, Candida	te or Lo	obbyist:		FRI	END	S OF	BRYAI	N CA	LLAH	AN						
Street Address	633 MAIN ST												,				
City:	BEHTLEHEM							State	:	PA			Zip Co	de: 18	018-3	8801	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRI PRIMAR		E-	2.	30 DA PRIMA		P	OST-	3.		AMENDI REPORT		Yes	Νo	\checkmark
(place X to	6TH TUESDAY PRE-ELECTION	4.						AY TION	1001			TERMINATION REPORT?			No		
the right of report type)	ANNUAL REPORT	7. X	Year 20)20				NG ME					PAPER		V	DISKET	TE
Name of Office	me of Office Sought by Candidate:						DAT	E 0	FIELE			District Numbe			L	Code	
								МО	1747	DAY		YEAR			DE	:M	48
									11		3	2020	***************************************	(SEE IN	ISTRUCT	IONS FOR C	ODES)
	f Receipts and	МО	DAY	YE	AR			МО		DAY		YEAR	F	OR OFFI	CE US	E ONLY	
Expenditure	es from:		1	1	202	0	ТО		12		31	2020					
A. Amount Bi	rought Forward Fron	n Last I	Report				\$;			2	5,800.39					
B. Total Mon	etary Contributions	And Re	ceipts (F	rom Sc	hedu	le I	9	\$				0.00					
C. Total Fund	ls Available (Sum Of	Lines	A and B)				٤	\$			2	5,800.39					
D. Total Expe	D. Total Expenditures (From Schedule III)] :	\$				6,339.03						
E. Ending Cash Balance (Subtract Line D From Line C)					\$			1	9,461.36	4							
F. Value Of I	F. Value Of In-Kind Contributions Received (From Schedule II)					\$				0.00							
G. Unpaid De	G. Unpaid Debts And Obligations (From Schedule IV)				4	لندائن	\$. ,		0.00		-				

AFFIDAVIT SECTION

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	Period		
FRIENDS OF BRYAN CALLAHAN	From:	1/1/202	<u>.0</u> To:	12/31/2020
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g Period	(1)	\$	0.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	0.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	g Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	g Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reportin	g Period	(4)	\$	0.00
				CARACTURES TO SECURIC CONTROL MINISTER AND
Total Monetary Contributions and Receipts During this Reporting Period (Add at totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page 1, Report Cover Page 2, Report Cover Page 3, Report Cover			\$	0.00

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.

with an agg	with an aggregate value from \$50.01 to \$250.00 in the reporting period.									
Name of Filing Committee or Candidat	e		Re	porting I	Period					
			Fro	From: To:			:			
					DATE			AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus	4)							
								PAGE TOTAL		
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.						\$	0.00			

PART B **ALL OTHER CONTRIBUTIONS**

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from

Name of Filing Commi	ttee or Candidate		Reporting Period						
			Fro	m:		To):		
					DATE			AMOUNT	
Full Name of Contributo	r			МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4)	i						
		İ						PAGE '	
Enter Grand Tota	l of Part A on Schedule I,	Detailed Summary Page	ge, S	ection 2	2.		\$	0.0	

2/3/2021 9:24:45 PM

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 from Over \$250.00 in the reporting period.

Name of Filing Committee o	or Candidate		Reporting	Period				
·			From:			то:		
Parameter and the second secon	. Можно се в се се во се на се на се на се на се на 44 до се на се на се на 44 до се на се на се на се на се н			DA	\TE		Α	MOUNT
Full Name of Contributing (Committee			МО	DAY	YEAR		
Mailing Address					\$	0.00		
City	State	Zip Cod	le (Plus 4)		a i i i i i i i i i i i i i i i i i i i			
								PAGE TOTAL
Enter Grand Total of Par	t C on Schedule I, Detaile	ed Summary P	age, Sectio	n 3.			\$	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 Candid	nme of Filing Committee or Candidate				orting Pe	eriod			
				Fron	n:		To	o:	
					D	ATE		АМС	TNUC
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address City State Zip Code (Plus 4)								\$	0.00
City	State	Zi	ip Code (Plus	4)					
Employer Name					Occupa	ation			
Employer Mailing Address/Principal Business	Place of		City			State		Zip Code	(Plus 4)
Enter Grand Total of Part C on S	chedule I, Deta	iled Sumi	mary Page,	Section	on 3.				GE TOTAL
								\$	0.00

