

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 : 8300021		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: ACBA JUDICIAL EXCELLENCE COMMITTEE										
Street Address: 400 KOPPERS BUILDING,436 SEVENTH AVENUE										
City: PITTSBURGH				State: PA		Zip Code: 15219				
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No <input checked="" type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4. X	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No <input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2021	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
				MO	DAY	YEAR				
				11	2	2021	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY	
		6	8	2021		9	13	2021		
A. Amount Brought Forward From Last Report				\$ 20,348.76						
B. Total Monetary Contributions And Receipts (From Schedule I)				\$ 8,875.27						
C. Total Funds Available (Sum Of Lines A and B)				\$ 29,224.03						
D. Total Expenditures (From Schedule III)				\$ 0.00						
E. Ending Cash Balance (Subtract Line D From Line C)				\$ 29,224.03						
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

Printed Name

Signature

Email

My Commission Expires

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
ACBA JUDICIAL EXCELLENCE COMMITTEE	From: <u>6/8/2021</u> To: <u>9/13/2021</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)	\$ 4,500.00
All Other Contributions (Part D)	\$ 4,375.00
TOTAL for the Reporting Period (3)	\$ 8,875.00

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.)	\$ 8,875.00
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<div>PART A</div> <div>CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES</div> <div>\$50.01 TO \$250.00</div> <div>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.</div>						
Name of Filing Committee or Candidate				Reporting Period		
				From:		To:
				DATE		AMOUNT
Full Name of Contributing Committee				MO	DAY	YEAR
Mailing Address						
City	State	Zip Code (Plus 4)				
						\$ 0.00
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.						
						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 ACBA JUDICIAL EXCELLENCE COMMITTEE	Reporting Period From: <u>6/8/2021</u> To: <u>9/13/2021</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee CLARK HILL THORP REED PAC				MO	DAY	YEAR	\$ 1,500.00
Mailing Address 301 GRANT STREET 14TH FLOOR				9	10	2021	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15219					
Full Name of Contributing Committee BURNS WHITE LLC PAC				MO	DAY	YEAR	\$ 1,500.00
Mailing Address 48 26TH STREET				9	10	2021	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15222					
Full Name of Contributing Committee ECKERT SEAMANS PA GOVERNMENT PAC				MO	DAY	YEAR	\$ 1,500.00
Mailing Address 600 GRANT STREET 44TH FLOOR				9	10	2021	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15219					

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

PAGE TOTAL
\$ 4,500.00

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 ACBA JUDICIAL EXCELLENCE COMMITTEE	Reporting Period From: <u>6/8/2021</u> To: <u>9/13/2021</u>
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
LORI E. MCMASTER							\$ 275.00
Mailing Address 804 OXFORD COURT				9	10	2021	
City GIBSONIA	State PA	Zip Code (Plus 4) 15044					
Employer Name UNIVERSITY OF PITTSBURGH SCHOOL OF LAW				Occupation ATTORNEY			
Employer Mailing Address/Principal Place of Business 3900 FORBES AVENUEBARCO LAW BLDG.			City PITTSBURGH		State PA	Zip Code (Plus 4) 15260	
CHERYL KAUFMAN							\$ 275.00
Mailing Address 106 ASHLEY COURT				9	10	2021	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15221					
Employer Name SELF-EMPLOYED				Occupation ATTORNEY			
Employer Mailing Address/Principal Place of Business 6 PPG PLACESUITE 800			City PITTSBURGH		State PA	Zip Code (Plus 4) 15222	
JOHN P. KROLIKOWSKI							\$ 275.00
Mailing Address 54 ROYCROFT AVENUE				9	10	2021	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15228					
Employer Name SELF-EMPLOYED				Occupation ATTORNEY			
Employer Mailing Address/Principal Place of Business 54 ROYCROFT AVENUE			City PITTSBURGH		State PA	Zip Code (Plus 4) 15228	

Full Name of Contributor ROBERT GALLO			MO	DAY	YEAR	\$ 275.00
Mailing Address 310 GRANT STREET STE. 1120			9	10	2021	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15219				
Employer Name SELF-EMPLOYED			Occupation ATTORNEY			
Employer Mailing Address/Principal Place of Business 310 GRANT STREET		City PITTSBURGH	State PA	Zip Code (Plus 4) 15219		

Full Name of Contributor THOMAS J. BURGUNDER			MO	DAY	YEAR	\$ 275.00
Mailing Address 460 WASHINGTON ROAD APT. PH5			9	10	2021	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15228				
Employer Name SELF-EMPLOYED			Occupation ATTORNEY			
Employer Mailing Address/Principal Place of Business 460 WASHINGTON ROADAPT. PH5		City PITTSBURGH	State PA	Zip Code (Plus 4) 15228		

Full Name of Contributor ALEXANDER P. BICKET			MO	DAY	YEAR	\$ 1,500.00
Mailing Address 323 COURTHOUSE 436 GRANT STREET			9	10	2021	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15219				
Employer Name ALLEGHENY CO. CT. OF COMMON PLEAS			Occupation JUDGE			
Employer Mailing Address/Principal Place of Business 436 GRANT STREETROOM 323		City PITTSBURGH	State PA	Zip Code (Plus 4) 15219		

Full Name of Contributor RANDY TODD			MO	DAY	YEAR	\$ 1,500.00
Mailing Address 305 COURTHOUSE 436 GRANT STREET			9	10	2021	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15219				
Employer Name ALLEGHENY CO. CT. OF COMMON PLEAS			Occupation JUDGE			
Employer Mailing Address/Principal Place of Business 436 GRANT STREETROOM 305		City PITTSBURGH	State PA	Zip Code (Plus 4) 15219		

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

PAGE TOTAL

\$ 4,375.00

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:

			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	
ACBA JUDICIAL EXCELLENCE COMMITTEE		From: <u>6/8/2021</u> To: <u>9/13/2021</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

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				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
	From To:

				DATE	AMOUNT	
To Whom Paid			MO	DAY	YEAR	
Mailing Address						\$ 0.00
City	State	Zip Code (Plus 4)	Description of Expenditure			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 0.00

