FFC I	AND DIS		ECEIPTS EMENTS ommittee	Office	Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT	•	Example: If typing, type over the lines.	12FE4M5	
Missa Eaton for Cong	Iress				
ADDRESS (number and street)	PO Box 2365				
Check if different than previously reported. (ACC)	Sharon			PA 16146	
2. FEC IDENTIFICATION I		CITY		STATE	
C C00509869		3. IS THIS REPOR	~	AMENDED (A)	STATE ▼ DISTRICT
 4. TYPE OF REPORT (C (a) Quarterly Reports: April 15 Quarterly July 15 Quarterly October 15 Quart X January 31 Year-I Termination Report 	Report (Q1) Report (Q2) erly Report (Q3) End Report (YE)	Election	Ceneral (30G)	General (12G) Special (12S)	Runoff (12R) in the State of Special (30S) in the State of
5. Covering Period M M / D D / Y Y Y Y 2012 through 12 / D D / Y Y Y Y 2012					
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Marcia Radcliffe					
Signature of Treasurer	arcia Radcliffe		[Electronically Filed]	Date	31 / Y Y Y Y 31 2012
NOTE: Submission of false, erro	neous, or incomplete	e information r	nay subject the person signing	g this Report to the per	nalties of 2 U.S.C. §437g.
Office Use Only FE5AN018					EC FORM 3 Revised 02/2003)

PAGE 1 / 13

	-	FEC Form 3 (Revised 02/2003)	SUMMARY PAGE of Receipts and Disbursements	PAGE 2 / 13
		or Type Committee Name sa Eaton for Congress		
R	epor	t Covering the Period: From:	11 / D D / Y Y Y Y 27 / 2012 To	b: M M / D D / Y Y Y Y 31 / 2012
			COLUMN A This Period	COLUMN B Election Cycle-to-Date
6.	Net	Contributions (other than loans)		
	(a)	Total Contributions (other than loans) (from Line 11(e))	340.00	640.00
	(b)	Total Contribution Refunds (from Line 20(d))	0.00	500.00
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	340.00	140.00
7.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	1884.57	13360.45
	(b)	Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	1884.57	13360.45
8.		sh on Hand at Close of porting Period (from Line 27)	7802.25	
9.	the	ots and Obligations Owed TO Committee (Itemize all on nedule C and/or Schedule D)	0.00	
10.	the	ots and Obligations Owed BY Committee (Itemize all on nedule C and/or Schedule D)	7466.43	

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

FEC Form 3 (Revised 12/2003)	DETAILED SUMMARY PAGE of Receipts	PAGE 3 / 13
Write or Type Committee Name Missa Eaton for Congress		
Report Covering the Period: From:	1 / 27 / Y Y Y Y 1 27 To:	M M / D D / Y Y Y Y Y 12 31 2012
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
 (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A) 	180.00	101644.47
(ii) Unitemized (iii) TOTAL of contributions	160.00	72604.20
from individuals	340.00	, , , , 640.00
(b) Political Party Committees(c) Other Political Committees	0.00	0.00
(such as PACs)	0.00	0.00
 (c) THE CARDINE (c) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)) 	340.00	7 7 640.00
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate	0.00	0.00
(b) All Other Loans (c) TOTAL LOANS	0.00	0.00
(add Lines 13(a) and (b))	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	340.00	640.00

FEC Form 3 (Revised 02/2003) COLUMN A COLUMN B **II. DISBURSEMENTS Total This Period Election Cycle-to-Date** 1884.57 13360.45 17. OPERATING EXPENDITURES..... 18. TRANSFERS TO OTHER 0.00 0.00 AUTHORIZED COMMITTEES 19. LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed 0.00 0.00 by the Candidate..... 0.00 0.00 (b) Of All Other Loans (c) TOTAL LOAN REPAYMENTS 0.00 0.00 (add Lines 19(a) and (b))..... 20. REFUNDS OF CONTRIBUTIONS TO: Individuals/Persons Other (a) 0.00 0.00 Than Political Committees 0.00 0.00 (b) Political Party Committees..... Other Political Committees (c) 0.00 500.00 (such as PACs) (d) TOTAL CONTRIBUTION REFUNDS 0.00 500.00 (add Lines 20(a), (b), and (c))..... 0.00 0.00 21. OTHER DISBURSEMENTS 22. TOTAL DISBURSEMENTS 1884.57 13860.45 (add Lines 17, 18, 19(c), 20(d), and 21) **III. CASH SUMMARY**

