

Campaign Finance Report

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

Filer Identification Number :		20140449		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: COMMITTEE TO ELECT AMODIE FOR JUDGE												
Street Address:												
City: NEW CASTLE						State: PA			Zip Code: 16105			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY PRIMARY	POST-	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6. X	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2015	FILING METHOD () CHECK ONE				PAPER <input checked="" type="checkbox"/>	DISKETTE			
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code
						MO	DAY	YEAR				
						11	3	2015	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:				MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY	
				10	20	2015		11	23	2015		
A. Amount Brought Forward From Last Report						\$ 4,605.40						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 16,750.00						
C. Total Funds Available (Sum Of Lines A and B)						\$ 21,355.40						
D. Total Expenditures (From Schedule III)						\$ 19,668.82						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 1,686.58						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 18,850.43						

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
COMMITTEE TO ELECT AMODIE FOR JUDGE	From: <u>10/20/2015</u> To: <u>11/23/2015</u>

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)	\$ 700.00
All Other Contributions (Part B)	\$ 50.00
TOTAL for the Reporting Period (2)	\$ 750.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 500.00
All Other Contributions (Part D)	\$ 15,500.00
TOTAL for the Reporting Period (3)	\$ 16,000.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 0.00

Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 16,750.00
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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				Reporting Period			
COMMITTEE TO ELECT AMODIE FOR JUDGE				From: <u>10/20/2015</u> To: <u>11/23/2015</u>			
				DATE		AMOUNT	

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 200.00
IRONWORKERS LOCAL 207			10	15	2015	
Mailing Address						
City YNGS	State OH	Zip Code (Plus 4) 44512				

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
LOCAL UNION 712 IBEW			10	19	2015	
Mailing Address						
City BEAVER	State PA	Zip Code (Plus 4) 15009				

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
CEMENT MASONS LOCAL 526			10	30	2015	
Mailing Address						
City PITTSBURGH	State PA	Zip Code (Plus 4) 15212				

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

PAGE TOTAL
\$ 700.00

PART B
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	Reporting Period
COMMITTEE TO ELECT AMODIE FOR JUDGE	From: <u>10/20/2015</u> To: <u>11/23/2015</u>

DATE				AMOUNT
Full Name of Contributor				
JERI HAKE				
Mailing Address				
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101	MO 10 DAY 27 YEAR 2015	\$ 50.00

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

PAGE TOTAL
\$ 50.00

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
COMMITTEE TO ELECT AMODIE FOR JUDGE	From: <u>10/20/2015</u> To: <u>11/23/2015</u>

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 500.00	
OPERATING ENG. LOCAL 66							
Mailing Address							
City	YNGS	State	OH	Zip Code (Plus 4)	44512		

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL	
\$	500.00

PART D
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 COMMITTEE TO ELECT AMODIE FOR JUDGE	Reporting Period From: <u>10/20/2015</u> To: <u>11/23/2015</u>
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				DATE			AMOUNT
Full Name of Contributor DOMINIC J. AMATO				MO	DAY	YEAR	\$ 500.00
Mailing Address City NEW CASTLE State PA Zip Code (Plus 4) 16105				10	7	2015	
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business				City		State	Zip Code (Plus 4)

Full Name of Contributor MELISSA A. AMODIE				MO	DAY	YEAR	\$ 5,000.00
Mailing Address City State Zip Code (Plus 4)				10	20	2015	
Employer Name A O P C				Occupation MAG. DIST. JUDGE			
Employer Mailing Address/Principal Place of Business				City MECHANICSBURG		State PA	Zip Code (Plus 4)

Full Name of Contributor MELISSA A AMODIE				MO	DAY	YEAR	\$ 10,000.00
Mailing Address City State Zip Code (Plus 4)				11	4	2015	
Employer Name A O P C				Occupation MAG. DIST. JUDGE			
Employer Mailing Address/Principal Place of Business				City MECHANICSBURG		State PA	Zip Code (Plus 4)

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 15,500.00

PART E 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 Period From: To:
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				DATE	AMOUNT		
Full Name				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					
Receipt Description							

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

PAGE 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 Period	
COMMITTEE TO ELECT AMODIE FOR JUDGE		From: <u>10/20/2015</u> To: <u>11/23/2015</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period (1)		\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period (2)		\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period (3)		\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)		\$	0.00

SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	Reporting Period From: To:
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						PAGE TOTAL \$ 0.00

