Campaign Finance Report

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

Filer Identificati Number :	on 20	0140449)				port ed B		CAN	DII	DATE		COMM	1ITTEE	✓ [LOB	BYIST		
Name of Filing C	ommittee, Can	didate o	r Lo	bbyist:		CON	1MI	TTEE '	TO ELE	СТ	AMO	DIE J	UDGE						
Street Address:																			
City:	NEW CAST	LE							State:		PA			Zip Cod	l e: 16	105			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.		2ND FRIDA PRIMARY	Y PRE	-	2. X	30 DA		P	OST-	3.		AMENDM REPORT?		Yes	√ N)	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.		2ND FRIDA' ELECTION	y pre	≣-	5.	30 DA		P	OST-	6.		TERMINA REPORT?		Yes	N)	√
report type)	ANNUAL REPO	PRT 7.	,	Year 2015					NG MET CHECK		_			PAPER		√	DISK	TTE	
Name of Office S	ought by Cand	lidate:							DATE	Ol	F ELE	CTIC	N	District Number	Office Code	Par	ty Code	Cour	
									МО		DAY	YI	EAR					•	
										11		3	2015		(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of		МО)	DAY	YEAR	ł			МО		DAY	Y	EAR	FO	R OFFIC	E USE	ONLY		
Expenditures	from:			31	2	015	Т	0		5		4	2015						
A. Amount Bro	ught Forward F	rom Las	t Re	port				\$				16,	332.85						
B. Total Moneta	ary Contributio	ns And R	Rece	ipts (From	Sche	dule	I)	\$				6,	300.00						
C. Total Funds	Available (Sun	n Of Line	s A a	and B)				\$				23,	132.85						
D. Total Expend	ditures (From S	Schedule	III)				\$				12,6	568.28						
E. Ending Cash	Balance (Subt	ract Line	DF	rom Line (C)			\$				10,4	164.57						
F. Value Of In-	Kind Contribut	ions Rec	eive	d (From S	chedu	le II	()	\$				4	100.00						
G. Unpaid Debt	s And Obligation	ons (Froi	m So	chedule IV)			\$				9,9	911.51						
					AFF	ID/	۱۷۶	T SE	CTIO	N									
PART I - If this is I swear (or affirm)				_							-				: l				
correct and comple		including	tne	attached Sci	iedules	STHE	u on	рарег	or by ele	ecu	onic m	earum	, are to t	ne best of	тту кпоч	vieage	anu bei	ier, tr	ue
Sworn to and subs	cribed before me day of	this		20						•		5	Signature	of Persor	n Submitt	ing Re _l	ort		
	Sigr	nature						-		•				Print	ed Name				_
My Commission Ex	rpires							_						Emai	I				
	МО		DA	Y	YR						Are	ea Coo	de	Daytim	e Teleph	one Nu	mber		ᆜ
Part II- If this is	a report of a	candidate	e's a	uthorized	Comn	nitte	e, C	andid	ate sha	all s	ign he	ere.							
I swear (or affirm) No 320) as amende		of my kno	owled	ige and beli	ef this	polit	tical	comm	ittee ha	s no	t viola	ted ar	y provis	ions of the	act of Ju	ine 3,1	937 (P.	133	3,
Sworn to and subsc	ribed before me t day of	this		20									s	ignature o	f Candida	ite			_
								-						Printe	d Name				-
My Commission Exp	Signati	ure						-		-				Emai	il				_
, commission Exp								-											_
	МО		DA	Y	YR	1					Area	Code		Da	ytime Te	elephor	e Numi	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
COMMITTEE TO ELECT AMODIE JUDGE	From:	<u>3/31/201</u>	<u>5</u> To:	<u>5/4/2015</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g Period	(1)	\$	25.00
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)			\$	1,275.00
TOTAL for the Reporting	J Period	(2)	\$	1,275.00
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)			\$	5,500.00
TOTAL for the Reporting	J Period	(3)	\$	5,500.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	6,800.00

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.

Name of Filing Committee or	Candidate	1	Reporting	Period		
			From:		То	:
		•		DATE		AMOUNT
Full Name of Contributing Com	mittee		мо	DAY	YEAR	
Mailing Address						\$ 0.00
City	State	Zip Code (Plus 4)				

PAGE TOTAL
0.00

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

ALL OTHER CONTRIBUTIONS

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from \$50.01 to \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part A)

