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	130151			Report Filed By :		CANDI	DATE COMM		MITTEE		LOBE	BYIST				
Name of Filing C	Committee, Cand	idate or L	obbyist:		COM	1MI	TTEE T	TO ELECT	ROSE	MAR'	Y CRAV	VFORD J	UDGE				
Street Address:	P.O. BOX 1	30															
City:	WEXFORD							State:	PA			Zip Cod	le: 15	5090			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY					AY F	POST- 3. X			AMENDM REPORT?		Yes	No	`	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION					NY F ΓΙΟΝ	POST- 6.				TERMINATION Yes REPORT?			•	
report type)	ANNUAL REPOR	?T 7.	Year 2017					NG METHO				PAPER DISKETTE				TTE	
Name of Office S	- Sought by Candid	date:						DATE O	F ELE	СТІО	N	District Number	Office Code	Par	ty Code	Count Code	у
								МО	DAY	YE	AR	111111111111111111111111111111111111111	1000	DEN	1	-	
								11		7	2017		(SEE IN	STRUCTIO	ONS FOR O	ODES)	
Summary of Expenditures	Receipts and	МО	DAY	YEAR	ł		_	МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
Expenditures			5 2	2	017	Т	0	6		5	2017						
A. Amount Bro	ught Forward Fr	om Last R	Report				\$			2,2	234.91						
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 2,2									280.00								
C. Total Funds Available (Sum Of Lines A and B)										4,5	14.91						
D. Total Expenditures (From Schedule III)										3,8	39.64						
E. Ending Cash Balance (Subtract Line D From Line C)							\$			6	75.27						
F. Value Of In-	Kind Contribution	ns Receiv	ed (From S	chedu	le II	()	\$				0.00						
G. Unpaid Debt	s And Obligation	ns (From S	Schedule IV)			\$				0.00			1			
				AFF	IDA	\VI	T SE	CTION									
PART I - If this is			_						-								
I swear (or affirm) correct and comple		ncluding th	e attached sc	hedule	s filed	d on	paper (or by elect	ronic m	edium	, are to t	the best o	f my kno	wledge	and belie	ef , tru	e,
Sworn to and subs	cribed before me t day of	his	20							s	ignature	of Perso	n Submit	ting Rep	ort		-
	Signa						-					Prin	ted Name	e			-
My Commission Ex	-	car e										Ema	il				-
	мо	D	AY	YR			_		Are	ea Cod	e	Daytim	e Teleph	none Nu	mber		-
Part II- If this is	a report of a ca	ndidate's	authorized	Comn	nitte	e, C	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende		f my knowl	edge and beli	ef this	polit	tical	comm	ittee has n	ot viola	ted an	y provis	ions of the	e act of J	une 3,1	937 (P.L	. 1333,	
Sworn to and subsc	ribed before me th	is									S	ignature o	of Candid	ate			-
	day of ————————————————————————————————————						_					Drinto	d Nama				-
	Signatur	<u> </u>					-					Fillite	d Name				
My Commission Exp	_	~										Ema	il				⁻
	мо	D	AY	YR	2		-		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		_
COMMITTEE TO ELECT ROSEMARY CRAWFORD JUDGE	From:	<u>5/2/201</u>	<u>7</u> To:	6/5/2017
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g Period	(1)	\$	230.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	350.00
All Other Contributions (Part B)			\$	1,400.00
TOTAL for the Reporting	g Period	(2)	\$	1,750.00
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)			\$	300.00
TOTAL for the Reporting	g Period	(3)	\$	300.00
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			\$	2,280.00

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

COMMITTEE TO ELECT ROSEMARY CRAWFORD JUDGE

From: 5/2/2017

DATE

AMOUNT

Full Name of Contributing Comm AFRICAN AMERICAN WOMEN FO	МО	DAY	YEAR			
Mailing Address P.O. BOX 99745						\$ 150.00
City PITTSBURGH	State PA	Zip Code (Plus 4) 15233	5	3	2017	
Full Name of Contributing Comm CAMPAIGN TO ELECT AMANDA			МО	DAY	YEAR	
Mailing Address P.O. BOX	23066		_			\$ 200.00
City PITTSBURGH	State PA	Zip Code (Plus 4) 15222	5	16	2017	

