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 8300	021			Rep File			CAND	DATE		СОМ	1ITTEE	✓	LOBE	BYIST		
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		ACB	A Jl	JDICI	AL EXCE	LLENC	E COI	MMITTE	E .					
Street Address:	400 KOPPERS	BUILDI	NG,435 SE	VENT	ΗAV	/EN	UE										
City:	PITTSBURGH							State:	PA Zip Code: 15219								
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA' PRIMARY							AMENDMENT Yes No REPORT?				•			
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA' ELECTION	Y PRE	Ē- 5	5. X	30 DA		POST-	6.		TERMINA REPORT	No	•	/		
report type)	ANNUAL REPORT	7.	Year 2018					NG METH				PAPER		$\overline{}$	DISKE	TTE	
Name of Office S	- Sought by Candida	te:						DATE C	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Count	у
								МО	DAY	YE	AR		10000				
	11 6 2018							2018		(SEE IN	STRUCTIO	ONS FOR C	ODES)				
	mary of Receipts and MO DAY YEAR MO DAY YEAR								EAR	FO	R OFFI	CE USE	ONLY				
Expenditures	irom:		9 18	2	018	Т	<u> </u>	10) :	22	2018						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$			21,4	199.14						
B. Total Monetary Contributions And Receipts (From Schedule 1							\$	\$ 7.49									
C. Total Funds Available (Sum Of Lines A and B)							\$			21,5	506.63						
D. Total Expen	ditures (From Sch	edule II	I)				\$			5	71.31						
E. Ending Cash	Balance (Subtract	Line D	From Line (C)			\$			20,9	35.32						
F. Value Of In-	Kind Contributions	Receive	ed (From Se	hedu	le II)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$				0.00			1			
				AFF	IDA	١VI	ΓSE	CTION									
	a Committee rep	•	_														
I swear (or affirm) correct and comple) that this report, incl ete.	uding the	attached scl	nedules	s filed	l on	paper	or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , tru	e.
Sworn to and subs	cribed before me this day of	•	20							S	ignature	of Perso	n Submit	ting Rep	ort		-
	- ——		_				-					Prin	ted Name	e			-
My Commission Ex	Signatu pires	re										Ema	il				-
	МО	D	AY	YR			_		Are	ea Cod	le	Daytim	e Teleph	none Nu	mber		-
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nitte	e, C	andid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and beli	ef this	polit	ical	comm	ittee has r	ot viola	ted an	y provisi	ions of th	e act of J	une 3,1	937 (P.L.	. 1333	,
Sworn to and subso	ribed before me this										Si	ignature o	of Candid	ate			-
	day of		_ 20				-					Printa	d Name				-
	Signature						-										_
My Commission Exp	-											Ema	il				
	МО	D	AY	YR	1		•		Area	Code		Da	aytime T	elephon	e Numbe	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
ACBA JUDICIAL EXCELLENCE COMMITTEE	From:	9/18/201	<u>8</u> To:	10/22/2018
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g 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	g 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	g Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	7.49
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			\$	7.49

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize on with an aggregate val								
Name of Filing Committee or Candidate			Re	Reporting Period					
			Fr	om:		То	:		
					DATE			AMOUNT	
Full Name of Contribution	ng Committee			МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus	4)						
	•					-	Г	PAGE 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:					
					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 Candidate				Reporting Period					
			Froi	m:		To) :		
				D	ATE		А	MOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plu	s 4)						
Employer Name		•		Occupa	tion		•		
Employer Mailing Address/Principal Plac Business	e of	City		•	State		Zip Cod	de (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary Page	, Secti	on 3.			P \$	PAGE TOTAL 0.00	

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	e of Filing Committee or Candidate Reporting Pe				g Period						
ACBA JUDICIAL EXCELLENCE COMMITTEE			9/18/201	<u>.8</u> To:	10/22/2	<u>2018</u>					
		DATE		AMOUNT	r						
Full Name				,,_,,							
PNC BANK, N.A.		МО	DAY	YEAR							
Mailing Address DO ROY 600] \$	7.49					

Zip Code (Plus 4)

PITTSBURGH PΑ 15230 **Receipt Description**

State

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

City

P.O. BOX 609

INTEREST

PAGE TOTAL \$ 7.49

2018

10

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 Perio	d	
ACBA JUDICIAL EXCELLENCE COMMITTEE	From:	<u>9/18/2018</u> To:	10/22/2018
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 Candidat	:e		Reporting	g Period					
	Fro				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 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				Re	porting l	Period					
					From:			To:	То:		
					•		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	ption	of Contribution	
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, I	in-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00	

STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	ndidate		Reportir	ng Period				
ACBA JUDICIAL EXCELLENCE O	COMMITTEE		From <u>9/18/2018</u>			То:	10/22/2018	
				DATE			AMOUNT	
To Whom Paid ALLEGHENY COUNTY BAR ASSO	мо	DAY	YEAR					
Mailing Address 400 KOPPERS BLDG. 435 SEVENTH AVENUE				29	2018	\$	23.62	
City PITTSBURGH State PA 2ip Code (Plus 4) 15219				Description of Expenditure ADVERTISING IN NOVEMBER OF 2017				
To Whom Paid FRANK, GAIL, BAILS, MURCKO & DCRASS, P.C.			МО	DAY	YEAR			
Mailing Address 707 GRANT	STREET 33RD FLOOR, G	GULF TOWER	7	18	2018	\$	153.72	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15219	1 .	otion of Exp				
To Whom Paid FRANK, GAIL, BAILS, MURCKO	& POCRASS, P.C.		мо	DAY	YEAR			
Mailing Address 707 GRANT STREET 33RD FLOOR, GULF TOWER			10	17	2018	\$	393.97	
City PITTSBURGH State Zip Code (Plus 4) PA 15219			1 .	otion of Exp SSIONAL S				
		L	1			P	AGE TOTAL	

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

571.31