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	9C0169			Repo Filed			CANDI	NDIDATE COMMITTEE LOBBYIST								
Name of Filing C	Committee, Candid	late or L	obbyist:	•	BRIAN	SAM	UE	L MALKI	.N								
Street Address:																	
City:	_						•	State:				Zip Code	e: 15	237			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2.	30 E PRII			POST-	3. X		AMENDME REPORT?	NT	Yes		No	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDATELECTION	Y PRE	- 5.	30 E			OST-	6.		TERMINAT REPORT?	ΓΙΟΝ	Yes	 	No	\
report type)	ANNUAL REPORT	7.	Year 2019				LING METHOD PAPER) CHECK ONE					V	DIS	ETTE			
Name of Office S	Sought by Candida	ate:	•				ľ	DATE O	F ELE	CTIC	N	District Number	Office Code	Pai	ty Co	le Cou	
							Ī	мо	DAY	YI	EAR	5	СРЈА	DEI	1	02	
JUDGE OF THE	COURT OF COM	10N PLE	AS - ALLEG	SHENY			ľ	11		5	2019		(SEE IN	STRUCTI	ONS FO	R CODES	5)
Summary of		МО	DAY	YEAR				мо	DAY	Y	EAR	FOF	OFFI	CE USE	ONL	Y	
Expenditures	from:		5 7	20	019	то		6		10	2019						
A. Amount Bro	ught Forward Fro	m Last R	eport		·		\$			(3,1	97.70)						
B. Total Moneta	ary Contributions	And Rec	eipts (From	Sche	dule I)	\$			3,	197.70						
C. Total Funds Available (Sum Of Lines A and B) \$ 0.00																	
D. Total Expenditures (From Schedule III) \$ 0.00																	
E. Ending Cash Balance (Subtract Line D From Line C)							\$				0.00						
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedul	e II)		\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	')			\$				0.00						
				AFF	IDAV	IT S	EC	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign	here. 1	f this	is a Ca	and	didate re	port, e	candi	date sig	ın here.					
I swear (or affirm) correct and comple) that this report, inc ete.	:luding the	e attached scl	hedules	filed o	n pape	er o	r by electi	ronic m	edium	, are to t	he best of	my knov	wledge	and b	elief , tı	rue
Sworn to and subs	cribed before me thi	s	20							5	Signature	of Person	Submit	ting Re	ort		_
	Signati	ıre				_						Printe	ed Name	•			_
My Commission Ex	-							•				Email					-
	мо	D	AY	YR					Ar	ea Co	le	Daytime	Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized	Comm	ittee,	Candi	ida	te shall :	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowle	edge and beli	ef this	politica	l com	mit	tee has n	ot viola	ted ar	ıy provisi	ions of the	act of J	une 3,1	937 (F	P.L. 133	з,
Sworn to and subsc	ribed before me this	1									Si	ignature of	Candid	ate			- $ $
	day of ————————————————————————————————————					_						Printed	Name				_
	Signature					_											_
My Commission Exp	_											Email					
	МО	D.	AY	YR					Area	Code		Day	time T	elephor	ne Nun	ıber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
BRIAN SAMUEL MALKIN	From:	<u>5/7/201</u>	<u>9</u> To:	6/10/2019
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)			\$	3,197.70
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting) Period	(3)	\$	3,197.70
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	J Period	(4)	\$	0.00
			I	
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			\$	3,197.70

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

		nittees period.						
			From:			То	:	
					DATE			AMOUNT
Full Name of Contribut	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	!	I	!		<u> </u>			DAGE 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 Fining Committee of Camulate			Rep Fro					
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	1					

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 Candida	nme of Filing Committee or Candidate		Reporting	g Period				
BRIAN SAMUEL MALKIN			From:	<u>5</u> /	77/2019	То:	<u>6</u>	5/10/2019
				DA	TE		А	MOUNT
	Full Name of Contributing Committee Friends of Brian Samuel Malkin for Judge Mailing Address				DAY	YEAR		
Mailing Address 2347 Nevin Drive	c/o Christina E. I	<u>.</u>		5	24	2010	\$	1,997.48
City Pittsburgh	State PA	Zip Code 15237	Zip Code (Plus 4) 15237		24	2019		
Full Name of Contributing Committee Friends of Brian Samuel Malkin for J				МО	DAY	YEAR		
Mailing Address 2347 Nevin Drive	c/o Christina E. I	Malkin					\$	1,200.22
City Pittsburgh	State PA	Zip Code 15237	e (Plus 4)	6	6	2019		
				_			1	PAGE TOTAL
Enter Grand Total of Part C on Sci	r Grand Total of Part C on Schedule I, Detailed Summary Page, Sect						+	2 4 2 7 7 2

3,197.70

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.)

ame of Filing Committee or Candidate		Rep	orting Pe	riod						
				Fror	n:		To	o:		
					D	ATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address City State Zip Code (Plus 4)								\$		0.00
City	State	Zi	p Code (Plus	4)						
Employer Name		•			Occupation					
Employer Mailing Address/Principal Pla Business	ce of		City			State		Zip C	ode (Plus	4)
Enter Grand Total of Part C on Scho	edule I, Detail	led Sumr	mary Page,	Section	on 3.			\$	PAGE TO	TAL 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	Candidate		Report	ting Perio	od			
			From:			To:		
				D	ATE		АМ	IOUNT
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 I. Detailed	d Summary Page.	Section	4.			PA	GE TOTAL
Stand 1 stand of 1 are 2		a cammary rage,					\$	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	1	
BRIAN SAMUEL MALKIN	From:	<u>5/7/2019</u> To:	6/10/2019
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER 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			Reporting	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 Schedule II, In-Kind Contributions Detail Section 2.			ailed Summary Page,			PAGE TOTAL		
Section 2.						\$	0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candida	ame of Filing Committee or Candidate				Re	porting	Period				
					Fro	m:		То	:		
							DATE				AMOUNT
Full Name of Contributor						мо	DAY	YEAR	1		
Mailing Address									\$	0.00	
City	State		Zip Code(F	Plus 4)							
Employer of Contributor	•		•			Occupation					
Employer Mailing Address/Principal P Business	lace of	City		State		Zip 4)	Code(Plus	Desc	ripti	on of C	ontribution
Enter Grand Total of Part G on Schedule II, In-Kind Contributions De			etailed				PAGE TOTAL				
Summary Page, Section 3.							0.00				

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or	Candidate		Reporti					
			From			То:		
				DATE			AMOUNT	
To Whom Paid	МО	DAY	YEAR					
Mailing Address						\$	0.00	
City	State	Zip Code (Plus 4)	Description of Expenditure					
							PAGE TOTAL	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item						\$	0.00	