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 201	.90125				port ed B		CAI	NDI	DAIE		COM	AITTEE	~	LUBI	51151	
Name of Filing C	ommittee, Cand	idate or L	obbyist:	,	FRII	END	S OF	BRIA	N SA	AMUEL	MAL	KIN FO	R JUDG	E			
Street Address:	PO BOX 353	\															
City:	INGOMAR							State	e:	PA			Zip Co	de: 15	5127		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA' PRIMARY	Y PRE-	-	2. X	30 DA PRIMA		Р	POST-	3.		AMENDI REPORT		Yes	No	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA' ELECTION	Y PRE	-	5.	30 DA		Р	POST-	6.		TERMIN. REPORT		Yes	No	✓
report type)	ANNUAL REPOR	T 7.	Year 2019					NG ME					PAPER		\checkmark	DISKE	TTE
Name of Office S	ought by Candid	ate:			_			DAT	ΕO	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code
JUDGE OF THE	COURT OF COM	MON PLE	AS - ALLEG	HENY	,			МО		DAY	YE	AR	5	СРЈА	DEN	1	02
JODGE OF THE	COURT OF COM	MON TEE	ALLEO)					11		5	2019		(SEE IN	STRUCTI	ONS FOR C	CODES)
Summary of		МО	DAY	YEAR	1			МО		DAY	YI	AR	FC	OR OFFI	CE USE	ONLY	
Expenditures	trom:		1 1	20	019	Т	0		5		6	2019					
A. Amount Bro	ught Forward Fro	om Last F	Report				\$					0.00					
B. Total Moneta	ary Contributions	s And Red	eipts (From	Sche	dule	eI)	\$				4,0	93.00					
C. Total Funds	Available (Sum (Of Lines A	and B)				\$				4,0	93.00					
D. Total Expend	ditures (From Sc	hedule II	II)				\$				1	.08.00					
E. Ending Cash	Balance (Subtra	ct Line D	From Line (C)			\$				3,9	85.00					
F. Value Of In-	Kind Contributio	ns Receiv	ed (From Se	chedu	le II	()	\$					0.00					
G. Unpaid Debt	s And Obligation	s (From	Schedule IV)			\$				3,1	.97.70					
				AFF	IDA	٩VI	T SE	CTIC	NC								
PART I - If this is I swear (or affirm)	that this report, ir		_							-		_			wledge	and belie	ef , true
correct and comple		nie.															
	day of		_ 20				-				S	ignature	of Perso	n Submit	ting Rep	oort	
	Signa	ture					-						Prin	ited Name			
My Commission Ex	·						_		•				Ema	iil			
	МО	D	AY	YR						Are	ea Coc	le	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	•					•				_					- 4		4000
I swear (or affirm) No 320) as amende	ed.	•	edge and bell	er this	poiii	ticai	comm	ittee n	as n	ot viola	tea an	y provis	ions or th	e act of J	une 3,1	937 (P.L.	. 1333,
Sworn to and subsc	ribed before me thi day of	S	20									s	ignature	of Candid	ate		
							_						Printe	ed Name			
My Commission Exp	Signature ires						-						Ema	nil			
	мо	D	AY	YR			-			Area	Code		D	aytime T	elephor	ie Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF BRIAN SAMUEL MALKIN FOR JUDGE	From:	1/1/201	9 To :	5/6/2019
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	25.00
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)	\$	1,250.00		
TOTAL for the Reporting	\$	1,250.00		
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)			\$	2,818.00
TOTAL for the Reporting) Period	(3)	\$	2,818.00
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			\$	4,093.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate valu	-			-			
Name of Filing Committee or Candidate			Reporting Period					
			Fro	om:		То	:	
		L			DATE			AMOUNT
Full Name of Contribut	ing Committee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	•	•				-		DAGE TOTAL

