# **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 :	Filer Identification 20190029 Number :								DATE		СОМІ	MITTEE	✓	LOBI	BYIST		
Name of Filing C	Committee, Candida	ate or L	obbyist:		PECK,	CHRI	STYLEE	FOI	R SUPE	ERIO	R COU	RT					
Street Address:	4431 NORTH	FRONT	ST														
City:	HARRISBURG						State:		PA			Zip Co	<b>de:</b> 17	110			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	AY PRE	- 2.	30 E PRIM	DAY MARY	PC	OST-	3.		AMENDN REPORT		Yes	N	D	$\checkmark$
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	AY PRE	- 5.		30 DAY PO ELECTION			OST- 6.		TERMINATION REPORT?		Yes	N	D	$\checkmark$
report type)	ANNUAL REPORT	7. <b>X</b>	<b>Year</b> 2020	)			ING MET ) CHECK					PAPER		$\checkmark$	DISK	TTE	
Name of Office S	Sought by Candidat	te:					DATE	OF	F ELEC	CTIO	N	District Number	Office Code	Par	ty Code	Cour	
	····						мо	I	DAY	YE	AR	-1	Code	REP	,	21	
								11		3	2020		(SEE INS	TRUCTI	ONS FOR	CODES	)
	Receipts and	мо	DAY	YEAR	1		мо		DAY	YE	AR	FC	R OFFIC	E USE	ONLY		
Expenditures from: 1 1 2020						то		12	3	1	2020						
A. Amount Bro	ught Forward Fron	n Last R	eport			:	\$			3,4	45.81	1					
B. Total Monetary Contributions And Receipts (From Schedule I)							\$				0.00						
C. Total Funds Available (Sum Of Lines A and B)							\$			3,4	45.81						
D. Total Expen	ditures (From Sche	edule II	I)			:	\$				0.00						
E. Ending Cash	Balance (Subtract	t Line D	From Line	C)			\$			3,4	45.81						
F. Value Of In-	Kind Contributions	Receiv	ed (From S	Schedu	le II)		\$				0.00						
G. Unpaid Deb	ts And Obligations	(From S	Schedule I\	/)			\$				0.00						
				AFF	IDAV	IT S	ECTIO	Ν									
PART I - If this is	s a Committee repo	ort, trea	surer sign	here.	If this i	s a Ca	andidate	rep	port, ca	andic	late sig	gn here.					
I swear (or affirm correct and compl	) that this report, incl ete.	uding the	e attached so	chedules	s filed o	ı pape	r or by el	ectro	onic me	dium,	are to f	the best o	f my knov	vledge	and bel	ief , tr	ue
Sworn to and subs	scribed before me this day of	5	20					-		s	ignature	e of Perso	n Submitt	ing Rep	oort		-
	Signatu	re				_		-				Prin	ted Name				-
My Commission E	-							-				Ema	il				-
	мо	D	AY	YR					Are	a Cod	e	Daytin	e Teleph	one Nu	mber		_
Part II- If this is	a report of a cand	lidate's	authorized	l Comn	nittee,	Candi	date sha	all s	ign he	re.							
I swear (or affirm) No 320) as amendo	) that to the best of n ed.	ny knowle	edge and bel	ief this	politica	l com	mittee ha	s no	ot violato	ed an	y provis	ions of th	e act of Ju	ine 3,1	937 (P.	L. 133	з,
Sworn to and subscribed before me this											s	ignature (	of Candida	ite			-
	day of							-				Printe	ed Name				-
. <u> </u>	Signature					_		_					•				_
My Commission Exp	bires											Ema	11				
	мо	D	AY	YR		_		-	Area C	Code		D	aytime Te	elephon	e Numl	per	-

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Detailed Sum	mary Page			
Name of Filing Committee or Candidate	Reporting	Period		
PECK, CHRISTYLEE FOR SUPERIOR COURT	From:	<u>1/1/202</u>	<u>0</u> To:	<u>12/31/2020</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contribut	or			
TOTAL for	the Reporting Period	(1)	\$	0.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Par	t 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 P totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Re			\$	0.00

# PART A

# **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Commit	tee or Candidate		Reporting	Period			
			From:	i cirioù	То		
			From:		10	•	
				DATE			AMOUNT
Full Name of Contributing	) Committee		мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
						Г	PAGE TOTAL
Enter Grand Total of Pa	art A on Schedule I, Detail	ed Summary Page, Sec	tion 2.			\$	0.00

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

\$

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 Candidat	e		Rep Fror	orting P	eriod	Τα	):		
					DATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4)							
								PAGE TOTAL	
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2. \$ 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 Candic	late		Reporting	J Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committe	ee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C on S	chedule I, Detail	led Summary Pa	age, Sectio	n 3.			\$	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:	То:

				D	ATE		АМС	DUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address	Address						\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion	-		
Employer Mailing Address/Principal Pl Business	ace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detai	led Sumr	nary Page, Secti	on 3.			PAG	GE TOTAL
	-						\$	0.00

I

## 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			Report	ing Perio	d				
			From:			То:			
				D	ATE			AMOUNT	1
Full Name				мо	DAY	YEAR	1		
Mailing Address							\$	5	0.00
City	State	Zip Code (	Plus 4)						
Receipt Description						•	•		
Enter Grand Total of Part E on Schedu	ule T. Detailed Summ	nary Page	Section	4				PAGE TO	TAL
		illi y i uge,	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		
PECK, CHRISTYLEE FOR SUPERIOR COURT	From:	<u>1/1/2020</u> <b>To:</b>	<u>12/31/2020</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 ( $amount totals from Boxes 1, 2, and 3; also enter on Page 1, Reports Cover Page, 2$		\$	0.00

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

# VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporting	g Period			
			From:			То:	
				DATE		АМО	UNT
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.			iled Sum	mary Pag	je,	PAGE	TOTAL
					4	6	0.00

0.00

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

Name of Filing Committee or Candidate					Rep	oorting P	Period			
					Fro	m:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address								\$	0.00	
City	State		Zip Code(P	Plus 4)						
Employer of Contributor						Occupat	tion			
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip 4)	Code(Plus	Descri	otion o	of Contribution
Enter Grand Total of Part G on Sch	Enter Grand Total of Part G on Schedule II, In-Kind Contributions Det				taile	d				PAGE TOTAL

Summary Page, Section 3.

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period				
						То:		
		AMOUNT						
To Whom Paid	мо	DAY	YEAR					
Mailing Address						\$	0.00	
City	City State Zip Code (Plus 4)			otion of Ex	penditure			
Enter Grand Total of Expenditures	on Page 1. Benert C	over Dage Item F	<b>`</b>				PAGE TOTAL	
	on Page 1, Report C	over Page, Item L				\$	0.00	