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 2015	0029			Repo Filed		y :	CA	NDI	DATE		СОМ	AITTEE	~	LOB	DT.	151	
Name of Filing C	ommittee, Candida	ate or L	obbyist:	•	TWAF	RDY	FOR	JUD	GE (COMMI	TTEE	=						
Street Address:	1026 WINTER	ST.,ST	E. 300A															
City:	PHILADELPHI <i>A</i>	Ą						State	e:	PA			Zip Co	de: 19	9107			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2.		30 DA PRIMA		P	OST-	3.		AMENDN REPORT		Yes		No	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.		30 DA ELECT		P	OST-	6.		TERMIN/ REPORT		Yes	~	No	
report type)	ANNUAL REPORT	7. X	Year 2017			1		IG ME					PAPER		$ \checkmark $	D:	ISKET	TE
Name of Office S	Sought by Candidat	te:						DAT	ΈO	F ELEC	CTIC	N	District Number	Office Code	Pa	rty		County Code
								МО		DAY	ΥI	EAR			R/I	D		
									11		7	2017		(SEE IN	ISTRUCT	IONS	S FOR CO	DDES)
	Receipts and	МО	DAY	YEAR	1			МО		DAY	Y	EAR	FC	R OFFI	CE USI	E 0	NLY	
Expenditures	from:		11 28	3 20	017	T)		12	1-1	31	2017						
A. Amount Bro	ught Forward Fron	1 Last R	eport				\$					500.00						
B. Total Moneta	ary Contributions A	And Rec	eipts (Fron	n Sche	dule 1	[)	\$					0.00						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$				į	500.00						
D. Total Expend	ditures (From Sche	edule II	I)				\$				į	500.00						
E. Ending Cash	Balance (Subtract	Line D	From Line	C)			\$					0.00						
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedu	le II)		\$			1	.68,0	27.23						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	/)			\$					0.00			•			
					ΊDΑ\													
I swear (or affirm)	that this report, incl		_									_		of my kno	wledge	and	d belie	f , true
Sworn to and subs	ete. cribed before me this																	
	day of		20									signature	of Perso	n Submit	ting Ke	por	τ	
	Signatu	re											Prin	ted Nam	е			
My Commission Ex	rpires								•				Ema	il				
	МО	D	AY	YR		_			_	Are	a Cod	le	Daytin	ne Telep	hone N	umb	er	_
	a report of a cand					•				_								
No 320) as amende		y knowle	edge and beli	ief this	politic	cal o	comm	ittee l	ias n	ot violat	ed ar	y provis	ions of th	e act of J	une 3,1	1937	7 (P.L.	1333,
Sworn to and subsc	ribed before me this day of		20									s	ignature (of Candid	late			
													Printe	ed Name				
My Commission Exp	Signature ires												Ema	nil				-
	мо	D	AY	YR						Area	Code		D	aytime 1	elepho	ne N	Numbe	 r

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
TWARDY FOR JUDGE COMMITTEE	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)			\$	0.00
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	J 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			\$	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			
			Fre	om:		То	:	
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
	•	·			•	•	$\overline{}$	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				Reporting Period From: To:				
			l		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 Candi	date		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary 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 Candidate			Rep	orting Pe	riod			
			Fron	n:		To) :	
				D	ATE		ı	AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Co	de (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			l	PAGE TOTAL
							\$	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 Car	ndidate		Report	ing Perio	od			
			From:			To:		
				D	ATE		A	MOUNT
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	d Summary Page	Section	4			P	AGE TOTAL
	2, 200 0000		22300				\$	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 Per	iod	
TWARDY FOR JUDGE COMMITTEE	From:	<u>11/28/2017</u> To:	12/31/2017
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTO	R	
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)	\$	168,027.23
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,		\$	168,027.23

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidat	:e		Reporting	g Period			
			From:			То:	
				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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

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

Name of Filing Committee or Candidate	Reporting Period							
TWARDY FOR JUDGE COMMITTEE	From: <u>11/28/2017</u> To: <u>12/31/201</u>	Z						

						DATE		AMO	UNT
Full Name of Contributor GEORGE R. TWARDY, JR.					мо	DAY	YEAR		
Mailing Address 1334 SUSQUEHAN							\$ 16	8,027.23	
City PHILADELPHIA	State		Zip Code(Plus 4)	12	4	2017		
	PA		19125						
Employer of Contributor SELF EMI	PLOYED				Occupation ATTORNEY				
Employer Mailing Address/Principal P Business	ace of	City		State	Zip 4)	Code(Plus	Descri	ption of Contri	bution
1026 WINTER ST. STE. 400A		PHILAD	DELPHIA	PA	191	.07	UNPAI	D DEBT FORG	IVENESS
Enter Grand Total of Part G on So	hedule II. I	n-Kind	Contribut	ions Detai	led			PAGE	TOTAL
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.					168,027.23				

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candida	ite		Reporti	ng Period			
TWARDY FOR JUDGE COMMITTEE			From	11/2	8/2017	То:	12/31/2017
				DATE			AMOUNT
To Whom Paid TD BANK			МО	DAY	YEAR		
Mailing Address 1900 MARKET ST			6	30	2017	\$	25.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103	Descrip	Description of Expenditure ACCOUNT MAINTENANCE FEE			
To Whom Paid TD BANK			МО	DAY	YEAR		
Mailing Address 1900 MARKET ST			7	31	2017	\$	25.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103	Descri	ption of Ex			
To Whom Paid TD BANK			мо	DAY	YEAR		
Mailing Address 1900 MARKET ST			8	31	2017	\$	25.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103	Descri	ption of Ex			
To Whom Paid TD BANK			МО	DAY	YEAR		
Mailing Address 1900 MARKET ST			9	30	2017	\$	25.00
City	State	Zip Code (Plus 4)	Descrip	ption of Ex			
To Whom Paid TD BANK			мо	DAY	YEAR		
lailing Address 1900 MARKET ST.			10	31	2017	\$	25.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103	Descri	ption of Exp			

To Whom Paid TD BANK			МО	DAY	YEAR		
Mailing Address 1900 MARKET ST.			11	30	2017	\$	25.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103	Description of Expenditure ACCOUNT MAINTENANCE FEE				
To Whom Paid TD BANK			МО	DAY	YEAR		
Mailing Address 1900 MARKET ST.			12	4	2017	\$	10.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103	Description of Expenditure OFFICIAL CHECK FEE				
To Whom Paid GEORGE R. TWARDY, JR.			МО	DAY	YEAR		
Mailing Address 1334 SUSQUEHANNA AVE.			12	4	2017	\$	340.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19125	Description of Expenditure PARTIAL LOAN REPAYMENT				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
Lines Grana Potar of Expend	ita. es on i age 1, Re	port corer rage, stelli b	•			\$	500.00