Campaign Finance Report

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

Filer Identificat	ion 302	40		-	Repor		CANDI	DATE	\checkmark	СС	OMMITTEI		LOBE	BYIST	
Number :		-			Filed E	By:			•						
Name of Filing	Committee, Candi	date or L	obbyist:		PATRIC	K, PAI	JLA								
Street Address:															
City:							State: Zip Code:								
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRID PRIMARY	AY PRE	- 2.	30 DA PRIMA		POST-	3. X		AMENDMI REPORT?	ENT	Yes	No	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRID ELECTION		E- 5.	30 DA ELECT		POST-	POST- 6.		TERMINATION REPORT?		Yes	No	\checkmark
report type)	ANNUAL REPORT	r 7.	Year 2003	3		FILING METHOD P () CHECK ONE					PAPER		\checkmark	DISKE	TTE
Name of Office	Sought by Candida	ate:				-	DATE O	F ELE	CTION		District Number	Office Code	Par	ty Code	County Code
JUDGE OF THE	E COURT OF COM	MON PLF	AS				мо	DAY	YEA	R	1	CPJ	DEN	1	51
							11		4	2003		(SEE INS	STRUCTIO	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAF	2		мо	DAY	YEA	R	FO		E USE	ONLY	
Expenditure	s from:		1	1	1 T	0	6		9	2003					
A. Amount Bro	ought Forward Fro	m Last F	Report			\$	-			0.00]				
B. Total Monet	tary Contributions	And Red	ceipts (Fro	m Sche	edule I)	\$		5,000.00							
C. Total Funds	Available (Sum C	f Lines A	A and B)			\$			5,00	0.00					
D. Total Exper	nditures (From Scl	nedule II	II)			\$			5,00	0.00					
E. Ending Casl	h Balance (Subtra	ct Line D	From Line	e C)		\$				0.00	4				
F. Value Of In	-Kind Contributior	is Receiv	ved (From	Schedu	le II)	\$				0.00	-				
G. Unpaid Deb	ts And Obligation	s (From	Schedule I	V)		\$				0.00					
				AFF	IDAVI	T SE	CTION								
	is a Committee re	-	-							-	-				
I swear (or affirm correct and comp	1) that this report, ind lete.	cluding th	e attached s	chedule	s filed on	paper	or by elect	ronic m	edium, a	ire to	the best of	my know	vledge	and beli	ef , true
Sworn to and sub	scribed before me th day of	is	20						Sig	natur	e of Person	Submitt	ing Rep	oort	
	Signat	ure				-					Print	ed Name			
My Commission E	-										Email				
	мо	D	AY	YR		_		Ar	ea Code		Daytime	e Telepho	one Nu	mber	
Part II- If this is	a report of a car	didate's	authorize	d Comr	nittee, C	andid	ate shall	sign h	ere.						
I swear (or affirm No 320) as amend) that to the best of led.	my knowl	edge and be	elief this	s political	comm	ittee has n	ot viola	ted any	provis	ions of the	act of Ju	ine 3,1	937 (P.L	. 1333,
Sworn to and subs	cribed before me this day of	5	20							s	ignature o	^F Candida	ite		
						_					Printeo	Name			
	Signature					_					Emai				
My Commission Ex	pires					_					Lindi				
	мо	D	YAY	YF	2	_		Area	Code		Da	ytime Te	elephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** PATRICK, PAULA From: To: <u>6/9/2003</u> 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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 5,000.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 5,000.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 5,000.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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						
Fre						:				
					DATE			AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus	4)							
							Γ	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 \$50.01 to \$250.00 in the reporting period. (Exclude contributions from political committees reported in Part A)									
Name of Filing Committee or Candidat	e			orting P	eriod	Тс			
			Fro	m:		10):		
					DATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4)							
								PAGE TOTAL	
Enter Grand Total of Part A on S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	2.		\$	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			Reporting Period							
			From:			То:				
				DA	TE		А	MOUNT		
Full Name of Contributing Commit	ttee			мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Cod	e (Plus 4)							
						ſ		PAGE TOTAL		
Enter Grand Total of Part C on	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	0.00		

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			Reporting Period						
PATRICK, PAULA From:						То	: <u>6/9/2003</u>		
				DA	ATE		AMOUNT		
Full Name of Contributor PAULA PATRICK, ESQUIRE				мо	DAY	YEAR			
Mailing 6100 CITY AVENUE 6100 CITY AVENUE							\$ 5,000.00		
City PHILADELPHIA	State	Zip Code (Plus	; 4)	5	6	2003			
Employer Name SELF EMPLOYED				Occupation ATTORNEY					
Employer Mailing Address/Principal Place Business	of	City			State		Zip Code (Plus 4)		
Enter Grand Total of Part C on Sched	ule I, Detailed Su	mmary Page,	Sectio	on 3.			PAGE TOTAL \$ 5,000.00		

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	2		Reporting Period							
			From:			То:				
				D	ATE			AMOUNT	-	
Full Name				мо	DAY	YEAR	1			
Mailing Address							\$	5	0.00	
City	State	Zip Code (Plus 4)							
Receipt Description	·					•	•			
Enter Grand Total of Part E on Sched	ule I. Detailed Sum	mary Page	Section	4				PAGE TO	TAL	
			20000				\$		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		
PATRICK, PAULA	From:	To:	<u>6/9/2003</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, 1		\$	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:			То:				
				DATE		АМО	UNT	
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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL	
					4	6	0.00	

0.00

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

Name of Filing Committee or Candidate					Reporting Period						
							From: To:				
							DATE			AMOUNT	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address									\$	0.00	
City	State		Zip Code(F	Plus 4)							
Employer of Contributor	I		1		Occupation						
Employer Mailing Address/Principal Pl Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption o	f Contribution	
Enter Grand Total of Part G on So	hedule II,]	 In-Kind	Contributi	ons De	taile	ed				PAGE TOTAL	

Summary Page, Section 3.	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate					Reporting Period						
PATRICK, PAULA	From			То:	<u>6/9/2003</u>							
		DATE	AMOUNT									
To Whom Paid FRIENDS TO ELECT PAULA PATRICK, JU	мо	DAY	YEAR									
Mailing Address 3 STONE CORP CT			5	6	2003	\$	5,000.00					
City SICKLERVILLE	State NJ	Zip Code (Plus 4) 08081	· ·	otion of Exp FO CAMPAI								
							PAGE TOTAL					
Enter Grand Total of Expenditures of	on Page 1, Report	Cover Page, Item L).			\$	5,000.00					