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 2019 | 0029 | | | Repor Filed | | CANDI | IDATE | | СОМ | MITTEE | ✓ | LOBE | BYIST | |
|---|----------------------------------|-------------|-----------------------|----------|----------------|--------------|--------------|--------------|---------|----------|------------------------|----------------|--------------|----------|----------------|
| Name of Filing C | committee, Candid | ate or Lo | bbyist: | I | PECK, | CHRIS | STYLEE FO | OR SUP | PERIOF | R COU | RT | | | | |
| Street Address: | 4431 NORTH | FRONT S | ST | | | | | | | | | | | | |
| City: | HARRISBURG | | | | | | State: | PA | | | Zip Co | de: 17 | 110 | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. X | 2ND FRIDA PRIMARY | Y PRE- | · 2. | 30 D PRIM | | POST- | 3. | | AMENDN REPORT | | Yes | No | \checkmark |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDA ELECTION | Y PRE | - 5. | 30 D ELEC | AY TION | POST- | 6. | | TERMINATION REPORT? | | Yes | No | \checkmark |
| report type) | ANNUAL REPORT | 7. | Year 2019 | | | | NG METH | | | | PAPER | | \checkmark | DISKE | TTE |
| Name of Office S | L Sought by Candida | te: | | | | | DATE C |)F ELE | CTIO | N | District Number | Office Code | Par | ty Code | County Code |
| | | | | | | | мо | DAY | YE | AR | -1 | SPR | REP | | 21 |
| JUDGE OF THE | SUPERIOR COUR | Т | | | | | 11 | | 5 | 2019 | | (SEE INS | TRUCTI | ONS FOR | CODES) |
| Summary of | Receipts and | мо | DAY | YEAR | | | мо | DAY | YE | AR | FC | OR OFFIC | E USE | ONLY | |
| Expenditures | from: | | 1 1 | . 20 | 019 | Ю | 4 | + | 1 | 2019 | | | | | |
| A. Amount Bro | ught Forward Fror | n Last Re | eport | • | | \$ | | | | 0.00 | 1 | | | | |
| B. Total Monet | ary Contributions | And Rece | eipts (Fron | n Schee | dule I) | \$ | 5 | | 40,50 | 00.00 | | | | | |
| C. Total Funds | Available (Sum Of | Lines A | and B) | | | \$ | 5 | | 40,50 | 00.00 | | | | | |
| D. Total Expen | ditures (From Sch | edule III | :) | | | \$ | 5 | | 3,09 | 99.22 | | | | | |
| E. Ending Cash | Balance (Subtrac | t Line D I | From Line | C) | | \$ | 5 | | 37,40 | 0.78 | | | | | |
| F. Value Of In- | Kind Contributions | s Receive | ed (From S | chedul | le II) | \$ | 5 | | 97 | 76.67 | | | | | |
| G. Unpaid Debt | s And Obligations | (From S | chedule I\ | /) | | \$ | 5 | | | 0.00 | | | | | |
| | | | | AFF | IDAV. | it se | CTION | | | | | | | | |
| PART I - If this is | s a Committee rep | ort, treas | surer sign | here. I | lf this i | s a Ca | ndidate r | eport, c | andid | ate sig | gn here. | | | | |
| I swear (or affirm) correct and comple |) that this report, incl ete. | luding the | attached sc | hedules | filed or | paper | or by elect | tronic me | edium, | are to f | the best o | f my knov | vledge | and beli | ef , true |
| Sworn to and subs | cribed before me this day of | 5 | 20 | | | | | | Sig | gnature | e of Perso | n Submitt | ing Rep | ort | |
| | Signatu | re | | | | _ | | | | | Prin | ted Name | | | |
| My Commission Ex | cpires | | | | | | | | | | Ema | il | | | |
| | мо | DA | Y | YR | | | | Are | ea Code | | Daytin | ne Teleph | one Nu | mber | |
| Part II- If this is | a report of a can | didate's a | authorized | Comm | nittee, (| Candio | late shall | sign he | ere. | | | | | | |
| I swear (or affirm) No 320) as amende | that to the best of n ed. | ny knowle | dge and beli | ief this | political | comn | nittee has r | not violat | ted any | provis | ions of th | e act of Ju | ine 3,19 | 937 (P.L | . 1333, |
| Sworn to and subso | ribed before me this day of | | 20 | | | | | | | S | ignature (| of Candida | ite | | |
| | | | • | | | _ | | | | | Printe | ed Name | | | |
| My Commission Exp | Signature | | | | | _ | | | | | Ema | il | | | |
| | мо | DA | Y | YR | | _ | | Area | Code | | D | aytime Te | elephon | e Numb | er |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