Name of Filing Committee or Candida	te		Rep	orting Po	eriod			
COMMITTEE TO ELECT AMODIE JUD	GE		Fro	m:	3/31/2	2 <u>015</u> To	:	<u>5/4/2015</u>
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	VEAD		
GEORGE ZAMBELLI				МО	DAY	YEAR		
Mailing Address							\$	125.00
City BADEN	State	Zip Code (Plus 4)	3	13	2015		
	PA	15005						
Full Name of Contributor				мо	DAY	YEAR		
RICHARD HOYLAND				МО	DAT	TEAR		
Mailing Address							\$	250.00
City GIBSONIA	State	Zip Code (Plus 4)	4	8	2015		
	PA	15044						
Full Name of Contributor				мо	DAY	YEAR		
HELEN RASHID				1-10	DAI	ILAK		
Mailing Address							\$	200.00
City NEW CASTLE	State	Zip Code (Plus 4)	4	9	2015		
	PA	16101						
Full Name of Contributor				мо	DAY	YEAR		
EDWARD MITCHELL JR						12/11		
Mailing Address							\$	100.00
City NEW CASTLE	State	Zip Code (Plus 4)	4	4	2015		
	PA	16105						
Full Name of Contributor				мо	DAY	YEAR		
RAYMOND J. BURGO				1-10	DAI	ILAK		
Mailing Address							\$	200.00
City NEW CASTLE	State	Zip Code (Plus 4)	4	14	2015		
	PA	16101						
Full Name of Contributor				мо	DAY	YEAR		
CONSTANCE AMODIE				МО	DAT	TEAR		
Mailing Address							\$	100.00
City NEW CASTLE	State	Zip Code (Plus 4)	4	14	2015		
	PA	16101						
Full Name of Contributor				МО	DAY	YEAR		
BARBARA E. RICE				.10	DAI	. LAN		
Mailing Address							\$	200.00
City NEW CASTLE	State	Zip Code (Plus 4)	4	29	2015		
	PA	16101						

Full N	ame of Contributor			МО	DAY	YEAR	
MADE	LINE C. BERTUCCI			1-10	DAI	ILAK	
Mailin	g Address						\$ 100.00
City	NEW CASTLE	State	Zip Code (Plus 4)	4	30	2015	
		PA	16105				

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL
\$ 1,275.00

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 or Candidate			Reporting	Period					
			From:			То:			
				DA	TE		P	AMOUNT	
Full Name of Contributing Committee				МО	DAY	YEAR		0.0	0
Mailing Address							- \$	0.0	טע
City	State	Zip Code	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on Scheo	dule I, Detailed Sun	nmary Pa	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.)

lame of Filing Committee or Candidate Reporti			orting Pe	riod				
COMMITTEE TO ELECT AMODIE JUDGE			Froi	m:	3/31/2	<u>015</u> To):	<u>5/4/2015</u>
				DA	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		F00.00
MARY ANNE GAURILE					5711	12711	\$	500.00
Mailing Address		1		4	25	2015		
City NEW CASTLE	State	Zip Code (Pl	ıs 4)					
	PA	16101						
Employer Name CRISIS SHELTER				Occupat	ion	ADVOCA	ATE	
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip Co	ode (Plus 4)
Full Name of Contributor		-		мо	DAY	YEAR		F 000 00
						'	\$	5,000.00
MELISSA AMODIE								,
MELISSA AMODIE Mailing Address				- 5	2	2015	1	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	State	Zip Code (Pl	us 4)	- 5	2	2015		,,,,,,
Mailing Address	State	Zip Code (Pl	ıs 4)	- 5 Occupat		2015 MAG. D		,
Mailing Address City		Zip Code (Pl	ıs 4)				IST. JU	,
Mailing Address City Employer Name AOPC				Occupat	tion		IST. JU	JDGE
Mailing Address City Employer Name AOPC	e of Business	City MECHAN	ICSBUR	Occupat	cion State		IST. JU	JDGE

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 Peri	od		
			From:			To:	
				D	ATE		AMOUNT
Full Name				мо	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (I	Plus 4)				
Receipt Description	•	•			•		
Futor Count Total of Boot	Fan Cabadula I Batailad	Comment Dans	Castian	4			PAGE TOTAL
Enter Grand Total of Part	c on schedule 1, Detailed	Summary Page,	Section	4.			\$ 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	
COMMITTEE TO ELECT AMODIE JUDGE	From:	3/31/2015 To:	<u>5/4/2015</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	100.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	300.00
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,		\$	400.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Cand	idate	1	Reporting	Period			
COMMITTEE TO ELECT AMODIE 3	UDGE	ı	From:	<u>3/</u>	<u>/31/2015</u>	To:	<u>5/4/2015</u>
				DATE			AMOUNT
Full Name of Contributor			Mo	DAY	YEAR		
MARY AND DALE TURNER			МО	DAT	TEAR	\$	100.00
Mailing Address			4	23	2015	*	100.00
City NEW CASTLE	State	Zip Code (Plus 4)]	25	2013		
	PA	16105					
Description of Contribution: ME	ET-N-GREET		+	•	•		
Enter Grand Total of Part F on Section 2.	Schedule II, In-Ki	nd Contributions Detail	led Sumi	mary Pag	je,		PAGE TOTAL