23.	CASH ON HAND AT BEGINNING OF REPORTING PERIOD		7		7	9346.82
24	TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)	[7		7	340.00
25.	SUBTOTAL (add Line 23 and Line 24)	[7		7	9686.82
26.	TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)	[7		7	1884.57
27.	CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)		7		,	7802.25

Image# 13960697229

DETAILED SUMMARY PAGE

of Disbursements

PAGE 4 / 13

SCHEDULE A (FEC Form 3)		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 5 OF 13 (check only one)
ITEMIZED RECEIPTS		Detailed Summary Page	
Ann information control from such Department	Otatawa anta w		12 13a 13b 14 15
			person for the purpose of soliciting contributions ee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Missa Eaton for Congress			
Full Name (Last, First, Middle Initial) A. Larry D. Naples CPA			Date of Receipt
Mailing Address 293 E Judy Lynn Dr			12 07 2012
City Farrell	State PA	Zip Code 16121-1526	Transaction ID : C6732987
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer Self-Employed	Occupatior CPA	1	180.00
Receipt For: 2012	Flection C	ycle-to-Date	—
Primary X General Other (specify)		270.00	* In-Kind: payroll services
Full Name (Last, First, Middle Initial)			
B. Mailing Address			Date of Receipt
City	State		
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer	Occupation	1	, , ,
Receipt For:	Election C	vcle-to-Date	—
Primary General			1
Other (specify)		y	
Full Name (Last, First, Middle Initial)			Date of Receipt
C. Mailing Address			M M / D D / Y Y Y Y
City	State	Zip Code	
FEC ID number of contributing federal political committee.	С		Amount of Each Receipt this Period
Name of Employer	Occupatior	1	
Receipt For:	Election C	ycle-to-Date	
Other (specify)		, ,	
SUBTOTAL of Receipts This Page (optional)	<u> </u>		180.00
TOTAL This Period (last page this line numbe			180.00

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS		for Det	e separate sch each category ailed Summar	y of the y Page	FOR LINE NUMBER: PAGE 6 OF 13 (check only one) X 17 18 19a 19b 20a 20b 20c 21
	ny information copied from such Reports and Statemen for commercial purposes, other than using the name a NAME OF COMMITTEE (In Full) Missa Eaton for Congress				
Α.	·				Date of Disbursement
	Mailing Address 1401 Highland Rd City State		Zip Code		12 06 2012 Amount of Each Disbursement this Period
	Sharon PA Purpose of Disbursement Meals		16146-3727		494.58
	Candidate Name			001 Category/ Type	Transaction ID : D483806
	President Oth	-	X General		
	State: District: Full Name (Last, First, Middle Initial)				
в.	Mrs. Missa Murry Eaton				Date of Disbursement
	Mailing Address 1401 Highland Rd		7in Oada		12 06 2012
	City State Sharon PA		Zip Code 16146-3727		Amount of Each Disbursement this Period
	Purpose of Disbursement Subscription			001	18.00
	Candidate Name	_		Category/ Type	
		For: 20 nary er (specify	X General		
	Full Name (Last, First, Middle Initial)				
C.	Mrs. Missa Murry Eaton				Date of Disbursement
	Mailing Address 1401 Highland Rd				12 / D D / Y Y Y Y 12 06 2012
	City State Sharon PA	Zip Coo 16146-			Amount of Each Disbursement this Period
	Purpose of Disbursement Postage	10140-	-3121	001	90.00
	Candidate Name			Category/ Type	Transaction ID : D483811
	Office Sought: House Disbursement Senate Prin President Oth State: District:		X General		
s	UBTOTAL of Disbursements This Page (optional)				602.58
Т	OTAL This Period (last page this line number only)				