| Detailed Summary Page | | | | |
|---|-----------|--------------|------------------------|-----------------|
| Name of Filing Committee or Candidate | Reporting | g Period | | |
| PECK, CHRISTYLEE FOR SUPERIOR COURT | From: | <u>1/1/2</u> | 0 <u>19</u> To: | <u>4/1/2019</u> |
| 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) | | | \$ | 30,000.00 |
| All Other Contributions (Part D) | | | \$ | 10,500.00 |
| TOTAL for the Reporting | Period | (3) | \$ | 40,500.00 |
| 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E) | | | | |
| TOTAL for the Reporting | Period | (4) | \$ | 0.00 |
| | | | | |
| Total Monetary Contributions and Receipts During this Reporting Period (Add and totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page | | | \$ | 40,500.00 |

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 Committe | Name of Filing Committee or Candidate | | | Reporting Period | | | | | | |
|-----------------------------|---------------------------------------|-----------------------|--------|------------------|------|----|------------|--|--|--|
| | | | From: | | То | : | | | | |
| | | ÷ | | DATE | | | AMOUNT | | | |
| Full Name of Contributing C | Committee | | мо | DAY | YEAR | | | | | |
| Mailing Address | | | | | | \$ | 0.00 | | | |
| City | State | Zip Code (Plus 4) | | | | | | | | |
| | | | | | | Г | PAGE TOTAL | | | |
| Enter Grand Total of Par | t A on Schedule I, Detail | ed Summary Page, Sect | ion 2. | | | \$ | 0.00 | | | |

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

\$

| PART B 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 Candidat | e | | Rep Froi | - | eriod | То |): | | |
| | | | | | | | | | |
| | | | | | 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 Schedule I, Detailed Summary Page, Section 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 | | Rep | porting | Period | | | |
|---|----------------------------------|----------------|---------|-----------|---------------|--------------|--------------------|
| PECK, CHRISTYLEE FOR SUPERIOR COU | RT | Fro | om: | <u>1/</u> | <u>1/2019</u> | То: | <u>4/1/2019</u> |
| | | | | DA | TE | | AMOUNT |
| Full Name of Contributing Committee PENNSYLVANIA PROSPERITY PAC | | | | мо | DAY | YEAR | |
| Mailing Address PO BOX 1471 | | | | | | | \$ 1,000.00 |
| City CAMP HILL | StateZip Code (IPA17001 | | s 4) | 3 | 8 | 2019 | |
| Full Name of Contributing Committee COMMONWEALTH LEADERS FUND | | МО | DAY | YEAR | | | |
| Mailing Address 11 CHURCH RD City HATFIELD | State PA | s 4) | 3 | 28 | 2019 | \$ 25,000.00 | |
| Full Name of Contributing Committee Kirk4 Judge | | | | МО | DAY | YEAR | |
| Mailing Address P.O. Box 923 City Carlisle | State PA | Zip Code (Plus | s 4) | 3 | 28 | 2019 | \$ 500.00 |
| Full Name of Contributing Committee Glen Grell for House Committee | | | | мо | DAY | YEAR | |
| Mailing Address 17 Devonshire Squar City Mechanicsburg | re State PA | Zip Code (Plus | s 4) | 3 | 28 | 2019 | \$ 500.00 |
| Full Name of Contributing Committee GREENLEE PARTNERS STATE PAC | | | | мо | DAY | YEAR | |
| Mailing Address PO BOX 291 City HARRISBURG | PARTNERS STATE PAC PO BOX 291 | | | 3 | 28 | 2019 | \$ 1,000.00 |