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

PAGE TOTAL \$ 350.00

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					Reporting Period					
COMMITTEE TO ELECT ROSEMARY CF	RAWFORD JUDGE		Fro	m:	5/2/2	2 <u>017</u> To	: <u>6/5/2017</u>			
				DATE AMOUNT						
Full Name of Contributor COLEMAN AND LINDA LANE				МО	DAY	YEAR				
Mailing Address 815 MELLON STREE	T						\$ 100.00			
City PITTSBURGH	State PA	Zip Code (Plus 4) 15206		5	3	2017				
Full Name of Contributor BRENDA GREGG	МО	DAY	YEAR							
Mailing Address 619 EDGEWOOD RO	DAD						\$ 100.00			
City PITTSBURGH	State PA	Zip Code (Plus 4) 15221		5	3	2017				
Full Name of Contributor LEON AND ANN HALEY					DAY	YEAR				
Mailing Address 5701 CENTRE AVEN	IUE APT. 1312						\$ 100.00			
City PITTSBURGH	State PA	Zip Code (Plus 4) 15206		5	8	2017				
Full Name of Contributor CHERYL ALLEN				МО	DAY	YEAR				
Mailing Address 2535 RED OAK COU	JRT State	Zip Code (Plus 4)		5	16	2017	\$ 100.00			
City ALLISON PARK	PA	15101								
Full Name of Contributor ALBERTA GRAHAM AND KEZIA ELLISON				МО	DAY	YEAR				
Mailing Address 1207 BUENA VISTA	STREET						\$ 100.00			
City PITTSBURGH	State PA	Zip Code (Plus 4) 15212		5	16	2017				

						FAGL 5
Full Name of Contributor						
ERIC AND CECILE SPRINGER			МО	DAY	YEAR	
Mailing Address 220 N. BELLE	FIELD AVENUE APT	903				\$ 200.00
City PITTSBURGH	State	Zip Code (Plus 4)	5	16	2017	
	PA	15213				
Full Name of Contributor CHATON TURNER	МО	DAY	YEAR			
Mailing Address 1104 BIDWE				\$ 100.00		
City PITTSBURGH	State	Zip Code (Plus 4)	6	5	2017	
· FITTSBURGIT	PA	15233				
Full Name of Contributor JEANINE MCCREARY	•	<u> </u>	МО	DAY	YEAR	
Mailing Address 349 W. 12TH	AVENUE					\$ 100.00
City HOMESTEAD	State	Zip Code (Plus 4)	6	5	2017	
TIOTIESTERS	PA	15120				
Full Name of Contributor MARIMBA MILLIONES			МО	DAY	YEAR	
	STREET		МО			\$ 100.00
MARIMBA MILLIONES Mailing Address 3000 IOWA S	STREET State	Zip Code (Plus 4)	MO	DAY 5	YEAR 2017	\$ 100.00
MARIMBA MILLIONES Mailing Address 3000 IOWA S		Zip Code (Plus 4) 15219				\$ 100.00
MARIMBA MILLIONES Mailing Address 3000 IOWA S	State					\$ 100.00
MARIMBA MILLIONES Mailing Address 3000 IOWA S City PITTSBURGH Full Name of Contributor	State PA		6 мо	DAY 5	2017 YEAR	\$ 100.00 \$ 100.00
MARIMBA MILLIONES Mailing Address 3000 IOWA S City PITTSBURGH Full Name of Contributor ANGELA BLAIR Mailing Address 555 CORTLAI	State PA		6	5	2017	
MARIMBA MILLIONES Mailing Address 3000 IOWA S City PITTSBURGH Full Name of Contributor ANGELA BLAIR Mailing Address 555 CORTLAI	State PA ND DRIVE	15219	6 мо	DAY 5	2017 YEAR	
MARIMBA MILLIONES Mailing Address 3000 IOWA S City PITTSBURGH Full Name of Contributor ANGELA BLAIR Mailing Address 555 CORTLAI	State PA ND DRIVE State	15219 Zip Code (Plus 4)	6 мо	DAY 5	2017 YEAR	
MARIMBA MILLIONES Mailing Address 3000 IOWA S City PITTSBURGH Full Name of Contributor ANGELA BLAIR Mailing Address 555 CORTLAI City FINLEYVILLE	State PA ND DRIVE State PA	15219 Zip Code (Plus 4)	мо 6	5 DAY 5	2017 YEAR 2017	
MARIMBA MILLIONES Mailing Address 3000 IOWA S City PITTSBURGH Full Name of Contributor ANGELA BLAIR Mailing Address 555 CORTLAI City FINLEYVILLE Full Name of Contributor JEFFREY SIKIRICA Mailing Address 121 NORTHB	State PA ND DRIVE State PA	15219 Zip Code (Plus 4)	MO	DAY 5	2017 YEAR 2017	\$ 100.00
MARIMBA MILLIONES Mailing Address 3000 IOWA S City PITTSBURGH Full Name of Contributor ANGELA BLAIR Mailing Address 555 CORTLAI City FINLEYVILLE Full Name of Contributor JEFFREY SIKIRICA Mailing Address 121 NORTHB	State PA ND DRIVE State PA OOK DRIVE	15219 Zip Code (Plus 4) 15332	мо 6	5 DAY 5	2017 YEAR 2017	\$ 100.00

Full Name of Contributor NATALIE CARDIELLO	МО	DAY	YEAR			
Mailing Address 107 HURON DRIVE						\$ 150.00
City CARNEGIE	State	Zip Code (Plus 4)	6	5	2017	
	PA	15106				

PAGE TOTAL \$ 1,400.00

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

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 Committee				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule I, Detailed Sum	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.)