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate sch for each categor Detailed Summar	y of the	FOR LINE NUMBER: (check only one) PAGE 7 OF 13 X 17 18 19a 19b 20a 20b 20c 21
	y information copied from such Reports and Statements m for commercial purposes, other than using the name and a			
	NAME OF COMMITTEE (In Full) Missa Eaton for Congress			
	Full Name (Last, First, Middle Initial)			Date of Disbursement
Α.	Mrs. Missa Murry Eaton			
	Mailing Address 1401 Highland Rd			12 06 2012
	City State Sharon PA	Zip Code 16146-3727		Amount of Each Disbursement this Period
	Purpose of Disbursement Printing & Copying	10140 0121		196.55
	Candidate Name		001	Transaction ID : D483813
			Category/ Type	
	Office Sought: House Disbursement For Senate Primary President Other (s	X General		
	State: District:			
в.	Full Name (Last, First, Middle Initial) Mrs. Missa Murry Eaton			Date of Disbursement
	Mailing Address 1401 Highland Rd			12 06 / Y Y Y Y 12 06
	City State Sharon PA	Zip Code 16146-3727		Amount of Each Disbursement this Period
	Purpose of Disbursement	10140-3727		30.20
	Tolls Candidate Name		002 Category/	Transaction ID : D483815
	Office Sought: House Disbursement For Senate President Other (s State: District:	General	Туре	
	Full Name (Last, First, Middle Initial)			Data of Diskumentant
C.	Mrs. Missa Murry Eaton			Date of Disbursement
	Mailing Address 1401 Highland Rd			
		p Code 6146-3727		Amount of Each Disbursement this Period
	Purpose of Disbursement Campaign Materials		006	165.07
	Candidate Name		Category/ Type	Transaction ID : D483818
	Office Sought: House Disbursement For Senate President Other (s State: District:	X General		
Г				391.82
s	UBTOTAL of Disbursements This Page (optional)			
Т	OTAL This Period (last page this line number only)			

	CHEDULE B (FEC Form 3) EMIZED DISBURSEMENTS	Use separate scl for each categor Detailed Summa	y of the	FOR LINE NUMBER: (check only one) PAGE 8 OF 13 X 17 18 19a 19b 20a 20b 20c 21
	ny information copied from such Reports and Statement for commercial purposes, other than using the name an NAME OF COMMITTEE (In Full) Missa Eaton for Congress			
A.	Full Name (Last, First, Middle Initial) Mrs. Missa Murry Eaton			Date of Disbursement
	Mailing Address 1401 Highland Rd			12 06 2012
	City State Sharon PA	Zip Code 16146-3727		Amount of Each Disbursement this Period 67.00
	Purpose of Disbursement Event Registration		001	Transaction ID : D483821
	Candidate Name		Category/ Type	
		-		
	State: District: Full Name (Last, First, Middle Initial)			
В.	Mrs. Missa Murry Eaton			Date of Disbursement
	Mailing Address 1401 Highland Rd			
	City State Sharon PA	Zip Code 16146-3727		Amount of Each Disbursement this Period
	Purpose of Disbursement Lodging	10140 3727	002	105.98
	Candidate Name		Category/ Type	
	Office Sought: House Disbursement Senate Prim President Othe			
	Full Name (Last, First, Middle Initial)			
C.	Mrs. Missa Murry Eaton			Date of Disbursement
	Mailing Address 1401 Highland Rd			M M / D D / Y Y Y Y 12 06 2012
	City State	Zip Code		Amount of Each Disbursement this Period
	Sharon PA Purpose of Disbursement Meals	16146-3727	001	965.15
	Candidate Name		Category/ Type	Transaction ID : D483825
	Office Sought: House Disbursement Senate Prim President Othe State: District:			
s	UBTOTAL of Disbursements This Page (optional)			1138.13
Т	OTAL This Period (last page this line number only)			, , , .