| _ | ANGE RESOURCES ENERGY INDEPENDENCE PAC | | | | YEAR | |
|---|--|-----------------------------------|-------|-----|------|-------------------------------|
| Mailing Address P.O. BOX 54 | 5 | | | | | \$ 1,000.00 |
| City HARRISBURG | State PA | Zip Code (Plus 4) 17108 | 3 | 28 | 2019 | |
| Full Name of Contributing Comm Mike Regan for Senate | ittee | | мо | DAY | YEAR | |
| Mailing Address P. O. Box 85 | 1 | | | | | \$ 1,000.00 |
| City Mechanicsburg | State | Zip Code (Plus 4) | 3 | 28 | 2019 | |
| - | PA | 17055 | | | | |
| Enter Grand Total of Part C o | n Schedule I, Detaile | ed Summary Page, Sectio | on 3. | | | \$ PAGE TOTAL 30,000.00 |

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 | | | | Rep | orting Pe | riod | | | | |
|---|--------------------|-----------------------------------|--------------|------------------------------|-----------|--------------|-------------------|--------------------|--|--|
| PECK, CHRISTYLEE FOR SUPERIOR CO | URT | | | From | n: | <u>1/1/2</u> | <u>019</u> To | : <u>4/1/2019</u> | | |
| | | | | | DA | ATE | | AMOUNT | | |
| Full Name of Contributor Marjorie Lowe Blaze | | | | | мо | DAY | YEAR | | | |
| Mailing 102 Little Run Road | | | | | | | | \$ 1,000.00 | | |
| City Camp Hill | State PA | Zip Code (Plus 4) 17011 | | | 2 | 19 | 2019 | | | |
| Employer Name n/a | | | | | Occupat | cion R | letired | | | |
| Employer Mailing Address/Principal Place of City Business | | | | | State | | Zip Code (Plus 4) | | | |
| 102 Little Run Road Camp Hill | | | I | PA | | | 17011 | | | |
| Full Name of Contributor Marjorie Lowe Blaze | | | | | мо | DAY | YEAR | | | |
| Mailing Address 102 Little Run Road | | | | | | | | \$ 1,000.00 | | |
| City Camp Hill | State | Zij | p Code (Plus | ; 4) | 3 | 19 | 2019 | | | |
| | РА | 17 | 7011 | | | | | | | |
| Employer Name n/a | · · · · · · | | | | Occupat | | | | | |
| Employer Mailing Address/Principal Plac Business | e of | | City | | • | State | | Zip Code (Plus 4) | | |
| 102 Little Run Road | | | Camp Hil | I | | PA | | 17011 | | |
| Full Name of Contributor Karen Deklinski | | | | | мо | DAY | YEAR | | | |
| Mailing 406 North Front Stree | t | | | | | | | \$ 250.00 | | |
| City Wormleysburg | State | Zij | p Code (Plus | ; 4) | 3 | 8 | 2019 | | | |
| | PA | 17 | 7043 | | | | | | | |
| Employer Name Perfectly Pennsylvania | | | | Occupation Business Owner | | | Owner | | | |
| Employer Mailing Address/Principal Plac Business | e of | | City | | State | | | Zip Code (Plus 4) | | |
| One Terminal Drive | | | Middletov | wn | PA 17057 | | | 17057 | | |