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

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 Filing Committee or Candidate Repo			orting Pe	eriod					
FRIENDS OF BRIAN SAMUEL MALKIN	FOR JUDGE		Froi	m:	1/1/2	2019 To	<u>5/6/2019</u>		
				DATE AMOUNT					
Full Name of Contributor Gary Gushard				МО	DAY	YEAR			
Mailing Address 8179 Post Road						\$	100.00		
City Allison Park	State PA	Zip Code (Plus 4) 15101		2	5	2019			
Full Name of Contributor Bruce Rende				МО	DAY	YEAR			
Mailing Address 500 Grant Street				_	_		\$	100.00	
City Pittsburgh	State PA	Zip Code (Plus 4) 15219		2	5	2019			
Full Name of Contributor Darryn Zawitz				МО	DAY	YEAR			
Mailing Address 215 Tamarack Driv	/e						\$	150.00	
City Mars	State PA	Zip Code (Plus 4) 16046		2	5	2019			
Full Name of Contributor Vincent Quatrini				МО	DAY	YEAR			
Mailing Address 1401 Delview Dr City Greenshurg	State	Zip Code (Plus 4)		2	7	2019	\$	250.00	
City Greensburg	PA	15601							
Full Name of Contributor Peter Friday				МО	DAY	YEAR			
Mailing Address 1409 McFarland Rd							\$	100.00	
City Pittsburgh	State PA	Zip Code (Plus 4) 15216		2	19	2019			

Full Name of Contribution	Full Name of Contributor Paige Lin					YEAR	
Mailing Address 2601 Brandt School Road			3	1	2019	\$ 250.00	
City Wexford	Sta PA		Zip Code (Plus 4) 15090	3	1	2019	
Full Name of Contribution	utor			МО	DAY	YEAR	
Mailing Address	409 Broad Street						\$ 200.00
City Sewickley	Sta PA		Zip Code (Plus 4) 15143	4	2	2019	
Full Name of Contribution	utor			МО	DAY	YEAR	
Mailing Address 150 Broadway						\$ 100.00	
City Cambridge	Sta MA		Zip Code (Plus 4) 02142	4	21	2019	

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

PAGE TOTAL \$ 1,250.00

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				g 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 Sche	dule 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	Name of Filing Committee or Candidate Repo				eporting Period					
FRIENDS OF BRIAN SAMUEL MALKIN	FOR JUDGE			Fror	m:	<u>1/1/2</u>	019 T o	5: <u>5/6/2019</u>		
			•		D	ATE		АМО	DUNT	
Full Name of Contributor Alexandar D. Malich					МО	DAY	YEAR			
Mailing 133 Aberdeen Drive								\$	500.00	
City Cranberry	State PA		p Code (Plus 5066	4)	5	4	2019			
Employer Name Self Employed	•	•			Occupat	tion A	ttorney	,		
Employer Mailing Address/Principal Pla Business	ce of		City		•	State		Zip Code	(Plus 4)	
133 Aberdeen Drive			Cranberry	y		PA		16066		
Full Name of Contributor Richard Shenkan					мо	DAY	YEAR			
Mailing 6550 Lakeshore Stre	et				_			\$	818.00	
City West Bloomfield	State MI		p Code (Plus 3323	4)	2	19	2019			
Employer Name Shenkan Law Offices	<u> </u>				Occupat	l tion	ttorney	,		
Employer Mailing Address/Principal Pla Business	ce of		City			State		Zip Code	(Plus 4)	
Full Name of Contributor Lonnie T. Parker, III.					МО	DAY	YEAR			
Mailing 9618 Frankstown Rd								\$	1,000.00	
City Pittsburgh	State PA		p Code (Plus 5235	4)	2	18	2019			
Employer Name Pyramid Designs			Occupat	tion	Consulta	nnt				
Employer Mailing Address/Principal Pla Business	ce of		City		•	State		Zip Code	(Plus 4)	