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

Name of Filing Committee or Candidate

COMMITTEE TO ELECT AMODIE JUDGE

Reporting Period

From: 3/31/2015 To: 5/4/2015

					DATE		AMOUNT
Full Name of Contributor KIM AVEN & APRIL RICH	(ARD			мо	DAY	YEAR	
Mailing Address				4	29	2015	\$ 300.00
City NEW CASTLE	State	Zip Code(Plus	4)				
	PA	16105					
Employer of Contributor A	VEN FIRE SYSTEMS	•		Occupa	tion P	RESIDEN	T
Employer Mailing Address/Pri	ncipal Place of Business	City	State	e Zip (Code(Plus 4)	Descri	ption of Contribution
		NEW CASTLE	PA	161	02	MEET	& GREET
Enter Grand Total of Part	G on Schedule II. In-Ki	nd Contributions	Detaile	d			PAGE TOTAL
Summary Page, Section 3			Detaile	•			300.00
		na Contributions	Detalle	u			

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period			
COMMITTEE TO ELECT AMODIE JUDGE	From	3/31/2015	То:	<u>5/4/2015</u>

				DATE			AMOUNT				
To Whom Paid			МО	DAY	YEAR						
KFC COUNCIL 512			MO	DAI	ILAK						
Mailing Address			4	1	2015	\$	100.00				
City State Zip Code (Plus 4)				Description of Expenditure							
	DINNER TICKETS										
To Whom Paid			мо	DAY	YEAR						
NEW CASTLE NEWS			MO	DAI	ILAK						
Mailing Address			4	8	2015	\$	783.72				
City NEW CASTLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure						
	PA	16103	ADVERT	TISING							
To Whom Paid			мо	DAY	YEAR						
R & A SCREENING			140		ILAK						
Mailing Address			4	8	2015	\$	472.50				
City NEW CASTLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure						
	PA	16101	T-SHIRTS								
To Whom Paid			МО	DAY	YEAR						
FOUR STAR PIZZA			MO	DAT	TEAR						
Mailing Address			4	11	2015	\$	55.00				
City NEW CASTLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure						
	PA	16101	MEET &	amp; GRE	ET						
To Whom Paid			мо	DAY	YEAR						
ST. VITUS NIGHT AT RACES			140	DAI	ILAK						
Mailing Address			4	12	2015	\$	60.00				
City NEW CASTLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure						
PA 16101				AD							
To Whom Paid			мо	DAY	YEAR						
MAYOR ANTHONY MASTRANG	GELO		1410		ILAK						
Mailing Address			4	12	2015	\$	50.00				
City NEW CASTLE	State	Zip Code (Plus 4)	Description of Expenditure								
	PA	16101	CAVATE	LLI DINNE	:R						
	•	•	-								

								. 13				
To Wi	nom Paid			МО	DAY	YEAR						
JOAN	NE AMODIE											
Mailin	ng Address			4	12	2015	\$	146.37				
City	NEW CASTLE	State Zip Code (Plus 4)				Description of Expenditure						
		PA	16105	REIMB.	FOR SIGN	POLES						
To W	nom Paid			мо	DAY	YEAR						
BOY S	SCOUT TROOP 743			1-10		I Z/IIX						
Mailing Address			4	12	2015	\$	25.00					
City State Zip Code (Plus 4)				Description of Expenditure								
				AD								
To W	nom Paid			мо	DAY	YEAR						
FRAN:	Z COMMUNICATION			1-10		I Z/IIX						
Mailin	ng Address			4	15	2015	\$	4,651.96				
City	NEW CASTLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure						
		PA	16101	CONSU	LT FEE, SI	GNS &am	p; ADS					
To W	nom Paid			мо	DAY	YEAR						
BRINI	DLE PRINTING			110		I Z/IIX						
Mailin	ng Address			4	17	2015	\$	404.13				
City NEW CASTLE State Zip Code (Plus 4)				Description of Expenditure								
		PA	16103	DOOR H	HANGERS							
To W	nom Paid			МО	DAY	YEAR						
BRINI	DLE PRINTING											
Mailin	ng Address			4	17	2015	\$	405.45				
City	NEW CASTLE	State	Zip Code (Plus 4)	Description of Expenditure								
		PA	16103	POSTCA	ARDS							
To Wi	nom Paid			МО	DAY	YEAR						
JULIE	JU JU DELILLO											
Mailin	ng Address			4	17	2015	\$	50.00				
City	NEW CASTLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure						
		PA	16101	SPAGHE	TTI DINNI	ER						
To Wi	nom Paid			МО	DAY	YEAR						
STATI	E FARM BANK											
Mailin	ng Address			4	20	2015	\$	1,359.93				
City	COLUMBUS	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure						
GA 31902				REIMB.	FOR SUPP	LIES TO	CANDIDATE					
To Whom Paid				мо	DAY	YEAR						
U S POSTMASTER												
Mailin	ng Address			4	21	2015	\$	1,094.11				
City	NEW CASTLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure						
		PA		MAILINGS								