| Full Name of Con | me of Contributor | | | | | | | | |
|---|---|--|----------|------------------------|------------------------------------|-------------------------------|------------------|------------------------------|------------------------|
| Karen Deklinski | | | | | мо | DAY | YEAR | | |
| Mailing Address | 406 North Front Stree | et e | | | | | | \$ | 750.00 |
| City Wormley | abura | State | Zi | p Code (Plus 4) | 3 | 28 | 2019 | | |
| City Wormley | sburg | PA | 17 | /043 | | | | | |
| | | | | | | | | | |
| Employer Name | Perfectly Pennsylvani | а | | | Occupat | i on B | usiness | Owner | |
| Employer Mailing Business | Address/Principal Plac | e of | | City | | State | | Zip Code (Pl | us 4) |
| One Terminal Dr | ive | | | Middletown | | PA | | 17057 | |
| Full Name of Con | tributor | | | | мо | DAY | YEAR | | |
| Thomas & Louisa | a Gaughen | | | | | | | | |
| Mailing Address | 1776 Louisa Lane | | | | | | | \$ | 1,000.00 |
| City Mechanic | sbura | State | Zi | p Code (Plus 4) | 3 | 19 | 2019 | | |
| ricenanie | | РА | 17 | 2050 | | | | | |
| | | | | | 0 | | | | |
| Employer Name The Gaughen Management Group | | | | | Occupation Real Estate Services | | | | |
| Employer Mailing Address/Principal Place of City Business | | | | City | | State | | Zip Code (Pl | us 4) |
| 1776 Louisa Lan | e | | | Mechanicsburg | | PA | | 17050 | |
| Full Name of Con | tributor | | | | | | | | |
| Richard Stewart | | | | | мо | DAY | YEAR | | |
| Mailing | 1811 Warren Street | | | | | | | <u> </u> | 4 999 99 |
| Address | | | | | 3 | 28 | 2019 | \$ | 1,000.00 |
| City New Cum | nberland | State | Zi | p Code (Plus 4) | 2 | 20 | 2019 | | |
| | | | | | | | | | |
| | | PA | 17 | 2070 | | | | | |
| Employer Name | Johnson, Duffie, Stev | | 17 | 2070 | Occupat | ion A | ttorney | | |
| Employer Mailing | Johnson, Duffie, Stev Address/Principal Plac | vart & Weidner | | °070 City | Occupat | ion A | ttorney | Zip Code (Pl | us 4) |
| | Address/Principal Plac | vart & Weidner | 17 | | Occupat | A | ttorney | | us 4) |
| Employer Mailing Business | Address/Principal Plac | vart & Weidner | 17 | City | | A State PA | | Zip Code (Pl | us 4) |
| Employer Mailing Business 301 Market Stree | Address/Principal Plac et tributor | vart & Weidner | 17 | City | Occupat | A | ttorney | Zip Code (Pl | us 4) |
| Employer Mailing Business 301 Market Stree Full Name of Con | Address/Principal Plac et tributor | vart & Weidner | | City | | A State PA | | Zip Code (Pl | us 4) 500.00 |
| Employer Mailing Business 301 Market Stree Full Name of Con Lemoyne Develo Mailing Address | Address/Principal Place et tributor pment 301 Market Street | vart & Weidner | | City | | A State PA | | Zip Code (Pl 17043 \$ | |
| Employer Mailing Business 301 Market Stree Full Name of Con Lemoyne Develo Mailing Address | Address/Principal Place et tributor pment 301 Market Street | vart & Weidner | Zi | City Lemoyne | мо | A State PA DAY | YEAR | Zip Code (Pl 17043 \$ | |
| Employer Mailing Business 301 Market Stree Full Name of Con Lemoyne Develo Mailing Address City LEMOYNE | Address/Principal Place et tributor pment 301 Market Street | vart & Weidner | Zi | City Lemoyne | MO | A State PA DAY 28 | YEAR | Zip Code (Pl 17043 \$ | |
| Employer Mailing Business 301 Market Stree Full Name of Con Lemoyne Develo Mailing Address | Address/Principal Place et tributor pment 301 Market Street | vart & Weidner | Zi | City Lemoyne | мо | A State PA DAY 28 | YEAR 2019 | Zip Code (Pl 17043 \$ | |
| Employer Mailing Business 301 Market Stree Full Name of Con Lemoyne Develo Mailing Address City LEMOYNE Employer Name | Address/Principal Place et tributor pment 301 Market Street | vart & Weidner e of State PA | Zi | City Lemoyne | MO | A State PA DAY 28 | YEAR 2019 | Zip Code (Pl 17043 | 500.00 |

