

# Campaign Finance Report

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

<b>Filer Identification Number :</b>		20180483		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>		
<b>Name of Filing Committee, Candidate or Lobbyist:</b> AKM FOR JUDGE												
<b>Street Address:</b> PO BOX 444												
<b>City:</b> ALLENTOWN						<b>State:</b> PA			<b>Zip Code:</b> 18105			
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY PRIMARY	POST-	3. X	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2019	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>				
<b>Name of Office Sought by Candidate:</b>						<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
JUDGE OF THE COURT OF COMMON PLEAS						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	31	CPJ	R/D	39
						11	5	2019	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
		5	7	2019		6	10	2019				
<b>A. Amount Brought Forward From Last Report</b>						\$ 31,795.11						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 1,755.00						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 33,550.11						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 31,982.37						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 1,567.74						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$ 800.00						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$ 10,025.00						

## AFFIDAVIT SECTION

**PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.**

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.**

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
**Detailed Summary Page**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
AKM FOR JUDGE	From: <u>5/7/2019</u> To: <u>6/10/2019</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 295.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 1,160.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 1,160.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 0.00
<b>All Other Contributions (Part D)</b>	\$ 300.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 300.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)</b>	\$ 1,755.00
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**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)**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
AKM FOR JUDGE	From: <u>5/7/2019</u> To: <u>6/10/2019</u>

<b>DATE</b>	<b>AMOUNT</b>
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<b>Full Name of Contributor</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
Jan Heller				
<b>Mailing Address</b> 4641 Old Bethlehem Pike				
<b>City</b> Bethlehem	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18015	5 8 2019	

<b>Full Name of Contributor</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 70.00
Margie Ferry				
<b>Mailing Address</b> 4908 South Hedgerow Dr				
<b>City</b> Allentown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18103	5 16 2019	

<b>Full Name of Contributor</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 200.00
Sagrario Mieses-Cole				
<b>Mailing Address</b> 1261 Country Club Rd				
<b>City</b> Wescosville	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18106	5 15 2019	

<b>Full Name of Contributor</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 70.00
Michele Shoudt				
<b>Mailing Address</b> 445 Wild Mint Lane				
<b>City</b> Allentown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18104	5 29 2019	

<b>Full Name of Contributor</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 70.00
Leonor Sheedy				
<b>Mailing Address</b> 3676 Alma Dr				
<b>City</b> Allentown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18103	5 29 2019	

Full Name of Contributor Delores Butz			MO	DAY	YEAR	\$ 200.00
Mailing Address 3633 Trexler Blvd			5	29	2019	
City Allentown	State PA	Zip Code (Plus 4) 18104				

Full Name of Contributor William Tuffiash			MO	DAY	YEAR	\$ 200.00
Mailing Address 1040 Whitman St			5	29	2019	
City Allentown	State PA	Zip Code (Plus 4) 18104				

Full Name of Contributor Scott Wilhelm			MO	DAY	YEAR	\$ 250.00
Mailing Address 2 Hill Hollow Rd			5	29	2019	
City Milford	State NJ	Zip Code (Plus 4) 08848				

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

**PAGE TOTAL**

\$ 1,160.00

**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:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

<b>PAGE TOTAL</b>
\$ 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.)**

<b>Name of Filing Committee or Candidate</b>  AKM FOR JUDGE	<b>Reporting Period</b>  <b>From:</b> <u>5/7/2019</u> <b>To:</b> <u>6/10/2019</u>
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				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
Debbie Thomas							
<b>Mailing Address</b> 5372 Northwood Dr				5	20	2019	\$      300.00
<b>City</b> Center Valley	<b>State</b>  PA	<b>Zip Code (Plus 4)</b>  18034					
<b>Employer Name</b> Sanofi				<b>Occupation</b> Sr Director GRA CP MD			
<b>Employer Mailing Address/Principal Place of Business</b>  55 Corporate Dr			<b>City</b>  Bridgewater	<b>State</b>  NJ	<b>Zip Code (Plus 4)</b>  08807		

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

<b>PAGE TOTAL</b>
\$      300.00

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	Reporting Period
	From: To:

			DATE		AMOUNT	
Full Name			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Receipt Description						

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

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
AKM FOR JUDGE		From: <u>5/7/2019</u> To: <u>6/10/2019</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period		(1)	\$ 0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period		(2)	\$ 0.00
<b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period		(3)	\$ 800.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)			\$ 800.00

**SCHEDULE II**  
**PART F**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OF \$50.01 TO \$250.00**

Name of Filing Committee or Candidate	Reporting Period  From: <span style="float: right;">To:</span>
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						<b>PAGE TOTAL</b>  \$ 0.00

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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
AKM FOR JUDGE	From: <u>5/7/2019</u> To: <u>6/10/2019</u>

					DATE		AMOUNT	
<b>Full Name of Contributor</b> Oscar Morffi					MO	DAY	YEAR	\$  400.00
<b>Mailing Address</b> 3394 Pheasant Hill Dr								
<b>City</b> Allentown	<b>State</b> PA	<b>Zip Code(Plus 4)</b> 18104						
<b>Employer of Contributor</b> LV Pediatric Assoc.					<b>Occupation</b> Pediatrician			
<b>Employer Mailing Address/Principal Place of Business</b> 401 N 17th St. Ste 307			<b>City</b> Allentown	<b>State</b> PA	<b>Zip Code(Plus 4)</b> 18104		<b>Description of Contribution</b> Stamps and Paper Products	
<b>Full Name of Contributor</b> Dominic Germano					MO	DAY	YEAR	\$  400.00
<b>Mailing Address</b> 448 N 17th St								
<b>City</b> Allentown	<b>State</b> PA	<b>Zip Code(Plus 4)</b> 18104						
<b>Employer of Contributor</b> The Main Gate					<b>Occupation</b> Owner			
<b>Employer Mailing Address/Principal Place of Business</b> 448 N 17th St			<b>City</b> Allentown	<b>State</b> PA	<b>Zip Code(Plus 4)</b> 18104		<b>Description of Contribution</b> Food for May 21 st Watch Party	
<b>Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.</b>								<b>PAGE TOTAL</b> 800.00

# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
AKM FOR JUDGE	From <u>5/7/2019</u> To: <u>6/10/2019</u>

DATE				AMOUNT		
To Whom Paid LaMega Spanish Radio			MO	DAY	YEAR	\$ 846.00
Mailing Address 1125 Colorado St			5	8	2019	
City Allentown	State PA	Zip Code (Plus 4) 18103	Description of Expenditure Radio Ads			
To Whom Paid Mercersburg Printing			MO	DAY	YEAR	\$ 11,506.68
Mailing Address 9964 Buchanan Trail West			5	9	2019	
City Mercersburg	State PA	Zip Code (Plus 4) 17236	Description of Expenditure Mailers and Postage			
To Whom Paid Engage Media LLC			MO	DAY	YEAR	\$ 2,000.00
Mailing Address 606 W Edwin St			5	13	2019	
City Williamsport	State PA	Zip Code (Plus 4) 17701	Description of Expenditure Digital Advertising			
To Whom Paid Cheryl H Corsa			MO	DAY	YEAR	\$ 391.68
Mailing Address 1290 Stark Rd			5	14	2019	
City Bethlehem	State PA	Zip Code (Plus 4) 18017	Description of Expenditure Personalized Thank you postcards			
To Whom Paid Fulcrum Campaign Strategies			MO	DAY	YEAR	\$ 15,418.60
Mailing Address 655 Madison Ave 12th Floor			5	20	2019	
City New York	State NY	Zip Code (Plus 4) 10022	Description of Expenditure Mailers			

To Whom Paid Fulcrum Campaign Strategies			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 655 Madison Ave 12th Floor			5	23	2019	
City New York	State NY	Zip Code (Plus 4) 10022	Description of Expenditure May Professional Services			
To Whom Paid FLS Connect			MO	DAY	YEAR	\$ 606.50
Mailing Address 7300 Hudson Blvd Ste 270			5	29	2019	
City Saint Paul	State MN	Zip Code (Plus 4) 55128	Description of Expenditure Auto Calls			
To Whom Paid Buckno Lisicky & Company			MO	DAY	YEAR	\$ 176.61
Mailing Address 645 Hamilton St. Ste 204			6	4	2019	
City Allentown	State PA	Zip Code (Plus 4) 18101	Description of Expenditure Postage Reimbursement			
To Whom Paid Anedot Inc			MO	DAY	YEAR	\$ 4.30
Mailing Address 1920 McKinney Ave 7th Floor			5	13	2019	
City Dallas	State TN	Zip Code (Plus 4) 75201	Description of Expenditure Website Contibution Fee			
To Whom Paid Anedot Inc			MO	DAY	YEAR	\$ 1.70
Mailing Address 1920 McKinney Ave 7th Floor			5	14	2019	
City Dallas	State TN	Zip Code (Plus 4) 75201	Description of Expenditure Website Contibution Fee			
To Whom Paid Anedot Inc			MO	DAY	YEAR	\$ 11.40
Mailing Address 1920 McKinney Ave 7th Floor			5	17	2019	
City Dallas	State TN	Zip Code (Plus 4) 75201	Description of Expenditure Website Contibution Fee			

<b>To Whom Paid</b> Anedot Inc			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 2.30
<b>Mailing Address</b> 1920 McKinney Ave 7th Floor			5	21	2019	
<b>City</b> Dallas	<b>State</b> TN	<b>Zip Code (Plus 4)</b> 75201	<b>Description of Expenditure</b> Website Contribution Fee			

  

<b>To Whom Paid</b> Anedot Inc			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 12.30
<b>Mailing Address</b> 1920 McKinney Ave 7th Floor			5	23	2019	
<b>City</b> Dallas	<b>State</b> TN	<b>Zip Code (Plus 4)</b> 75201	<b>Description of Expenditure</b> Website Contribution Fee			

  

<b>To Whom Paid</b> Anedot Inc			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 4.30
<b>Mailing Address</b> 1920 McKinney Ave 7th Floor			5	7	2019	
<b>City</b> Dallas	<b>State</b> TN	<b>Zip Code (Plus 4)</b> 75201	<b>Description of Expenditure</b> Website Contribution Fee			

  

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 31,982.37

**SCHEDULE IV**

**STATEMENT OF UNPAID DEBTS**

**Use this Section to itemize all unpaid debts and obligations  
which are outstanding at the end of the reporting period**

<b>Name of Filing Committee or Candidate</b>  AKM FOR JUDGE				<b>Reporting Period</b>  From: <u>5/7/2019</u> To: <u>6/10/2019</u>			
							<b>Outstanding Balance of Debt</b>
				<b>DATE</b>			
<b>Name of Creditor</b> Anna-Kristie Morffi Marks				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 2862 Allison Lane				11	20	2018	\$      10,025.00
<b>City</b> Allentown		<b>State</b> PA		<b>Zip Code (Plus 4)</b> 18104		<b>Description of Debt</b> Loan/ Open Campaign Account	
<b>Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.</b>							<b>PAGE TOTAL</b>  \$      10,025.00