To WI	nom Paid			МО	DAY	YEAR				
ELLW	OOD CITY BOROUGH			1-10		ILAK				
Mailir	ng Address			4	23	2015	\$	50.00		
City	ELLWOOD CITY	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
		PA	16117	POLITIC	CAL SIGN F	REG.				
To WI	nom Paid			мо	DAY	YEAR				
JOAN	NE AMODIE			МО		ILAK				
Mailing Address					25	2015	\$	112.62		
City	NEW CASTLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•			
		PA	16105	REIMB.	FOR SIGN	POLES				
To WI	nom Paid				DAY	YEAR				
JOHN	JOSEPH			МО	DAY	YEAR				
Mailir	ng Address			4	25	2015	\$	101.08		
City	NEW CASTLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	l			
		PA	16105	REIMB.	FOR SIGN	POLES				
To WI	nom Paid			мо	DAY	YEAR				
NEW	CASTLE NEWS			MO	DAT	TEAR				
Mailir	ng Address			4	28	2015	\$	974.38		
City	NEW CASTLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	l			
		PA	16103	ADS						
To WI	nom Paid				l _{DAY}	VEAD				
BRINI	DLE PRINTING			МО	DAY	YEAR				
Mailir	ng Address			4	28	2015	\$	954.00		
City	NEW CASTLE	State	Zip Code (Plus 4)	Description of Expenditure						
		PA	16103	MAILER	S					
To WI	nom Paid				DAY	VEAD				
VINN	Y'S RESTAURANT			МО	DAY	YEAR				
Mailir	ng Address			4	29	2015	\$	500.00		
City	ELLWOOD CITY	State	Zip Code (Plus 4)	Descrip	l tion of Exp	ı enditure	l			
		PA	16117		amp; GRE					
To WI	nom Paid	•	-							
NEW	CASTLE RED HURRICANE (CLUB		МО	DAY	YEAR				
Mailir	ng Address			4	29	2015	\$	100.00		
City	NEW CASTLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	ı			
PA 16101				ADVERT	TISING					
To Whom Paid				MC	Day	VEAD				
D. H. MKT. CONCEPTS, INC				МО	DAY	YEAR				
Mailir	ng Address			5	3	2015	\$	188.03		
City	NEW CASTLE	State	Zip Code (Plus 4)	Descrip	l tion of Exp	enditure	I			
		PA				MAILINGS				
11/4 10101										

To Whom Paid			МО	DAY	YEAR					
N C T V 45			MO	DAT	ILAR					
Mailing Address			5	3	2015	\$	30.00			
City NEW CASTLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	Description of Expenditure				
	PA	16101	AD FOR	APRIL						
Futou Cuand Tatal of Funan	'	-		APRIL			PAGE TOTAL			
Enter Grand Total of Expen	'	-		APRIL		\$				
Enter Grand Total of Expen	'	-		APRIL		\$	PAGE TOTAL 12,668.28			
Enter Grand Total of Expen	'	-		APRIL		\$				
Enter Grand Total of Expen	'	-		APRIL		\$				

STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate Rep				Reportii	ting Period					
СОММІ	COMMITTEE TO ELECT AMODIE JUDGE From:				<u>3/31/2015</u> To:			<u>5/4/2015</u>		
						DATE			Outsta Balanc	inding ce of Debt
	of Creditor				мо	DAY	YEAR			
SUPER	IOR SIGN & amp; GRAPHICS									
Mailing	g Address				4	17	201	5	\$	4,911.51
City	NEW CASTLE	State	Zip Code (P	lus 4)	Description of Debt					
		PA	16101		SIGNS					
Name	of Creditor					DAY	VEAD			
MELIS	SA A. AMODIE				МО	DAY	YEAR			
Mailing Address					5	2	201	5	\$	5,000.00
City NEW CASTLE State Zip Code (Plus 4)				Descrip	tion of De	ot				
PA 16105 LOAN TO COMMITTEE				TTEE						
									F	PAGE TOTAL
Ent	er Grand Total of Unpaid Debt	s on Page 1, Repo	rt Cover Pa	ge, Item	G.			\$		9,911.51