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			Report	ing Peric	od			
			From:			То:		
				D	ATE		АМО	UNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)				1.	
Receipt Description								
Enter Grand Total of Part E on Sched	ule I. Detailed Sumn	marv Page.	Section	4.			PAG	E TOTAL
		,					\$	0.00

SCHEDULE II

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	Reporting Perio	od						
FRIENDS OF BRYAN CALLAHAN	From:	<u>1/1/2020</u> To:	12/31/2020					
. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR								
TOTAL for the Reporting Pe	eriod (1)	\$	0.00					
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	RT F)							
TOTAL for the Reporting Pe	eriod (2)	\$	0.00					
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)								
TOTAL for the Reporting Pe	eriod (3)	\$	0.00					
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,	•	\$	0.00					

SCHEDULE II PART F

IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candida	ite		Reporting	Period				
			From:			То:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						\$	C	0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:								
Enter Grand Total of Part F on So	chedule II, In-Kii	nd Contributions Deta	iled Sum	marv Pac	ie.		PAGE TOTAL	
Section 2.					, -,	\$.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate	Reporting Period				
·	Fro	m:		То:	
			DATE		AMOUNT
Full Name of Contributor		мо	DAY	YEAR	

						DATE		А	MOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								 \$	0.00
City	State		Zip Code(Plu	s 4)					
Employer of Contributor					Occupa	ation	<u> </u>		
Employer Mailing Address/P Business	rincipal Place of	City	Si	tate	Zi _I 4)	Code(Plus	Descri	ption of Co	ontribution
Enter Grand Total of Par Summary Page, Section		In-Kind	I Contribution	s Deta	iled			P	O.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			D	David				
Name of Fining Committee of Candidate			Keportir	ng Period				
FRIENDS OF BRYAN CALLAHAN			From	1/1	/2020	To:	12/31/2020	
				DATE			AMOUNT	
To Whom Paid			мо	DAY	YEAR			
Apollo								
Mailing Address Broad St		***************************************	1	1	2020	\$	374.36	
City Bethlehem	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	·		
	PA	18015	Team N					
To Whom Paid Paddy's Old City			МО	DAY	YEAR			
Mailing Address 228 Race		**	1	9	2020	\$	176.62	
City Philadelphia	State	Zip Code (Plus 4)	Descrip	otion of Exp	enditure	· · · · · · · · · · · · · · · · · · ·		
,	PA	19101	McCaffery Installation					
To Whom Paid South Street Diner			МО	DAY	YEAR			
Mailing Address South Street			1	9	2020	\$	70.57	
City Philadephia	State PA	Zip Code (Plus 4) 19101	Descrip Meals	otion of Exp	penditure	3		
To Whom Paid Wyndam Philadephia			мо	DAY	YEAR			
Mailing Address 400 Arch St			1	9	2020	\$	145.22	
City Philadelphia	State	Zip Code (Plus 4)	Descri	ption of Ex	penditure	• •		
	PA	19101	Hotel T	ravel				
To Whom Paid Adam Shiff			мо	DAY	YEAR			
Mailing Address Requested			1	27	2020	\$	25.00	
City Requested	State	Zip Code (Plus 4)	Descri	ption of Ex	penditure	9		
·	CA	10010	Donati					

							Anna de la citado de como de la c	and the second s	
To Whom Paid Morning Call				МО	DAY	YEAR			
Mailing Address	6th St			1	28	2020	\$	19	9.96
City Allentown		State PA	Zip Code (Plus 4) 18105	Descrip News	tion of Exp	enditure			
To Whom Paid Morning Call				мо	DAY	YEAR			
Mailing Address	6th St			2	25	2020	\$	1	9.96
City Allentown		State PA	Zip Code (Plus 4) 18105	Descrip News	otion of Exp	enditure			,
To Whom Paid Morning Call				мо	DAY	YEAR			
Mailing Address	6th St			3	24	2020	\$	1	9.96
City Allentown		State PA	Zip Code (Plus 4) 18105	Description of Expenditure News					
To Whom Paid Morning Call				мо	DAY	YEAR			
	6th St			MO 4	DAY 21	YEAR 2020	\$	1	9.96
Morning Call	6th St	State PA	Zip Code (Plus 4) 18105	4		2020		1	9.96
Morning Call Mailing Address	6th St			4 Descrip	21	2020		1	9.96
Morning Call Mailing Address City Allentown To Whom Paid	6th St			4 Descrip News	21 otion of Exp	2020 penditure			9.96
Morning Call Mailing Address City Allentown To Whom Paid Morning Call				4 Description News MO 5	21 otion of Exp	2020 penditure YEAR 2020	\$		
Morning Call Mailing Address City Allentown To Whom Paid Morning Call Mailing Address		PA State	18105 Zip Code (Plus 4)	Description Mo 5	21 Day Day	2020 penditure YEAR 2020	\$		
Morning Call Mailing Address City Allentown To Whom Paid Morning Call Mailing Address City Allentown To Whom Paid		PA State	18105 Zip Code (Plus 4)	Description Mo 5 Description News	DAY 19 ption of Exp	2020 Penditure YEAR 2020 Penditure	\$	1	