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS	Use separate sch for each category Detailed Summar	of the	FOR LINE NUMBER: (check only one) PAGE 9 0F 13 X 17 18 19a 19b 20a 20b 20c 21
Any information copied from such Reports and Statement or for commercial purposes, other than using the name a NAME OF COMMITTEE (In Full) Missa Eaton for Congress			
Full Name (Last, First, Middle Initial) A. Mrs. Missa Murry Eaton Mailing Address 1401 Highland Rd			Date of Disbursement
City State Sharon PA Purpose of Disbursement Parking	Zip Code 16146-3727	002	Amount of Each Disbursement this Period
Candidate Name Office Sought: House Disbursement Senate Prim President Othe		Category/ Type	Transaction ID : D483827
State: District: Full Name (Last, First, Middle Initial) B. Mr. Larry D. Naples CPA Mailing Address 293 E Judy Lynn Dr			Date of Disbursement
CityStateFarrellPAPurpose of Disbursement payroll servicesCandidate Name	Zip Code 16121-1526	Category/	Amount of Each Disbursement this Period 180.00 Transaction ID : D476621
Office Sought: House Disbursement Senate Prim President Othe		Type	* In-Kind Received
Full Name (Last, First, Middle Initial) C. The JPM Group Mailing Address PO Box 367			Date of Disbursement
City State Mars PA Purpose of Disbursement Deposit	Zip Code 16046	001	Amount of Each Disbursement this Period -820.00 Transaction ID : D488110
Candidate Name Office Sought: House Disbursement Senate Prim President State: District:		Category/ Type	
SUBTOTAL of Disbursements This Page (optional)			-605.00

