#### **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 :	<b>on</b> 201	70122				port ed B		CAND	IDATE		СОМ	<b>ITTEE</b>	<b>√</b>	LOBE	SYIST		
Name of Filing C	Committee, Candi	date or L	obbyist:	•	COI	NRO'	Y, DA	VID FOR	JUDGE	=							
Street Address:	220 FEDERA	L STREE	Т														
City:	PHILADELPH -	IA						State:	PA			Zip Cod	d <b>e:</b> 19	9147			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	-	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No	<b>~</b>	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	/ PRE	-	5.	30 DA ELECT		POST-	6.		TERMINA REPORT	No	<b>\</b>			
report type)	ANNUAL REPOR	<b>T</b> 7. <b>X</b>	<b>Year</b> 2017					NG METH CHECK C				PAPER		<b>/</b>	DISKE	TTE	
Name of Office S	- Sought by Candid	ate:			-			DATE (	OF ELE	CTIC	N	District Number	ty Code	County			
								МО	DAY	YI	EAR	1	COde CPJP	DEN	1	51	
JUDGE OF THE	COURT OF COM	MON PLE	AS - PHILAL	DELPH	AIA			1:	L	7	2017		(SEE IN	STRUCTIO	ONS FOR C	ODES)	
	Receipts and	МО	DAY	YEAR				мо	DAY	Y	EAR	FOR OFFICE USE ONLY					
Expenditures	from:		11 28	20	017	T	0	12	2	31	2017						
A. Amount Bro	ught Forward Fro	om Last R	eport				\$			33,	178.90						
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule	e I)	\$				0.00						
C. Total Funds Available (Sum Of Lines A and B) \$ 33,178.90																	
D. Total Expend	ditures (From Sc	hedule II	I)				\$			(	543.68						
E. Ending Cash	Balance (Subtra	ct Line D	From Line C	<b>:</b> )			\$			32,5	35.22	5.22					
F. Value Of In-	Kind Contributio	ns Receiv	ed (From Sc	hedu	le II	I)	\$				0.00						
G. Unpaid Debt	s And Obligation	s (From S	Schedule IV	)			\$				0.00						
				AFF	ΊD	AVI	T SE	CTION									
PART I - If this is	s a Committee re	port, trea	surer sign h	ere. 1	[f th	nis is	a Can	ndidate r	eport,	candi	date sig	jn here.					
I swear (or affirm) correct and comple	) that this report, in ete.	cluding the	e attached sch	edules	file	ed on	paper (	or by elec	tronic m	edium	, are to t	the best o	f my knov	wledge	and belie	ef , true	
Sworn to and subs	cribed before me th day of	nis	20							5	Signature	of Perso	n Submit	ting Rep	ort		
	Signa	:ure					-					Prin	ted Name	•			
My Commission Ex	cpires						_					Ema	il				
	МО	D	AY	YR					Ar	ea Co	ie	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a ca	ndidate's	authorized (	Comn	nitte	ee, C	andida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende		my knowl	edge and belie	f this	poli	itical	commi	ittee has	not viola	ted ar	y provis	ions of th	e act of J	une 3,19	937 (P.L.	1333,	
Sworn to and subso		s									s	ignature (	of Candid	ate			
	day of		_ 20				-					Printe	ed Name				
	Signature	2					-					F	==				
My Commission Exp	ires											Ema					
	мо	D	AY	YR			-		Area	Code		D	aytime T	elephon	e Numbe	er	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period					
CONROY, DAVID FOR JUDGE	From:	11/28/201	<u>.7</u> To:	12/31/2017			
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)	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			
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)	\$	0.00			
			1				
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 Page 1			\$	0.00			

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu	-			•				
Name of Filing Comm	nittee or Candidate		Re	porting	Period				
			From: To				<b>:</b>		
		1			DATE			AMOUNT	
Full Name of Contribut	ing Committee			МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4)	)						
	•	•	•		•	•		DACE TOTAL	

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

**PAGE TOTAL \$**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 Filling Committee of Candidate			Re <sub>l</sub> Fro					
					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			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 Scho	edule 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.)

Name of Filing Committee or Candida	te			Rep	orting Pe	riod			
				Froi	n:		To	<b>)</b> :	
					D	ATE		АМ	IOUNT
Full Name of Contributor					МО	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus	s 4)					
Employer Name	•	•			Occupa	tion			
Employer Mailing Address/Principal P Business	lace of		City		•	State		Zip Code	e (Plus 4)
Enter Grand Total of Part C on Sc	hedule I, Deta	iled Sumr	mary Page,	Section	on 3.			P <i>A</i>	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		Report	ting Perio	bd			
			From:			To:		
				D	ATE		AM	OUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	•	•		•	•	•	_	
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			PAG	E TOTAL
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	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 Peri	od	
CONROY, DAVID FOR JUDGE	From:	<u>11/28/2017</u> <b>To:</b>	12/31/2017
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTO	₹	
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, 1		\$	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:			To:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	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			
					Fro	om:		To:		
					•		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				<b>PAGE TOTAL</b> 0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period					
CONROY, DAVID FOR JUDGE	From	11/28/2017	То:	12/31/2017		

				DATE			AMOUNT	
To Whom Paid STRASSHEIM GRAPHIC DESIGN								
Mailing Address 1500 MARKET STREET #225				31	2017	\$	643.68	
City PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19147	1	otion of Exp				
	D 1 D.						PAGE TOTAL	
Enter Grand Total of Expenditui	nter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							