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	C0397				port ed B		CAN	IDI	DATE	DATE COMMITTEE LOBBYIST							
Name of Filing C	ommittee	, Candida	ate or Lo	obbyist:		KLE	ΞΙΝ,	ARNIE											
Street Address:																			
City:									State	:				Zip Code	: 15	5219			
TYPE OF REPORT	6TH TUES PRE-PRIM		1.	2ND FRIDAY PRIMARY	Y PRE	-	2.	30 DA PRIMA		Р	OST-	3.		AMENDME REPORT?	NT	Yes	No	•	/
(place X to the right of	6TH TUES		4.	2ND FRIDAY ELECTION	Y PRE	≣-	5. X	30 DA ELECT		Р	OST-	6.		TERMINAT REPORT?	ION	Yes	No		\
report type)	ANNUAL	REPORT	7.	Year 2019					CHECH					PAPER		√	DISKE	TTE	
Name of Office S	ought by	Candidat	te:						DATI	E O	F ELE	CTION		District Number	Office Code	Par	ty Code	Coun	
									МО		DAY	YEA	R	5	СРЈ			-	
JUDGE OF THE	COURT O	OF COMM	ON PLE	AS						11		5	2019		(SEE INS	TRUCTI	ONS FOR (CODES)
Summary of	•	and	МО	DAY	YEAR	R			МО		DAY	YEA	R	FOR	OFFIC	E USE	ONLY		
Expenditures	from:			9 17	2	019	Т	0		10	2	21	2019						
A. Amount Bro	ught Forw	ard Fron	ı Last R	eport				\$					0.00						
B. Total Moneta	ary Contri	butions A	And Rec	eipts (From	Sche	dule	e I)	\$				1,25	0.00						
C. Total Funds	Available	(Sum Of	Lines A	and B)				\$				1,25	0.00						
D. Total Expend	ditures (F	rom Sche	edule II	[)				\$				1,25	0.00						
E. Ending Cash	Balance ((Subtract	Line D	From Line (C)			\$					0.00						
F. Value Of In-	Kind Cont	ributions	Receive	ed (From So	chedu	le I	I)	\$					0.00						
G. Unpaid Debt	s And Obl	ligations	(From S	chedule IV)			\$					0.00		'				
					AFF	ID	AVI	T SE	CTIC	N									
PART I - If this is	a Commi	ittee repo	ort, trea	surer sign l	nere.	If th	nis is	a Can	didat	e re	port, c	andida	ite sig	gn here.					
I swear (or affirm) correct and comple		eport, incl	uding the	attached sch	nedule	s file	d on	paper (or by e	lectr	onic m	edium, a	re to	the best of I	my knov	/ledge	and beli	ef , trı	ue
Sworn to and subs	cribed befo day of	ore me this		20						,		Sig	nature	e of Person	Submitt	ing Rep	oort		_
		Signatur		-				-						Printe	d Name				_
My Commission Ex	pires	Signatui	e											Email					-
	ī	мо	D/	ΑΥ	YR						Are	ea Code		Daytime	Teleph	one Nu	mber		
Part II- If this is	a report	of a cand	lidate's	authorized	Comn	nitte	ee, C	andida	ate sh	all sign here.									
I swear (or affirm) No 320) as amende		e best of m	y knowle	edge and belie	ef this	poli	itical	commi	ittee ha	as no	ot viola	ted any	provis	ions of the	act of Ju	ine 3,1	937 (P.L	. 1333	3,
Sworn to and subsc		e me this									Signature of Candidate								-
	day of ——							-						Printed	Name				-
	s	ignature						-											_
My Commission Exp		-												Email					
	_	мо	D/	ΑΥ	YR	1		•			Area	Code		Day	time Te	lephor	e Numb	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
KLEIN, ARNIE	From:	<u>9/17/201</u>	<u>9</u> To:	10/21/2019
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	J 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	J 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)			\$	1,250.00
TOTAL for the Reporting	y Period	(3)	\$	1,250.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	0.00
			1	
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	1,250.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize on with an aggregate val							
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			Fr	om:		То	:	
					DATE			AMOUNT
Full Name of Contribution	ng Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
	•					-	Г	PAGE 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 Filling Committee of Candidate				Reporting Period From: To:				
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
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 Candi	date		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary 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.

Name of Filing Committee or Candidate

(Exclude contributions from political committees reported in Part C.)

Reporting Period

KLEIN, ARNIE			Fron	n:	9/17/	2019	Го:	10/21/2019
				D#	ATE			AMOUNT
Full Name of Contributor THE HONORABLE ARNOLD "ARNIE" I. K	LEIN			МО	DAY	YEAF	2	
Mailing Address 708 CITY - COUNTY BUILDING 414 GRANT STREET							\$	1,250.00
City PITTSBURGH	State PA	Zip Code (Plus 15219	4)	10	8	201	9	
Employer Name ALLEGHENY COUNTY	COURT OF COMMON	PLEAS		Occupat	ion	JUDGE		
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Co	de (Plus 4)
708 CITY - COUNTY BUILDING414 GRA	NT STREET	PITTSBU	RGH		PA		1521	9
Enter Grand Total of Part C on Sche	dule I, Detailed Su	mmary Page,	Section	on 3.			\$	1,250.00
						_	_	

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		Repor	ting Perio	od			
			From:			To:		
			•	D	ATE		А	MOUNT
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. Detailed	l Summary Page	Section	4			P/	AGE TOTAL
	Juliana 1/ Butanet	. January 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	d	
KLEIN, ARNIE	From:	<u>9/17/2019</u> To:	<u>10/21/2019</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, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candid	ate		Reporting	g 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 S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	те Г		PAGE TOTAL
Section 2.	ciicadic 11, 111 Kii	ia contributions beta	nea Sam	iiiiai y i aş	,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Reporting	Period				
					From:			То:		
						DAT	E			AMOUNT
Full Name of Contributor					мо	DAY	,	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(Plus	4)						
Employer of Contributor					Оссир	ation				
Employer Mailing Address/Principal Plad Business	ce of	City	Sta	ite	Zi 4)	p Code(Pl)	us	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, I	n-Kind	Contributions	Deta	ailed					PAGE TOTAL
Summary Page, Section 3.										0.00

PAGE TOTAL

1,250.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	Name of Filing Committee or Candidate				Reporting Period							
KLEIN, ARNIE				9/1	10/21/2019							
				DATE			AMOUNT					
To Whom Paid ACBA JUDICIAL EXCELLENCE CO	OMMITTEE		мо	DAY	YEAR							
Mailing Address 400 KOPPERS BUILDING 436 SEVENTH AVENUE				8	2019	\$	1,250.00					
City PITTSBURGH	State	Zip Code (Plus 4)	Description of Expenditure									
	l PA	15219	CONTR	IBUTION								

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.