Full Name of Contributor Craig Malkin					DAY	YEAR	
Mailing Address 150 Radcliffe Rd				_	_		\$ 500.00
City Belmont		State MA	Zip Code (Plus 4) 02478	2	5	2019	
Employer Name	YM Psychotherapy			Occupat	tion P	sycholog	gist
Employer Mailing Address/Principal Place of Business			City	•	State		Zip Code (Plus 4)

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

PAGE TOTAL
\$ 2,818.00

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	Candidate		Report	ting Perio	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	-	•		•	•			
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			,	PAGE TOTAL
	m Schedule 1, Betailet	<i>z</i> 50a. y 1 dgc,	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		
FRIENDS OF BRIAN SAMUEL MALKIN FOR JUDGE	From:	<u>1/1/2019</u> To:	<u>5/6/2019</u>
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 Candidate Re			Reportin	g Period			
			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 S	Schedule II. In-Kir	nd Contributions Deta	iled Sum	mary Pag	ae. F		PAGE TOTAL
Section 2.				,;	,-,	\$	
1						Ψ	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Reporting Period					
					Fron	n:		То:		
							DATE			AMOUNT
Full Name of Contributor						МО	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(Plus	s 4)						
Employer of Contributor Occupation							tion			
Employer Mailing Address/Principal Place of Business		City State		tate		Zip Code(Plus 4)		Description of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed								PAGE TOTAL		
Summary Page, Section 3.	-									0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate				Reporting Period						
FRIENDS OF BRIAN SAMUEL MALKIN FOR JUDGE			From	<u>1/</u>	1/2019	То:	<u>5/6/2019</u>			
				DATE			AMOUNT			
To Whom Paid			мо	DAY	YEAR					
First Commonwealth Bank										
Mailing Address PO Box 400)		1	12	2019	\$	2.00			
City Indiana	State	Zip Code (Plus 4)	Descrip	tion of Ex	penditure	<u>'</u>				
	PA	15701	Bank F	ee						
To Whom Paid First Commonwealth Bank				DAY	YEAR					
Mailing Address PO Box 400			2	12	2019	\$ \$	2.00			
City Indiana	State	Zip Code (Plus 4)	Descrip	tion of Ex	penditure	:				
	PA	15701	Bank F	ees						
To Whom Paid First Commonwealth Bank			мо	DAY	YEAR					
Mailing Address PO Box 400			3	11	2019	\$	2.00			
City Indiana	State	Zip Code (Plus 4)	Description of Expenditure			<u> </u>				
	PA	15701	Bank F	ees						
To Whom Paid Department of State - Pennsylvania				DAY	YEAR					
Mailing Address 302 North Office Building			3	11	2019	\$	100.00			
City Harrisburg	State	Zip Code (Plus 4)	Descrip	Description of Expenditure						
Š	PA	17120	Nomination Petition Fee							
To Whom Paid First Commonwealth Bank			мо	DAY	YEAR					
Mailing Address PO Box 400)		4	12	2019	\$	2.00			
City Indiana	State	Zip Code (Plus 4)	Description of Expenditure Bank Fee			<u> </u>				
	PA	15701								
							PAGE TOTAL			
Enter Grand Total of Expen	ditures on Page 1, Re	port Cover Page, Item I) .			1				

STATEMENT OF UNPAID DEBTS

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

Name of Filing Committee or Candidate			Reporting Period						
FRIENDS OF BRIAN SAMUEL MALKIN FOR JUDGE From			From:	<u>1/1/2019</u> To:			5/6/2019		
					DATE			Outstanding Balance of Debt	
Name of Creditor BRIAN SAMUEL MALKIN					DAY	YEAR			
Mailing Address 2347 NEVIN DRIVE					30	2019	\$	3,197.70	
City Pittsburgh	State PA	Zip Code (PI 15237	us 4)	Description of Debt CANDIDATE LOAN-EXPENSES PAID					
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.								PAGE TOTAL \$ 3,197.70	