| Full Name of Con | tributor | | | DAY | YEAR | | | | | |
|--|---|---|--------|-------------------------|----------------|--|---------------------------------|-----------------------------|-------------------|--|
| Carol McLeod | | | | | мо | DAY | YEAR | | | |
| Mailing Address | 104 Arnold Road | | | | | | | \$ | 500.00 | |
| City Enola | | State | Zi | p Code (Plus 4) | 3 | 28 | 2019 | | | |
| | | РА | 17 | 025 | | | | | | |
| Employer Name | _ | | | | Occupat | t ion R | etired | <u> </u> | | |
| Employer Mailing Business | Address/Principal Plac | e of | | City | | State | | Zip Code (F | Plus 4) | |
| 104 Arnold Road | | | | Enola | | РА | | 17025 | | |
| Full Name of Con Costopoulos, Fos | | | | | мо | DAY | YEAR | | | |
| Mailing Address | 831 Market Street | | | | | | | \$ | 500.00 | |
| City Lemovne | | State | Zij | p Code (Plus 4) | 3 | 28 | 2019 | | | |
| Lemoyne | | PA | | 7043 | | | | | | |
| | | | | | | - | | | | |
| Employer Name Costopoulos, Foster & Fields | | | | | | Occupation Attorney | | | | |
| Employer Mailing Address/Principal Place of City Business | | | | City | State Zip o | | | Zip Code (F | Plus 4) | |
| 831 Market Stree | et | | | Lemoyne | | PA | | 17043 | | |
| | | | | | | 1 | | | | |
| | | | | | | | 1 | | | |
| Full Name of Con Gerald Morrison | tributor | | | | мо | DAY | YEAR | | | |
| | tributor 188 Huckleberry Lane | | | | мо | DAY | YEAR | \$ | 500.00 | |
| Gerald Morrison Mailing Address | 188 Huckleberry Lane | State | Zij | p Code (Plus 4) | мо | DAY 28 | YEAR 2019 | \$ | 500.00 | |
| Gerald Morrison Mailing Address | 188 Huckleberry Lane | | | p Code (Plus 4) 7112 | | | | \$ | 500.00 | |
| Gerald Morrison Mailing Address | 188 Huckleberry Lane | State PA | | | | 28 | | \$ | 500.00 | |
| Gerald Morrison Mailing Address City Harrisbur Employer Name Employer Mailing | 188 Huckleberry Lane | State PA Sacks | | | 3 | 28 | 2019 | \$ Zip Code (F | | |
| Gerald Morrison Mailing Address City Harrisbur Employer Name | 188 Huckleberry Lane g Smigel, Anderson and Address/Principal Plac | State PA Sacks | | /112 | 3 | 28 tion A | 2019 | | | |
| Gerald Morrison Mailing Address City Harrisbur Employer Name Employer Mailing Business | 188 Huckleberry Lane g Smigel, Anderson and Address/Principal Plac reet | State PA Sacks | | 7112 City | 3 | 28 tion A | 2019 | Zip Code (F | | |
| Gerald Morrison Mailing Address City Harrisbur Employer Name Employer Mailing Business 4431 N. Front St Full Name of Con | 188 Huckleberry Lane g Smigel, Anderson and Address/Principal Plac reet | State PA Sacks | | 7112 City | - 3 Occupat | 28 tion A State PA | 2019 ttorney | Zip Code (F | | |
| Gerald Morrison Mailing Address City Harrisbur Employer Name Employer Mailing Business 4431 N. Front St Full Name of Con Corky Goldstein Mailing Address | 188 Huckleberry Lane g Smigel, Anderson and Address/Principal Plac reet tributor 2900 Parkside Lane | State PA Sacks | 17 | 7112 City | - 3 Occupat | 28 tion A State PA | 2019 ttorney | Zip Code (F 17110 | Plus 4) | |
| Gerald Morrison Mailing Address City Harrisbur Employer Name Employer Mailing Business 4431 N. Front St Full Name of Con Corky Goldstein Mailing | 188 Huckleberry Lane g Smigel, Anderson and Address/Principal Plac reet tributor 2900 Parkside Lane | State PA Sacks e of | 17 | City Harrisburg | 3 Occupat | 28 tion A State PA DAY | 2019 ttorney | Zip Code (F 17110 | Plus 4) | |
| Gerald Morrison Mailing Address City Harrisbur Employer Name Employer Mailing Business 4431 N. Front St Full Name of Con Corky Goldstein Mailing Address | 188 Huckleberry Lane g Smigel, Anderson and Address/Principal Plac reet tributor 2900 Parkside Lane | State PA Sacks e of State PA | 17 | City Harrisburg | 3 Occupat | 28 tion A State PA DAY 28 | 2019 ttorney | Zip Code (F 17110 | Plus 4) | |
| Gerald Morrison Mailing Address City Harrisbur Employer Name Employer Mailing Business 4431 N. Front St Full Name of Con Corky Goldstein Mailing Address City Harrisbur Employer Name | 188 Huckleberry Lane g Smigel, Anderson and Address/Principal Plac reet tributor 2900 Parkside Lane g | State PA Sacks e of State PA tein | 17 | City Harrisburg | MO 3 | 28 tion A State PA DAY 28 | 2019 ttorney YEAR 2019 | Zip Code (F 17110 | Plus 4) 500.00 | |