								1.2
To Whom Paid Morning Call				мо	DAY	YEAR		
Mailing Address	6th St	anne ann ann ann ann ann ann ann ann ann		7	14	2020	\$	27.72
City Allentown	en e	State PA	Zip Code (Plus 4) 18105	Descrip News	tion of Exp	enditure		
To Whom Paid Morning Call				мо	DAY	YEAR		
Mailing Address	6th St			8	11	2020	\$	27.72
City Allentown		State PA	Zip Code (Plus 4) 18105	Descri p News	tion of Exp	penditure		
To Whom Paid Morning Call	and the second s			мо	DAY	YEAR		
Mailing Address	6th St			9	9	2020	\$	27.72
City Allentown		State PA	Zip Code (Plus 4) 18105	Descri News	otion of Ex	penditure		
To Whom Paid Morning Call				мо	DAY	YEAR		**************************************
Mailing Address	6th St			10	6	2020	\$	27.72
City Allentown		State PA	Zip Code (Plus 4) 18105	Descri News	otion of Ex	penditure		
To Whom Paid Morning Call		exemple at the control of the contro		МО	DAY	YEAR		
Mailing Address	6th St			11	3	2020	\$	27.72
City Allentown		State PA	Zip Code (Plus 4) 18105	Descri News	ption of Ex	penditure		
To Whom Paid Morning Call				МО	DAY	YEAR		
Mailing Address	6th St			12	1	2020	\$	27.72
City Allentown		State PA	Zip Code (Plus 4) 18105	Descri News	ption of Ex	penditure	•	
			.l					

				Olekine oleh maran mana antari basain			PAG	E 14
To Whom Paid Morning Call				МО	DAY	YEAR		
Mailing Address	6th St			12	29	2020	\$	27.72
City Allentown		State PA	Zip Code (Plus 4) 18105	Descri p News	ition of Exp	enditure		
To Whom Paid Boscov				МО	DAY	YEAR		
Mailing Address	LVMall			2	3	2020	\$	233.19
City Whitehall		State PA	Zip Code (Plus 4) 18052	Descri p PA syst	otion of Exp em	enditure		
To Whom Paid Edge Restaurant				мо	DAY	YEAR		
Mailing Address	Broad St			2	7	2020	\$	184.48
City Bethlehe	m	State PA	Zip Code (Plus 4) 18015	Description of Expenditure Dinner with Labor & CM				
To Whom Paid Blue Grill House				МО	DAY	YEAR		
Mailing Address	Wm Penn Hwy			3	13	2020	\$	147.46
City Easton		State PA	Zip Code (Plus 4) 18042	i .	otion of Exp			
To Whom Paid Staples				мо	DAY	YEAR		
Mailing Address	2138 W Union Blvd			3	23	2020	\$	86.91
City Bethlehe	m	State PA	Zip Code (Plus 4) 18015	Descri Ink	otion of Ex	penditure	<u> </u>	
To Whom Paid The ClubHouse				МО	DAY	YEAR	A CONTRACTOR OF THE CONTRACTOR	
Mailing Address	400 Illicks Mill			5	4	2020	\$	124.00
City Bethlehe	m	State PA	Zip Code (Plus 4) 18017	1	otion of Exp			

