# **Campaign Finance Report**

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

Filer Identification	on 8300	021			Report Filed B		CANDI	DATE	СОМІ	<b>IITTEE</b>	✓	LOBE	BYIST	
Name of Filing C	ommittee, Candid	ate or Lo	obbyist:		ACBA JU	JDICI	AL EXCE	LLENCE	COMMITTE	Ē				
Street Address:	400 KOPPERS BUILDING,436 SEVENTH AVENUE													
City:	PITTSBURGH						State:	PA		Zip Coo	<b>le:</b> 15	219		
	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2.	30 DA PRIM		POST- 3	3.	AMENDM REPORT		Yes	No	$\checkmark$
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE-	· 5.	30 DA ELEC		POST- 6	5.	TERMINA REPORT		Yes	No	$\checkmark$
report type)	ANNUAL REPORT	7. <b>X</b>	<b>Year</b> 2017				NG METHO			PAPER		$\checkmark$	DISKE	TTE
Name of Office S	ought by Candida	te:					DATE O	F ELEC	TION	District Number	Office Code	Par	ty Code	County Code
							мо	DAY	YEAR					
							11	7	7 2017		(SEE INS	TRUCTI	ONS FOR C	ODES)
Summary of I		мо	DAY	YEAR			мо	DAY	YEAR	FO	R OFFIC	e use	ONLY	
Expenditures	from:	1	1 28	20	17 <b>T</b>	0	12	3:	1 2017					
A. Amount Brou	ught Forward Fror	n Last R	eport			\$			28,494.82					
B. Total Moneta	ary Contributions	And Reco	eipts (Fron	n Sched	lule I)	\$			2.17					
C. Total Funds	Available (Sum Of	<sup>:</sup> Lines A	and B)			\$			28,494.99					
D. Total Expend	litures (From Sch	edule II	[)			\$			4,644.98					
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)		\$		2	23,852.01	-				
F. Value Of In-H	Kind Contributions	Receive	ed (From S	chedule	e II)	\$			0.00	-				
G. Unpaid Debt	s And Obligations	(From S	chedule IV	<b>'</b> )		\$			0.00					
				AFFI	DAVI	T SE	CTION							
	a Committee rep	•						• •						
I swear (or affirm) correct and comple	that this report, incl ete.	uding the	attached sc	hedules	filed on	paper	or by elect	ronic meo	lium, are to	the best o	f my knov	/ledge	and belie	ef , true
Sworn to and subse	cribed before me this day of	3	20						Signature	e of Perso	n Submitt	ing Rep	oort	
	Signatu	re				-				Prin	ted Name			
My Commission Ex	pires					_				Ema	il			
	мо	DA	AY	YR				Area	Code	Daytim	e Teleph	one Nu	mber	
Part II- If this is	a report of a can	lidate's	authorized	Comm	ittee, C	andid	ate shall	sign her	·e.					
I swear (or affirm)	that to the best of a	ny knowle	dge and beli	ef this p	political	comm	ittee has n	ot violate	d any provis	ions of th	e act of Ju	ine 3,19	937 (P.L	1333,
No 320) as amende	ed.													
2			20						S	ignature o	of Candida	te		
2	d. ribed before me this					_			S	-	of Candida d Name	te		
2	d. ribed before me this 					-			s	-	d Name	te		

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Detailed Summary Pa	ge			
Name of Filing Committee or Candidate	Reporting	g Period		
ACBA JUDICIAL EXCELLENCE COMMITTEE	From:	<u>11/28/201</u>	<u>7</u> To:	<u>12/31/2017</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Report	ng 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 Report	ng 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 Report	ng Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part	E)			
TOTAL for the Report	ng Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover			\$	0.00

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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 Committe	Reporting Period						
			From:		То	:	
				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

\$

Use this Part to ite	emize all other 0.01 to \$250.0	1 TO \$250.00 contribution 00 in the repo	s w ortir	ith an ng per	aggreg iod.			rom
Name of Filing Committee or Candidat	e			orting P	eriod			
			Fro	m:		Тс	):	
					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	
	From:	То:

				D	ATE		АМС	DUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion	-		
Employer Mailing Address/Principal Pl Business	ace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detai	led Sumr	nary Page, Secti	on 3.			PAG	GE TOTAL
	-						\$	0.00

I

### 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 Candidat	e		Report	ing Perio	bd				
			From:			То:			
				D	ATE			AMOUN	r
Full Name				мо	DAY	YEAR			
Mailing Address							4	\$	0.00
City	State	Zip Code (	Plus 4)						
Receipt Description						1			
Enter Grand Total of Part E on Sche	lule T. Detailed	Summary Page	Section	4				PAGE TO	TAL
	ale 1, Detailed	Summary ruge,	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	
ACBA JUDICIAL EXCELLENCE COMMITTEE	From:	<u>11/28/2017</u> то:	<u>12/31/2017</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIB	UTOR	
TOTAL for the Reporting Pe	eriod (1	L) \$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	eriod (2	2) \$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3	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, 3		er \$	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 Ca	Name of Filing Committee or Candidate				Rep	porting P	eriod			
					Fro	m:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(P	lus 4)						
Employer of Contributor	I		1			Occupat	tion			
Employer Mailing Address/Princ Business	ipal Place of	City		State		Zip 4)	Code(Plus	Descri	ption of	f Contribution
Enter Grand Total of Part G	on Schodulo II	In-Kind	Contributio		taile					PAGE TOTAL

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.	PAGE

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period					
ACBA JUDICIAL EXCELLENCE COMMITTEE			From	From <u>11/28/2017</u>			<u>12/31/2017</u>	
			DATE				AMOUNT	
To Whom Paid 535 MEDIA			мо	DAY	YEAR			
Mailing Address 622 CABIN HILL DRIVE			12	13	2017	\$	1,108.42	
City GREENSBURG	<b>State</b> PA	Zip Code (Plus 4)	· ·	Description of Expenditure TRIB LIVE.COM BANNERS - ADVERTISING				
To Whom Paid ACBA			мо	DAY	YEAR			
Mailing Address 400 KOPPERS BUILDING 435 SEVENTH AVENUE			12	13	2017	\$	1,528.43	
City PITTSBURGH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15219	COPYIN	Description of Expenditure COPYING, POSTAGE, LUNCH, FLOWERS ETC. FOR RECEPTION				
To Whom Paid FRANK, GALE, BAILS, MUREKO & POORASS, P.C.			мо	DAY	YEAR			
Mailing Address 707 GRANT STREET 33RD FLOOR, GULF TOWER			12	21	2017	\$	1,008.13	
City PITTSBURGH	<b>State</b> PA	Zip Code (Plus 4)	Description of Expenditure PROFESSIONAL SERVICES					
To Whom Paid ACBA			мо	DAY	YEAR			
Mailing Address 400 KOPPERS BUILDING 435 SEVENTH AVENUE			12	13	2017	\$	1,000.00	
City PITTSBURGH	State PA	<b>Zip Code (Plus 4)</b> 15219	FUNDS	Description of Expenditure FUNDS OWED BY JEC TO ACBA FOR VARIOUS EXPENSES				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	<b>PAGE TOTAL</b> 4,644.98	