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SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
COMMITTEE TO ELECT AMODIE FOR JUDGE	From <u>10/20/2015</u> To: <u>11/23/2015</u>

				DATE		AMOUNT	
To Whom Paid NCTV 45				MO	DAY	YEAR	\$ 180.00
Mailing Address				10	19	2015	
City	NEW CASTLE	State	PA	Zip Code (Plus 4)	16101	Description of Expenditure AD	
To Whom Paid NEW CASTLE NEWS				MO	DAY	YEAR	\$ 1,672.50
Mailing Address				10	20	2015	
City	NEW CASTLE	State	PA	Zip Code (Plus 4)	16101	Description of Expenditure AD	
To Whom Paid FRANZ COMM.				MO	DAY	YEAR	\$ 4,546.41
Mailing Address				10	21	2015	
City	NEW CASTLE	State	PA	Zip Code (Plus 4)	16101	Description of Expenditure CONSULTING, ADS	
To Whom Paid BRINDLE PRINTING				MO	DAY	YEAR	\$ 1,139.50
Mailing Address				10	20	2015	
City	NEW CASTLE	State	PA	Zip Code (Plus 4)	16103	Description of Expenditure POST CARDS	
To Whom Paid E. C. BORO				MO	DAY	YEAR	\$ 50.00
Mailing Address				10	23	2015	
City	ELLWOOD CITY	State	PA	Zip Code (Plus 4)	16117	Description of Expenditure SIGN	
To Whom Paid US POSTMASTER				MO	DAY	YEAR	\$ 245.00
Mailing Address				10	25	2015	
City	NEW CASTLE	State	PA	Zip Code (Plus 4)	16101	Description of Expenditure MAIL POST CARDS	

To Whom Paid D H MARKETING			MO	DAY	YEAR	\$ 1,135.98
Mailing Address			10	26	2015	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101	Description of Expenditure MAILERS			

To Whom Paid FRANZ COMM.			MO	DAY	YEAR	\$ 8,688.00
Mailing Address			11	6	2015	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101	Description of Expenditure MAILERS, CONSERT, TV			

To Whom Paid D. H. MARKETING			MO	DAY	YEAR	\$ 405.00
Mailing Address			10	30	2015	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101	Description of Expenditure MAILERS			

To Whom Paid ST. JOHNS			MO	DAY	YEAR	\$ 400.00
Mailing Address			11	7	2015	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101	Description of Expenditure HALL RENTAL			

To Whom Paid GLOBE LEADER			MO	DAY	YEAR	\$ 150.00
Mailing Address			11	9	2015	
City NEW WILMINGTON	State PA	Zip Code (Plus 4) 16142	Description of Expenditure AD			

To Whom Paid FARONE BROS			MO	DAY	YEAR	\$ 255.00
Mailing Address			11	9	2015	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16105	Description of Expenditure DJ			

To Whom Paid SUPERIOR SIGNS			MO	DAY	YEAR	\$ 419.76
Mailing Address			11	16	2015	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101	Description of Expenditure BUS SIGNS			

To Whom Paid FRANZ COMM.			MO	DAY	YEAR	\$ 381.50
Mailing Address			11	16	2015	
City NEW CASTLE	State PA	Zip Code (Plus 4) 16101	Description of Expenditure THANK YOU AD			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL

\$ 19,668.65

SCHEDULE IV
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 COMMITTEE TO ELECT AMODIE FOR JUDGE	Reporting Period From: <u>10/20/2015</u> To: <u>11/23/2015</u>
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			DATE		Outstanding Balance of Debt	
Name of Creditor			MO	DAY	YEAR	
MELISSA A. AMODIE						
Mailing Address			10	20	2015	\$ 5,000.00
City	State	Zip Code (Plus 4)	Description of Debt			
			LOAN TO COMMITTEE			
Name of Creditor			MO	DAY	YEAR	
MELISSA A. AMODIE						
Mailing Address			10	31	2015	\$ 3,850.43
City	State	Zip Code (Plus 4)	Description of Debt			
			POSTAGE			
Name of Creditor			MO	DAY	YEAR	
MELISSA AMODIE						
Mailing Address			11	4	2015	\$ 10,000.00
City	State	Zip Code (Plus 4)	Description of Debt			
			LOAN TO COMMITTEE			
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.						PAGE TOTAL
						\$ 18,850.43