| Full Name of Contributor Ralph Picarelli | | | | мо | DAY | YEAR | |
|---|-----------------------|-----------|------------------|---------|----------------|------|-----------------------------------|
| Mailing 120 Shetland Driv Address | /e | | | | | | \$ 500.00 |
| City Red Lion | State | Zij | p Code (Plus 4) | 3 | 28 | 2019 | |
| | PA | 17 | 7356 | | | | |
| Employer Name | Occupation Retired | | | | | | |
| Employer Mailing Address/Principal Place of City Business | | | | | State | | Zip Code (Plus 4) |
| 120 Shetland Drive | | | Red Lion | | PA | | 17356 |
| Full Name of Contributor | | | | мо | DAY | YEAR | |
| Christylee Peck | | | | МО | | | |
| Mailing 162 Meadow Lane | 2 | | | | | | \$ 2,500.00 |
| City Mechanicsburg | State | Zij | p Code (Plus 4) | 2 | 19 | 2019 | |
| | PA | 17 | 7055 | | | | |
| Employer Name Cumberland Cour | ity | | | Occupat | t ion J | udge | |
| Employer Mailing Address/Principal Business | Place of | | City | | State | | Zip Code (Plus 4) |
| 1 Courthouse Square | | | Carlisle | | PA | | 17013 |
| Enter Grand Total of Part C on S | chedule I, Deta | iled Sumn | nary Page, Secti | on 3. | | | PAGE TOTAL \$ 10,500.00 |

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 Candidat | 2 | | Report | ing Perio | od | | | | |
|--------------------------------------|--------------------|--------------|---------|-----------|-----|------|----|---------|------|
| | | | From: | | | То: | | | |
| | | | | D | ATE | | | AMOUNT | Ē |
| Full Name | | | | мо | DAY | YEAR | | | |
| Mailing Address | | | | | | Γ | 4 | 5 | 0.00 |
| City | State | Zip Code (| Plus 4) | | | | | | |
| Receipt Description | | | | I | | | | | |
| Enter Grand Total of Part E on Sched | lule T. Detailed ! | Summary Page | Section | 4 | | | | PAGE TO | TAL |
| | ale 1, Detalled | cumury 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 Per | iod | |
|---|---------------|----------------------------|-----------------|
| PECK, CHRISTYLEE FOR SUPERIOR COURT | From: | <u>1/1/2019</u> To: | <u>4/1/2019</u> |
| 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) | \$ | 976.67 |
| 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 | | \$ | 976.67 |

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 | | 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 Schedule II, In-Kind Contributions Detailed Summary Page, PAGE TOTAL Section 2. | | | | | | TOTAL | | |
| | | | | | 4 | 6 | 0.00 | |