SCHEDULE D (FEC Form 3)		(Use separate	PAGE 10 OF 13
DEBTS AND OBLIGATIONS		schedule(s)	FOR LINE NUMBER:
		for each numbered line)	(check only one) 9
Excluding Loans NAME OF COMMITTEE (In Full)			X 10
Missa Eaton for Congr	ess		
A. Full Name (Last, First, Middle Initial) of Debto	or or Creditor	Nature of D	ebt (Purpose):
Mrs. Missa Murry Eaton		Campaign	Materials
Mailing Address 1401 Highland Rd			
City State	Zip Code		
Sharon	PA 16146-3727		
	14 10140 3727	Trancati	- D - D 400570
Outstanding Balance Beginning This Period		Transactio	on ID : D468573
165.07			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	16	5.07	0.00
	0		
B. Full Name (Last, First, Middle Initial) of Debto	r or Creditor		ebt (Purpose): stration Fees
Mrs. Missa Murry Eaton		Eventrog	
Mailing Address 1401 Highland Rd			
Mailing Address 1401 Highland Rd			
City State	Zip Code		
Sharon	PA 16146-3727		
Outstanding Balance Beginning This Period		Transactio	on ID : D468574
Outstanding Balance Beginning This Period		Transactio	on ID : D468574
Outstanding Balance Beginning This Period 67.00		Transactio	on ID : D468574
	Payment This Period		on ID : D468574
67.00			
67.00 Amount Incurred This Period		Outstandi	ng Balance at Close of This Period
67.00 Amount Incurred This Period	6	Outstandi	ng Balance at Close of This Period
67.00 Amount Incurred This Period 0.00	6	Outstandi	ng Balance at Close of This Period 0.00
67.00 Amount Incurred This Period 0.00 C. Full Name (Last, First, Middle Initial) of Debte Mrs. Missa Murry Eaton	6	Outstandi 7.00 Nature of D	ng Balance at Close of This Period 0.00
C. Full Name (Last, First, Middle Initial) of Debte	6	Outstandi 7.00 Nature of D	ng Balance at Close of This Period 0.00
67.00 Amount Incurred This Period 0.00 C. Full Name (Last, First, Middle Initial) of Debte Mrs. Missa Murry Eaton Mailing Address 1401 Highland Rd	or or Creditor	Outstandi 7.00 Nature of D	ng Balance at Close of This Period 0.00
C. Full Name (Last, First, Middle Initial) of Debte Mrs. Missa Murry Eaton Mailing Address 1401 Highland Rd City	6 or or Creditor State Zip Code	Outstandi 7.00 Nature of D	ng Balance at Close of This Period 0.00
67.00 Amount Incurred This Period 0.00 C. Full Name (Last, First, Middle Initial) of Debte Mrs. Missa Murry Eaton Mailing Address 1401 Highland Rd City Sharon	or or Creditor State Zip Code	Outstandii 7.00 Nature of D Lodging	ng Balance at Close of This Period 0.00 ebt (Purpose):
C. Full Name (Last, First, Middle Initial) of Debte Mrs. Missa Murry Eaton Mailing Address 1401 Highland Rd City	6 or or Creditor State Zip Code	Outstandii 7.00 Nature of D Lodging	ng Balance at Close of This Period 0.00
67.00 Amount Incurred This Period 0.00 C. Full Name (Last, First, Middle Initial) of Debte Mrs. Missa Murry Eaton Mailing Address 1401 Highland Rd City Sharon	6 or or Creditor State Zip Code	Outstandii 7.00 Nature of D Lodging	ng Balance at Close of This Period 0.00 ebt (Purpose):
67.00 Amount Incurred This Period 0.00 C. Full Name (Last, First, Middle Initial) of Debte Mrs. Missa Murry Eaton Mailing Address 1401 Highland Rd City Sharon Outstanding Balance Beginning This Period	6 or or Creditor State Zip Code PA 16146-3727	Outstandii 7.00 Nature of D Lodging Transact	ng Balance at Close of This Period 0.00 ebt (Purpose):
67.00 Amount Incurred This Period 0.00 C. Full Name (Last, First, Middle Initial) of Debta Mrs. Missa Murry Eaton Mailing Address 1401 Highland Rd City Sharon Outstanding Balance Beginning This Period 105.98 Amount Incurred This Period	6 or or Creditor State Zip Code PA 16146-3727 Payment This Period	Outstandii 7.00 Nature of D Lodging Transact Outstandii	ng Balance at Close of This Period 0.00 ebt (Purpose): on ID : D468575
67.00 Amount Incurred This Period 0.00 C. Full Name (Last, First, Middle Initial) of Debte Mrs. Missa Murry Eaton Mailing Address 1401 Highland Rd City Sharon Outstanding Balance Beginning This Period 105.98	6 or or Creditor State Zip Code PA 16146-3727 Payment This Period	Outstandii 7.00 Nature of D Lodging Transact	ng Balance at Close of This Period 0.00 ebt (Purpose):
67.00 Amount Incurred This Period 0.00 C. Full Name (Last, First, Middle Initial) of Debta Mrs. Missa Murry Eaton Mailing Address 1401 Highland Rd City Sharon Outstanding Balance Beginning This Period 105.98 Amount Incurred This Period	6 or or Creditor State Zip Code PA 16146-3727 Payment This Period	Outstandii 7.00 Nature of D Lodging Transact Outstandii	ng Balance at Close of This Period 0.00 ebt (Purpose): on ID : D468575
67.00 Amount Incurred This Period 0.00 C. Full Name (Last, First, Middle Initial) of Debta Mrs. Missa Murry Eaton Mailing Address 1401 Highland Rd City Sharon Outstanding Balance Beginning This Period 105.98 Amount Incurred This Period 0.00	State Zip Code PA 16146-3727 Payment This Period	Outstandii 7.00 Nature of D Lodging Transact Outstandii 15.98	ng Balance at Close of This Period 0.00 ebt (Purpose): on ID : D468575
67.00 Amount Incurred This Period 0.00 C. Full Name (Last, First, Middle Initial) of Debta Mrs. Missa Murry Eaton Mailing Address 1401 Highland Rd City Sharon Outstanding Balance Beginning This Period 105.98 Amount Incurred This Period	State Zip Code PA 16146-3727 Payment This Period	Outstandii 7.00 Nature of D Lodging Transact Outstandii 15.98	ng Balance at Close of This Period 0.00 ebt (Purpose): fon ID : D468575 ng Balance at Close of This Period 0.00
67.00 Amount Incurred This Period 0.00 C. Full Name (Last, First, Middle Initial) of Debte Mrs. Missa Murry Eaton Mailing Address 1401 Highland Rd City Sharon Outstanding Balance Beginning This Period 105.98 Amount Incurred This Period 0.00	6 or or Creditor State Zip Code PA 16146-3727 Payment This Period	Outstandii 7.00 Nature of D Lodging Transact Outstandii 05.98	ng Balance at Close of This Period 0.00 ebt (Purpose): fon ID : D468575 ng Balance at Close of This Period 0.00
67.00 Amount Incurred This Period 0.00 C. Full Name (Last, First, Middle Initial) of Debta Mrs. Missa Murry Eaton Mailing Address 1401 Highland Rd City Sharon Outstanding Balance Beginning This Period 105.98 Amount Incurred This Period 0.00	6 or or Creditor State Zip Code PA 16146-3727 Payment This Period	Outstandii 7.00 Nature of D Lodging Transact Outstandii 05.98	ng Balance at Close of This Period 0.00 ebt (Purpose): fon ID : D468575 ng Balance at Close of This Period 0.00
67.00 Amount Incurred This Period 0.00 C. Full Name (Last, First, Middle Initial) of Debte Mrs. Missa Murry Eaton Mailing Address 1401 Highland Rd City Sharon Outstanding Balance Beginning This Period 105.98 Amount Incurred This Period 0.00	State Zip Code PA 16146-3727 Payment This Period 10 You have a stress of the	Outstandii 7.00 Nature of D Lodging Transact Outstandii 95.98	ng Balance at Close of This Period 0.00 ebt (Purpose): fon ID : D468575 ng Balance at Close of This Period 0.00
67.00 Amount Incurred This Period 0.00 C. Full Name (Last, First, Middle Initial) of Debte Mrs. Missa Murry Eaton Mailing Address 1401 Highland Rd City Sharon Outstanding Balance Beginning This Period 105.98 Amount Incurred This Period 0.00 1) SUBTOTALS This Period This Page (optional) 2) TOTALS This Period (last page this line number)	State Zip Code PA 16146-3727 Payment This Period 10 You have a stress of the	Outstandii 7.00 Nature of D Lodging Transact Outstandii 95.98	ng Balance at Close of This Period 0.00 ebt (Purpose): fon ID : D468575 ng Balance at Close of This Period 0.00

