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 8300	0021				port ed B		CAND	CANDIDATE COMMITTEE V LOBBYIST								
Name of Filing C	Committee, Candid	ate or L	obbyist:		ACE	3A -	JUDIC	CIAL EXC	ELLEN	CE C	TIMMC	ГЕЕ					
Street Address:	400 KOPPERS	BUILD:	ING,436 SEV	/ENT	H A	VEN	UE										
City:	PITTSBURGH							State:	PA			Zip Code: 15219					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	-	2.	30 DA PRIMA		POST-	3. X		AMENDM REPORT		Yes	No	•	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	-	5.	30 DA ELECT		POST-	6.		TERMINATION REPORT?		Yes	No	•	
report type)	ANNUAL REPORT	7.	Year 2015					ILING METHOD (() CHECK ONE					PAPER DISKETTE				
Name of Office S	Sought by Candida	te:	-					DATE C	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Count	у
	,							МО	DAY	YE	AR	Number	Code			code	
								11		3	2015		(SEE IN	ISTRUCTI	ONS FOR (ODES)	
Summary of Expenditures	Receipts and	МО		YEAR			_	МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
			5 5	20	015	T	<u>о</u>	ϵ	5	8	2015						
A. Amount Bro	ught Forward Froi	n Last R	eport				\$			30,3	805.97						
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule	e I)	\$				0.25						
C. Total Funds	Available (Sum Of	f Lines A	and B)				\$			30,3	306.22						
D. Total Expen	ditures (From Sch	edule II	I)				\$				42.29						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)			\$			30,2	63.93						
F. Value Of In-	Kind Contributions	s Receiv	ed (From Sch	hedul	le II	I)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$				0.00			•			
				AFF	ID/	AVI	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign h	ere. 1	If th	nis is	a Can	ndidate r	eport, o	candi	date sig	ın here.					
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	attached sche	edules	file	d on	paper (or by elect	tronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , tru	e.
Sworn to and subs	cribed before me this day of	5	20							S	ignature	of Perso	n Submit	ting Rep	ort		-
	Signatu	re					- -					Prin	ted Nam	e			-
My Commission Ex	cpires						_					Ema	il				-
	мо	D	AY	YR					Ar	ea Cod	e	Daytim	e Telepi	none Nu	mber		
Part II- If this is	a report of a can	didate's	authorized C	Comm	nitte	ee, C	andida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of r	ny knowle	edge and belief	f this	polit	tical	commi	ittee has r	ot viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333	,
Sworn to and subso	ribed before me this								-		s	ignature o	of Candid	ate			-
	day of						-					Printe	d Name				-
	Signature						-					F	:1				-
My Commission Exp	ires											Ema	11				
	МО	D	AY	YR			-		Area	Code		Da	aytime T	elephon	e Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
ACBA - JUDICIAL EXCELLENCE COMMITTEE	From:	<u>5/5/201</u>	<u>5</u> To:	6/8/2015
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) 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	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) Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	0.25
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			\$	0.25

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize onl with an aggregate val	-			-							
Name of Filing Comm	Name of Filing Committee or Candidate					Reporting Period						
			From: To:									
		1			DATE			AMOUNT				
Full Name of Contribution	ng 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

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 Candidate From					eriod	To	o:	
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					

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

PAGE TOTAL \$0.00

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 Re			Reporting Period						
			From:			То:			
				DA	TE		Α	MOUNT	
Full Name of Contributing Commit	tee			мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary 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.)

Name of Filing Committee or Candidate			Rep	Reporting Period					
Froi					From: To:				
				D	ATE		А	MOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City State Zip Code (Plus 4)									
Employer Name		•		Occupa	tion		•		
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Coo	de (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary Page	Section	on 3.			\$	PAGE 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	Reporting Perio	od	
ACBA - JUDICIAL EXCELLENCE COMMITTEE	From:	<u>5/5/2015</u> To:	<u>6/8/2015</u>

			D	ATE		AMOUNT
Full Name PNC BANK, N.A.			МО	DAY	YEAR	
Mailing Address P.O. BOX 609						\$ 0.25
City PITTSBURGH	State PA	Zip Code (Plus 4) 15230	5	30	2015	
Receipt Description INTEREST						

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL\$ 0.25

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 Period								
ACBA - JUDICIAL EXCELLENCE COMMITTEE	From:	<u>5/5/2015</u> To:	<u>6/8/2015</u>						
1. 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	T 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 Candid	ate		Reporting	g Period			
	From:						
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	ле Г		PAGE TOTAL
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Re	porting l	Period				
1					From:			To:	То:		
					•		DATE			AMOUNT	
Full Name of Contributor						МО	DAY	YEAR			
Mailing Address									\$	0.00	
City	State		Zip Code(I	Plus 4)							
Employer of Contributor						Occupa	ition		•		
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iption	of Contribution	
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, I	in-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting	Period		
ACBA - JUDICIAL EXCELLENCE COMMITTEE	From	<u>5/5/2015</u>	То:	<u>6/8/2015</u>
		DATE		AMOUNT

					DATE			AMOUNT
To Whom Paid FRANK, GALE, BAILS, MURCKO & DOCRASS, P.C.				МО	DAY	YEAR		
Mailing Address 707 GRANT STREET 33RD FLOOR, GULF TOWER				5	28	2015	\$	42.29
City PITTSBURGH		a te PA	Zip Code (Plus 4) 15219	Description of Expenditure PROFESSIONAL SERVICES				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.								PAGE TOTAL
							\$	42.29