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

| Name of Filing Committee or Candidate | | | | Reporting Period | | | | | | | |
|--|---|------------------|------------|------------------|--------------------|---------------------|------------------------------|-----------------------------|-----------------------------|--------|--------|
| PECK, CHRISTYLEE FOR SUPERIOR COURT | | | | Fro | om: <u>1/1/201</u> | | <u>9</u> To: <u>4/1/2019</u> | | <u>4/1/2019</u> | | |
| | | | | | | | | DATE | | | AMOUNT |
| Full Name of Contributor | | | | | мо | | DAY | YEAR | | | |
| Republican Party of Pennsylvania | | | | | | | | / | | | |
| Mailing Address 112 State Street | | | | | | | | | | \$ | 344.88 |
| City Harrisburg State | | Zip Code(Plus 4) | | | | 2 | | 22 | 2019 | | |
| | PA 17101 | | | | | | | | | | |
| Employer of Contributor | | | | | Occupation | | | | | | |
| Employer Mailing Address/Principal Pla Business | Employer Mailing Address/Principal Place of | | City | | | Zip (4) | | Code(Plus | Description of Contribution | | |
| 112 State Street | | Harrist | ourg | PA | | | 171 | 01 | Campaign literature | | rature |
| Full Name of Contributor Republican Party of Pennsylvania | | | | | мо | | DAY | YEAR | | | |
| Mailing Address 112 State Street | | | | | | | | | \$ | 200.00 | |
| City Harrisburg | State | Zip Code(Plus 4) | | Plus 4) | | 3 | | 6 | 2019 | | |
| | PA | PA | | 17101 | | | | | | | |
| Employer of Contributor | | | | | Occupation | | | | | | |
| Employer Mailing Address/Principal Place of City Business | | | City State | | | Zip Code(Plus 4) | | Description of Contribution | | | |
| 112 State Street | | | Harrisburg | | | 171 | | 01 | filing fee | | |
| Full Name of Contributor Wayne Pecht | | | | мо | | DAY | YEAR | | | | |
| Mailing Address 35 High Ridge Trail | | | | | | | | | \$ | 431.79 | |
| City Mechanicsburg Stat | | State Zip Code(| | Plus 4) | | 2 | | 1 | 2019 | | |
| | РА | | 17050 | | | | | | | | |
| Employer of Contributor Smigel, Ar | derson and | Sacks | | | | Οςςι | upat | ion A | ttorney | | |
| Employer Mailing Address/Principal Place of Business | | | City State | | | Zip (| | Code(Plus | Description of Contribution | | |
| 4431 N. Front Street | | Harrisburg PA | | | 17110 | | 10 | Hotel accomodations | | | |

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

PAGE TOTAL

976.67

SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate | | | Reporting Period | | | | | |
|---|---------------------|-----------------------------------|---|------|--------------------------|------------|-----------------|--|
| PECK, CHRISTYLEE FOR SUPERIOR COURT | | | | | <u>1/2019</u> To: | | <u>4/1/2019</u> | |
| | | | | DATE | AMOUNT | | | |
| To Whom Paid Orison Publishers Inc | | | мо | DAY | YEAR | | | |
| Mailing Address P.O. Box 188 | | | | 18 | 2019 | \$ | 2,699.22 | |
| City Grantham | State PA | Zip Code (Plus 4) 17027 | Description of Expenditure Website, banners, cards | | | | | |
| To Whom Paid Lycoming County Republican Committee | | | мо | DAY | YEAR | | | |
| Mailing Address 460 Market Street, Suite 125 | | | 3 | 18 | 2019 | \$ | 150.00 | |
| City Williamsport | State PA | Zip Code (Plus 4) 17701 | Description of Expenditure Advertising | | | | | |
| To Whom Paid Upper St. Clair Republican Committee | | | | DAY | YEAR | | | |
| Mailing Address 470 Miranda Drive | | | 3 | 24 | 2019 | \$ | 250.00 | |
| City Upper St. Clair | State PA | Zip Code (Plus 4) 15241 | Description of Expenditure Advertising | | | | | |
| Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. | | | | | | PAGE TOTAL | | |
| Enter Grand Total of Expendi | tures on Page 1, Re | port Cover Page, Item I | J. | | | \$ | 3,099.22 | |