FEC Schedule D (Form 3) (Revised 02/2003)

SCHEDULE D (FEC Form 3)		Г	(Use separate	PAGE 11 OF 13
DEBTS AND OBLIGATIONS			schedule(s)	FOR LINE NUMBER:
			for each	(check only one) 9
Excluding Loans NAME OF COMMITTEE (In Full)			numbered line)	X 10
Missa Eaton for Congr	000			
<u> </u>			Natura of D	ucht (Durnoco):
A. Full Name (Last, First, Middle Initial) of Debt Mrs. Missa Murry Eaton	or or Creditor		Meals	ebt (Purpose):
Mailing Address 1401 Highland Rd				
City State	Zip Code			
Sharon	PA	16146-3727		
Outstanding Balance Beginning This Period			Transactio	on ID : D468576
965.15				
Amount Incurred This Period	Paym	ent This Period	Outstandi	ng Balance at Close of This Period
0.00		965.1	5	0.00
B. Full Name (Last, First, Middle Initial) of Debto	or or Creditor		Nature of D	ebt (Purpose):
Mrs. Missa Murry Eaton			Parking	
Mailing Address 1401 Highland Rd				
City State Sharon	Zip Code PA	16146-3727		
Outstanding Balance Beginning This Period			Transactio	on ID : D468577
35.00				
Amount Incurred This Period	Paym	ent This Period	Outstandi	ng Balance at Close of This Period
0.00		35.0	0	0.00
				· · ·
C. Full Name (Last, First, Middle Initial) of Debt Mrs. Missa Murry Eaton	or or Greditor		Nature of D Printing &	ebt (Purpose): Copying
Mailing Address 1401 Highland Rd				
City	State	Zip Code		
Sharon	PA	16146-3727		
Outstanding Balance Beginning This Period			Transact	ion ID : D468578
196.55				
	_		.	
Amount Incurred This Period	Paym	ent This Period	Outstandi	ng Balance at Close of This Period
0.00		196.5	55	0.00
1) SUBTOTALS This Period This Page (optional)			•	0.00
2) TOTALS This Period (last page this line numbe			_	
3) TOTAL OUTSTANDING LOANS from Schedule				, , , , , , , , , , , , , , , , , , , ,
4) ADD 2) and 3) and carry forward to appropriate			_	, , , , , , , , , , , , , , , , , , , ,
ן ער גן אווע נארע גער גי גער גי גער גי גער גי גער גי גער גי	e nne or ournmar	y raye (last page onl	y) -	7 7

FEC Schedule D (Form 3) (Revised 02/2003)

