

Campaign Finance Report

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

Filer Identification Number :		2019C0137		Report Filed By :		CANDIDATE		<input checked="" type="checkbox"/>		COMMITTEE		<input type="checkbox"/>		LOBBYIST		<input type="checkbox"/>			
Name of Filing Committee, Candidate or Lobbyist:																		MICHELE HANGLEY	
Street Address:																			
City:										State:				Zip Code: 19147					
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY PRIMARY	POST-	3.	AMENDMENT REPORT?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>							
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6.	TERMINATION REPORT?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>							
	ANNUAL REPORT	7.	Year 2019			FILING METHOD () CHECK ONE		PAPER		<input checked="" type="checkbox"/>	DISKETTE								
Name of Office Sought by Candidate:										DATE OF ELECTION			District Number	Office Code	Party Code	County Code			
JUDGE OF THE COURT OF COMMON PLEAS										MO	DAY	YEAR	1	CPJ	DEM				
										11	5	2019	(SEE INSTRUCTIONS FOR CODES)						
Summary of Receipts and Expenditures from:				MO	DAY	YEAR	TO		MO	DAY	YEAR	FOR OFFICE USE ONLY							
				4	2	2019			5	6	2019								
A. Amount Brought Forward From Last Report								\$ 0.00											
B. Total Monetary Contributions And Receipts (From Schedule I)								\$ 0.00											
C. Total Funds Available (Sum Of Lines A and B)								\$ 0.00											
D. Total Expenditures (From Schedule III)								\$ 1,031.15											
E. Ending Cash Balance (Subtract Line D From Line C)								\$ (1,031.15)											
F. Value Of In-Kind Contributions Received (From Schedule II)								\$ 0.00											
G. Unpaid Debts And Obligations (From Schedule IV)								\$ 0.00											

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

Signature

Printed Name

My Commission Expires

Email

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

Name of Filing Committee or Candidate	Reporting Period
MICHELE HANGLEY	From: <u>4/2/2019</u> To: <u>5/6/2019</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)	\$ 0.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 0.00

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 enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 0.00
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

PAGE TOTAL	
\$	0.00

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 Candidate	Reporting Period
	From: To:

DATE				AMOUNT
Full Name of Contributor	MO	DAY	YEAR	\$0.00
Mailing Address				
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:	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.

PAGE TOTAL
\$ 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.)**

Name of Filing Committee or Candidate	Reporting Period
	From: To:

			DATE			AMOUNT	
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					
Employer Name			Occupation				
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	
\$	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	Reporting Period From: To:
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			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.

PAGE TOTAL
\$ 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	
MICHELE HANGLEY		From: <u>4/2/2019</u> To: <u>5/6/2019</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period		(1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period		(2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period		(3)	\$ 0.00
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.)			\$ 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:
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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.						PAGE TOTAL \$ 0.00

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SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
MICHELE HANGLEY	From <u>4/2/2019</u> To: <u>5/6/2019</u>

DATE				AMOUNT
To Whom Paid 1ST WARD	MO	DAY	YEAR	
Mailing Address 6405 N 7TH STREET	2	6	2019	\$ 75.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19126	Description of Expenditure EVENT TICKET	
To Whom Paid 3RD WARD	MO	DAY	YEAR	
Mailing Address INFORMATION REQUESTED	2	9	2019	\$ 150.00
City PHILADELPHIA	State PA	Zip Code (Plus 4)	Description of Expenditure EVENT TICKET	
To Whom Paid 3RD WARD	MO	DAY	YEAR	
Mailing Address 720 E WILLARD STREET	2	20	2019	\$ 60.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19134	Description of Expenditure EVENT TICKET	
To Whom Paid FRIENDS OF 58TH WARD	MO	DAY	YEAR	
Mailing Address 10878 PARLIN TERRACE	2	21	2019	\$ 100.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19116	Description of Expenditure EVENT TICKET	
To Whom Paid 3RD WARD	MO	DAY	YEAR	
Mailing Address 720 E WILLARD STREET	2	22	2019	\$ 35.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19134	Description of Expenditure EVENT TICKET	

To Whom Paid TIMECYCLE			MO	DAY	YEAR	\$ 29.90
Mailing Address 230 N 2ND STREET, #1C			2	24	2019	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19106	Description of Expenditure MESSENGER FOR PALM CARD DELIVERY			
To Whom Paid 12TH WARD			MO	DAY	YEAR	\$ 100.00
Mailing Address 1335 E PALMER ST			2	24	2019	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19125	Description of Expenditure EVENT TICKET			
To Whom Paid LIMITED WARD LEADERS OF COLOR			MO	DAY	YEAR	\$ 100.00
Mailing Address INFORMATION REQUESTED			3	2	2019	
City PHILADELPHIA	State PA	Zip Code (Plus 4)	Description of Expenditure EVENT TICKET			
To Whom Paid UNITED WARD LEADERS OF COLOR			MO	DAY	YEAR	\$ 100.00
Mailing Address INFORMATION REQUESTED						
City PHILADELPHIA	State PA	Zip Code (Plus 4)	Description of Expenditure EVENT TICKET			
To Whom Paid USPS			MO	DAY	YEAR	\$ 101.25
Mailing Address 100 S BROAD STREET			3	8	2019	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19110	Description of Expenditure MONEY ORDER FOR FILING FEE			
To Whom Paid TIME CYCLE			MO	DAY	YEAR	\$ 700.00
Mailing Address 230 N 2ND STREET, #1C			3	31	2019	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19106	Description of Expenditure DELIVERY SERVICES			

To Whom Paid DEELEY 15			MO	DAY	YEAR	\$ 50.00
Mailing Address PO BOX 22535			4	7	2019	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19110	Description of Expenditure EVENT TICKET			

To Whom Paid 31TH WARD DEM COMMITTEE			MO	DAY	YEAR	\$ 50.00
Mailing Address 1521 NAUDAIN ST			4	17	2019	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19146	Description of Expenditure EVENT TICKET			

To Whom Paid THE UNIFIED JUDICIAL SYSTEM OF PENNSYLVANIA			MO	DAY	YEAR	\$ 73.00
Mailing Address 601 COMMONWEALTH AVE PO BOX 61260, SUITE 1500			4	8	2019	
City HARRISBURG	State PA	Zip Code (Plus 4) 17106	Description of Expenditure FILING FEE			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 1,724.15

