### **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 2	2021C0	0173			Rep File			CAN	DIC	DATE	<b>\</b>	co	MMITTE		LOB	BYIST		
Name of Filing C	ommittee, Ca	ndidat	e or Lo	bbyist:		YOR	GEY	-GIR	DY, GR	EG								•	
Street Address:																			
City:	_								State:					Zip Cod	<b>e:</b> 19	145			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1	•	2ND FRIDA' PRIMARY	Y PRE-	- 2	2.		30 DAY I PRIMARY			POST- 3. <b>X</b>			AMENDMENT REPORT?			0	<b>√</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	1 4		2ND FRIDA' ELECTION	Y PRE	- [	5.	30 DA		P	OST-	6.		TERMINA REPORT?		Yes	N	O	<b>\</b>
report type)	ANNUAL REP	<b>ORT</b> 7		<b>Year</b> 2021					IG MET CHECK		_			PAPER		<b>\</b>	DISK	ETTE	
Name of Office S	ought by Can	didate:	:			_			DATE	OF	ELE(	СТІ	ON	District Number	Office Code	Pai	ty Code	Code	
JUDGE OF THE	MUNICIPAL C	OURT							МО		DAY	Υ	'EAR	1	MCJ	DEI	1	51	
									1	11		2	2021		(SEE INS	STRUCTI	ONS FOR	CODES	)
Summary of Expenditures		d	МО	DAY	YEAR		_	_	МО		DAY	Y	/EAR	FO	R OFFIC	E USE	ONLY		
				5 4	20	021	Т	0		6		7	2021						
A. Amount Bro	ught Forward	From I	Last Re	eport				\$			(		013.00)						
B. Total Moneta	ary Contribution	ons An	d Rece	eipts (From	Sche	dule	I)	\$					300.00						
C. Total Funds Available (Sum Of Lines A and B) \$ (48,713.00)																			
D. Total Expenditures (From Schedule III)								1,	900.00										
E. Ending Cash	Balance (Sub	tract L	ine D	From Line (	C)			\$			(!	50,6	313.00)						
F. Value Of In-	Kind Contribut	tions R	Receive	ed (From Se	chedul	le II	)	\$					0.00						
G. Unpaid Debt	s And Obligat	ions (F	rom S	chedule IV	)			\$					0.00						
					AFF	IDA	VI	T SE	CTIO	N									
PART I - If this is	a Committee	report	t, treas	surer sign l	here. 1	[f thi	is is	a Car	ndidate	re	port, c	and	idate sig	ın here.					
I swear (or affirm) correct and comple		t, includ	ling the	attached scl	nedules	filed	d on	paper	or by ele	ectr	onic me	ediun	n, are to t	he best of	my knov	vledge	and bel	ief , tr	ue
Sworn to and subs	cribed before me day of	e this		20						-			Signature	of Persor	Submitt	ing Re	ort		_
	Sig	nature						-		-				Print	ed Name	ı			_
My Commission Ex	rpires							_		-				Emai	I				
	МО		DA	Υ	YR						Are	ea Co	ode	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a	candid	late's a	authorized	Comn	nitte	e, C	andid	ate sha	ıll s	ign he	ere.							
I swear (or affirm) No 320) as amende		t of my	knowle	dge and beli	ef this	polit	ical	comm	ittee has	s no	t violat	ted a	ny provis	ions of the	act of Ju	ıne 3,1	937 (P.	L. 133	3,
Sworn to and subsc	ribed before me day of	this		20									s	ignature o	f Candida	ate			_
								-						Printe	d Name				-
My Commission Exp	Signat	ture						-		Email						-			
, ээлинээн схр								_											_
	МО	)	DA	ΛY	YR						Area	Code	•	Da	ytime Te	elephor	e Num	ber	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
YORGEY-GIRDY, GREG	From:	<u>5/4/202</u>	<u>1</u> To:	6/7/2021
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)			\$	300.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	300.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	300.00

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	his Part to itemize only with an aggregate valu							
Name of Filing Committee or Candidate			Re	porting	Period			
			Fre	om:		То	:	
		-			DATE			AMOUNT
Full Name of Contribution	ng Committee			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

## 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		AN	4OUNT		
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 Candidate	Reporting Peri	Reporting Period						
YORGEY-GIRDY, GREG	From:	<u>5/4/2021</u>	То:	6/7/2021				

DATE AMOUNT

Full Name of Contributing Committee YORGEY- GIRDY FOR PHILLY	МО	DAY	YEAR			
Mailing Address 2041 SNYDER AVE	1	25	2024	\$ 300.00		
City PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19145	5	25	2021	

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

**PAGE TOTAL**300.00

### 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 Candida	Name of Filing Committee or Candidate					riod			
				Froi	n:		То	:	
					D	ATE		AN	MOUNT
Full Name of Contributor					МО	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus	i <b>4</b> )					
Employer Name	•	•			Occupa	tion	•	•	
Employer Mailing Address/Principal Business	Place of		City			State		Zip Code	e (Plus 4)
Enter Grand Total of Part C on So	chedule I, Deta	iled Sumr	mary Page,	Section	on 3.			P	AGE TOTAL
								•	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	bd			
			From:			To:		
				D	ATE		AM	OUNT
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			PAG	GE TOTAL
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	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	l	
YORGEY-GIRDY, GREG	From:	<u>5/4/2021</u> <b>To:</b>	<u>6/7/2021</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 Candidat	:e		Reporting	g Period				
			From:			То:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						<b>\$</b>	0.00	
City	State	Zip Code (Plus 4)						
Description of Contribution:								
Enter Grand Total of Part F on Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL	
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL	
						\$	0.00	

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidat	Name of Filing Committee or Candidate				Re	porting F	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									<b>\$</b>	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor			•			Occupa	tion		•	
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, I	In-Kind	Contributi	ons De	taile	ed				<b>PAGE TOTAL</b> 0.00

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period				
YORGEY-GIRDY, GREG			From	<u>5/4</u>	<u>4/2021</u>	То:	6/7/2021
			DATE				AMOUNT
To Whom Paid Yorgey-Girdy for Philly			мо	DAY	YEAR		
Mailing Address 2041 Snyder Ave			6	2	2021	\$	300.00
<b>City</b> Philadelphia	State PA	<b>Zip Code (Plus 4)</b> 19145	Description of Expenditure  Contribution to campaign				
<b>To Whom Paid</b> Yorgey-Girdy for Philly			МО	DAY	YEAR		
Mailing Address 2041 Snyder Ave			6	1	2021	\$	200.00
<b>City</b> Philadelphia	State PA	<b>Zip Code (Plus 4)</b> 19145	Description of Expenditure  Contribution to campaign				
<b>To Whom Paid</b> Yorgey-Girdy for Philly			МО	DAY	YEAR		
Mailing Address 2041 Snyder Ave			5	28	2021	\$	900.00
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19145	Description of Expenditure  Contribution to campaign				
To Whom Paid Yorgey-Girdy for Philly			МО	DAY	YEAR		
Mailing Address 2041 Snyder Ave			5	19	2021	\$	200.00
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19145	In-kind	otion of Exp contributington for 2	on to ca	mpaign:	Paid to Kimberly
<b>To Whom Paid</b> Kimberly Washington			мо	DAY	YEAR		
Mailing Address 1006 s Randolph St			5	19	2021	\$	300.00
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19147	Description of Expenditure GOTV				
Enter Grand Total of Expe	nditures on Page 1, Re	port Cover Page, Item [	).			\$	<b>PAGE TOTAL</b> 1,900.00