SCHEDULE D (FEC Form 3) DEBTS AND OBLIGATIONS Excluding Loans		(Use separate schedule(s) for each numbered line)	PAGE 12 OF 13 FOR LINE NUMBER: (check only one) 9 X 10
NAME OF COMMITTEE (In Full)			
Missa Eaton for Congre			
A. Full Name (Last, First, Middle Initial) of Debto Mrs. Missa Murry Eaton	or or Creditor	Tolls	ebt (Purpose):
Mailing Address 1401 Highland Rd			
City State Sharon	Zip Code PA 16146-3727		
Outstanding Balance Beginning This Period		Transactio	on ID : D468579
30.20			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00	3	0.20	0.00
B. Full Name (Last, First, Middle Initial) of Debtor Mrs. Missa Murry Eaton	or Creditor	Nature of D Rent	ebt (Purpose):
Mailing Address 1401 Highland Rd			
City State Sharon	Zip Code PA 16146-3727		
Outstanding Balance Beginning This Period		Transactio	on ID : D468580
3400.00			
Amount Incurred This Period	Payment This Period	Outstandi	ng Balance at Close of This Period
0.00		0.00	3400.00
C. Full Name (Last, First, Middle Initial) of Debto Mrs. Missa Murry Eaton	or or Creditor	Nature of D Yard Signs	ebt (Purpose): S
Mailing Address 1401 Highland Rd			
City	State Zip Code		
Sharon	PA 16146-3727		
Outstanding Balance Beginning This Period		Transact	ion ID : D483799
4066.43			
Amount Incurred This Period	Payment This Period		ng Balance at Close of This Period
0.00	y	0.00	4066.43
1) SUBTOTALS This Period This Page (optional)			7466.43
2) TOTALS This Period (last page this line number	only)	▶	
3) TOTAL OUTSTANDING LOANS from Schedule	C (last page only)		
4) ADD 2) and 3) and carry forward to appropriate	line of Summary Page (last page	only) 🕨	

FEC Schedule D (Form 3) (Revised 02/2003)

SCHEDULE D (FEC Form 3)			(Use separate		3 OF 13	
			schedule(s) for each	FOR LINE NUMBER		
			numbered line)			
NAME OF COMMITTEE (In Full)		I				
Missa Eaton for Congr	ess					
A. Full Name (Last, First, Middle Initial) of Debt	Nature of D Subscriptio	Nature of Debt (Purpose):				
Mrs. Missa Murry Eaton				11		
Mailing Address 1401 Highland Rd						
City State	Zip Code					
Sharon	PA	16146-3727				
Outstanding Balance Beginning This Period			Transactio	on ID : D483800		
18.00						
Amount Incurred This Period	Pa	yment This Period	Outstandir	ng Balance at Close o	f This Period	
0.00		18.	00		0.00	
B. Full Name (Last, First, Middle Initial) of Debto	or or Creditor			ebt (Purpose):		
Mrs. Missa Murry Eaton			Postage			
Mailing Address 1401 Highland Rd						
City State	Zip Code					
Sharon	PA	16146-3727				
Outstanding Balance Beginning This Period			Transactio	on ID : D483801		
90.00						
Amount Incurred This Period	Pa	yment This Period	Outstandir	ng Balance at Close o	f This Period	
0.00	7	90.0		7 7	0.00	
C. Full Name (Last, First, Middle Initial) of Debt	or or Creditor		Nature of D	ebt (Purpose):		
Mrs. Missa Murry Eaton						
Mailing Address 1401 Highland Rd						
City	State	Zip Code				
Sharon	PA	16146-3727				
Outstanding Balance Beginning This Period			Transacti	on ID : D483802		
494.58						
Amount Incurred This Period	Pa	yment This Period	Outstandir	ng Balance at Close o	f This Period	
0.00		494.	58	7 7	0.00	
1) SUBTOTALS This Period This Page (optional)					0.00	
				, , ,		
2) TOTALS This Period (last page this line numbe	r only)			7 7	7466.43	
3) TOTAL OUTSTANDING LOANS from Schedule	C (last page c	nly)			0.00	
4) ADD 2) and 3) and carry forward to appropriate	e line of Summ	ary Page (last page on	ly) 🕨	7 7	7466.43	

FEC Schedule D (Form 3) (Revised 02/2003	FEC	Schedule	D	(Form	3)	(Revised	02/2003)
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