Campaign Finance Report

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

Filer Identificat	ion	2021	C0241			Repo Filed		CAND	IDATE	√	C	OMMITTE	E	LOB	BYIST		
Name of Filing (Committee	e, Candida	ate or L	obbvist:			-	RICK J									
Street Address:		.,		,													
City:								State:				Zip Code: 19118					
TYPE OF REPORT	6TH TUES PRE-PRIM		1.	2ND FRID PRIMARY	AY PRE	- 2.	30 D. PRIM		POST-	3. X		AMENDM REPORT?		Yes	No)	\checkmark
(place X to the right of	6TH TUES PRE-ELEC		4.	2ND FRID		E- 5.	30 D. ELEC		POST-	POST- 6.			TERMINATION REPORT?		No)	\checkmark
report type)	ANNUAL	REPORT	7.	Year 202:	1			NG METH CHECK (PAPER	PAPER		DISKE	TTE	
Name of Office Sought by Candidate:								DATE	OF ELE	СТІО	N	District Number	Office Code	Par	ty Code	Cour	
	JUDGE OF THE COURT OF COMMON PLEAS - PHILADELPHIA								DAY	YE	AR	1	CPJP	DEN	1	51	
Sobde of the cookt of common relast thickbeel hik								1	1	2	2021		(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of Expenditures		and	мо	DAY	YEAF			мо	DAY	YI	AR	FO	R OFFIC	E USE	ONLY		
	5 11 0111.			5	4 2	021	то		6	7	2021						
A. Amount Bro	-			-			\$			1	10.00	_					
B. Total Monet	ary Contri	ibutions /	And Rec	eipts (Fro	m Sche	dule I)	\$	5			0.00	-					
C. Total Funds		-		-			\$	5			0.00	4					
D. Total Expen				-			\$	5			0.00	4					
E. Ending Cash					-		\$				0.00	-					
F. Value Of In- G. Unpaid Deb				•		ie 11)	\$				0.00	-					
d. onpaid Deb		ingations		Schedule 1	-		\$				0.00						
PART I - If this i	c a Comm	ittaa ran	ort troo							candi	lata ci	an horo					
I swear (or affirm) that this r	-	•	-					• •			-	my know	vledge	and beli	ief , tr	ue
correct and compl Sworn to and subs		ore me this	:							s	ignatur	e of Persor	n Submitt	ing Rep	oort		_
							_					Print	ed Name				-
My Commission E	xpires	Signatu	re									Emai	1				-
	-	мо	D	AY	YR				A	rea Cod	e	Daytim	e Telepho	one Nu	mber		-
Part II- If this is	a report	of a cand	lidate's	authorize	d Comr	nittee,	Candic	late shal	l sign h	ere.							
I swear (or affirm) No 320) as amend		e best of m	ny knowl	edge and be	lief this	s politica	l comn	nittee has	not viola	ated an	y provis	sions of the	e act of Ju	ine 3,1	937 (P.I	133	3,
Sworn to and subso	cribed befor day of	e me this		20							9	Signature o	f Candida	ite			-
				-								Printe	d Name				-
My Commission Exp		Signature										Emai	1				-
	_	мо	D	AY	YR	L.	_		Area	Code		Da	ytime Te	elephor	e Numt	oer	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** From: <u>5/4/2021</u> **To:** MORAN, PATRICK J 6/7/2021 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 0.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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.

em:	DATE	То	:	
	DATE			
				AMOUNT
мо	DAY	YEAR		
			\$	0.00
			Г	PAGE TOTAL
M	10	10 DAY	10 DAY YEAR	

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

\$

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 Candidat	e		Rep	orting P	eriod				
From: To:):		
					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 S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	<u>.</u>		\$	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 Can	Name of Filing Committee or Candidate			Reporting Period						
			From:			То:				
				DA	TE		А	MOUNT		
Full Name of Contributing Comm	nittee			мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Cod	e (Plus 4)							
						ſ		PAGE TOTAL		
Enter Grand Total of Part C or	n Schedule I, Detaile	ed 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		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	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	ting Perio	od			
			From:			То:		
				D	ATE		AMOUNT	
Full Name				мо	DAY	YEAR		
Mailing Address							\$ i	0.00
City	State	Zip Code (Plus 4)					
Receipt Description					1	1		
Enter Grand Total of Part E	on Schodulo I. Dotailog		Section	4			PAGE TOT	AL
Linter Granu Total of Part E		i Suillilai y Page,	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		
MORAN, PATRICK J	From:	<u>5/4/2021</u> то:	<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, 3		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate			Reporting 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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL		
					4	6	0.00		

SCHEDULE II PART G **IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$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(I	Plus 4)						
Employer of Contributor					Occupation					
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descri	ption (of Contribution
Enter Grand Total of Part G on Sch	edule II, I	n-Kind	Contributi	ons De	taile	ed				PAGE TOTAL
Summary Page, Section 3.	,									0.00

nter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed ummary Page, Section 3.	

SCHEDULE III STATEMENT OF EXPENDITURES

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