						PAC	p⊏ 15
To Whom Paid Staples		_	мо	DAY	YEAR		
Mailing Address 2138 W U	nion Blvd		7	29	2020	\$	204.85
City Bethlehem	State PA	Zip Code (Plus 4) 18015	ł	tion of Exp			
To Whom Paid Black & Gold Freedom Footba	II		МО	DAY	YEAR		
Mailing Address 3149 Ches	ster Rd		7	31	2020	\$	640.00
City Bethlehem	State PA	Zip Code (Plus 4) 18020	Descrip Sponso	rship	penditure		
To Whom Paid Whitehall Football Boosters			мо	DAY	YEAR		
Mailing Address Zepher Dr	ive		8	19	2020	\$	100.00
City Whitehall	State PA	Zip Code (Plus 4) 18052	Descrip Sponso	otion of Exp	penditure		
To Whom Paid Black & Gold Freedom Footba	ıll		мо	DAY	YEAR		
Mailing Address 3149 Che.	ster Rd		9	21	2020	\$	400.00
City Bethlehem	State PA	Zip Code (Plus 4) 18020	Descri p	otion of Exporship	penditure		
To Whom Paid Walmart			мо	DAY	YEAR		OCONOMIC RECOMMENSATION AND PROPERTY OF THE PR
Mailing Address 3926 Lind	en St		9	22	2020	\$	104.58
City Bethlehem	State PA	Zip Code (Plus 4) 18020		otion of Ex & Sanitize			
To Whom Paid Union and Finch			мо	DAY	YEAR		
Mailing Address Union St			9	22	2020	\$	369.04
City Allentown	State PA	Zip Code (Plus 4) 18104	1	otion of Ex Dinner for			

				I			····	
To Whom Paid				МО	DAY	YEAR		
Amazon Prime								
Mailing Address	400 Terry Ave North	1		9	15	2020	\$	57.24
City Seattle		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		WA	98109		& Monthly			
To Whom Paid Amazon Prime				мо	DAY	YEAR		
Mailing Address	400 Terry Ave North				1	2020	\$	13.77
City Seattle	· · · · · · · · · · · · · · · · · · ·	State	Zip Code (Plus 4)	Descrin	tion of Exp	enditure		
Scattle		WA	98109	Membe		, circuitar c		
To Whom Paid Advantage PEP				мо	DAY	YEAR		tenkali (1920) (1937) Marko kili kiri malamata maranga manga ma
Mailing Address	647 W Union St	10	27	2020	\$	1,000.00		
City Whitehall		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	18052	Consulting				
				1				
To Whom Paid Amazon Prime				мо	DAY	YEAR		
	400 Terry Ave North	1		MO 11	DAY 3	YEAR 2020	\$	13.77
Amazon Prime Mailing Address	400 Terry Ave North	1 State	Zip Code (Plus 4)	11	3	2020		13.77
Amazon Prime	400 Terry Ave North		Zip Code (Plus 4) 98109	11	3 otion of Exp	2020		13.77
Amazon Prime Mailing Address	400 Terry Ave North	State		11 Descrip	3 otion of Exp	2020		13.77
Amazon Prime Mailing Address City Seattle To Whom Paid	400 Terry Ave North	State WA		11 Descrip	3 otion of Expership	2020 penditure		13.77
Amazon Prime Mailing Address City Seattle To Whom Paid Amazon Prime Mailing Address		State WA		Descrip Member	3 potion of Expership DAY	2020 Denditure YEAR 2020	\$	
Amazon Prime Mailing Address City Seattle To Whom Paid Amazon Prime Mailing Address		State WA	98109	Descrip Member	3 potion of Expenship DAY 1 potion of Expension of Ex	2020 Denditure YEAR 2020	\$	
Amazon Prime Mailing Address City Seattle To Whom Paid Amazon Prime Mailing Address		State WA State	98109 Zip Code (Plus 4)	Description Mo 12 Description Descriptio	3 potion of Expenship DAY 1 potion of Expension of Ex	2020 Denditure YEAR 2020	\$	
Amazon Prime Mailing Address City Seattle To Whom Paid Amazon Prime Mailing Address City Seattle To Whom Paid		State WA State WA WA	98109 Zip Code (Plus 4)	Descrip Member 12 Descrip Member 12	DAY 1 ption of Expenship	2020 Penditure YEAR 2020 Penditure	\$	
Amazon Prime Mailing Address City Seattle To Whom Paid Amazon Prime Mailing Address City Seattle To Whom Paid Amazon Prime	400 Terry Ave North	State WA State WA WA	98109 Zip Code (Plus 4)	MO 12 Description MO 12 Description Member MO 12	DAY 1 ption of Expership DAY 1 DAY	2020 Penditure YEAR 2020 Penditure YEAR 2020	\$	13.77

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