/2017
300.00
4)
TAL
00.00

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 Ca	ndidate		Repor	ting Perio	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	•				•	•	
Enter Grand Total of Part E on	Schedule T Detailed	l Summary Page	Section	4			ı	PAGE TOTAL
zinci. Grana rotal or rait z on	ocilculate 1, Detailet	. Janimary rage,	Section				\$	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 ROSEMARY CRAWFORD JUDGE	From:	<u>5/2/2017</u> To:	6/5/2017
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)	\$	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	lame 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 (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				Reporting Period						
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State	Zip Code(Plus 4)								
Employer of Contributor	-1		•			Occupa	tion			
Employer Mailing Address/Principal Pl Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on So Summary Page, Section 3.	hedule II,	In-Kind	Contributi	ons De	taile	ed				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting			
COMMITTEE TO ELECT ROSEMARY CRAWFORD JUDGE	From	5/2/2017	То:	6/5/2017
	DATE			AMOUNT

			DATE			AMOUNT	
To Whom Paid THE PACT INITIATIVE			мо	DAY	YEAR		
Mailing Address P.O. BOX 90131			5	3	2017	\$	100.00
City PITTSBURGH	State PA	Zip Code (Plus 4) 15224	Description of Expenditure CANDIDATE FORUM				
To Whom Paid CHI SIGNS AND DESIGNS			МО	DAY	YEAR		
Mailing Address 387 PLUM STREET			5	3	2017	\$	811.84
City OAKMONT	State PA	Zip Code (Plus 4) 15139	Description of Expenditure CAMPAIGN MATERIALS				
To Whom Paid SOUL PITT			МО	DAY	YEAR		
Mailing Address P.O. BOX 17570			5	3	2017	\$	100.00
City PITTSBURGH	State PA	Zip Code (Plus 4) 15235	Description of Expenditure ADVERTISING/PR AND MARKETING				
To Whom Paid ROSA COPELAND MILLER	·		МО	DAY	YEAR		
Mailing Address 324 SCARLET CIRCLE			5	3	2017	\$	38.00
City WEXFORD	State PA	Zip Code (Plus 4) 15090		otion of Exp URSEMENT			NEWAL
To Whom Paid PRINT			МО	DAY	YEAR		
Mailing Address P.O. BOX 4685			5	3	2017	\$	175.00
City PITTSBURGH	State PA	Zip Code (Plus 4) 115206	1	tion of Exp IGN AD	penditure	1	

						17	GL 14	
To Whom Paid FRANK, GALE, BAILS, MURCKO & DOCRASS, P.C.				DAY	YEAR			
Mailing Address 707 GRANT STREET 33RD FLOOR, GULF TOWER			5	8	2017	\$	326.00	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15219	Description of Expenditure PROFESSIONAL SERVICES					
To Whom Paid CHI SIGNS AND DESIGNS			МО	DAY	YEAR			
Mailing Address 387 PLUM STREET			5	23	2017	\$	770.00	
City OAKMONT	State PA	Zip Code (Plus 4) 15139	Description of Expenditure CAMPAIGN MATERIALS					
To Whom Paid ROSEMARY CRAWFORD				DAY	YEAR			
Mailing Address 4923 APPLE RIDGE DRIVE			5	24	2017	\$	400.00	
City ALLISON PARK	State PA	Zip Code (Plus 4) 15101	Description of Expenditure CAMPAIGN REIMBURSEMENT FOR POLL WORKERS					
To Whom Paid ROSA COPELAND MILLER			МО	DAY	YEAR			
Mailing Address 324 SCARLET	CIRCLE		5	24	2017	\$	9.80	
City WEXFORD	State PA	Zip Code (Plus 4) 15090	Description of Expenditure REIMBURSEMENT FOR STAMPS					
To Whom Paid PNC BANK				DAY	YEAR			
Mailing Address P.O. BOX 609			5	31	2017	\$	14.00	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15230	Description of Expenditure SERVICE CHARGE					
To Whom Paid PNC BANK			МО	DAY	YEAR			
Mailing Address P.O. BOX 609								
Mailing Address P.O. BOX 609			5	31	2017	\$	95.00	

To Whom Paid ROSEMARY CRAWFORD Mailing Address 4923 APPLE RIDGE DRIVE			МО	DAY	YEAR		
			6	5	2017	\$	1,000.00
City ALLISON PARK	State PA	Zip Code (Plus 4) 15101	Description of Expenditure CAMPAIGN REIMBURSEMENT FOR POLL WO				
Enter Grand Total of Expend	litures on Page 1, Re	port Cover Page, Item D	•			\$	PAGE TOTAL 3,839.64
					,		