Campaign Finance Report

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

Filer Identificat Number :	ion	20200	0421			Report Filed B		CANDI	DATE		СОМ	MITTEE	✓	LOBE	BYIST	
Name of Filing (Committee,	Candida	ate or Lo	obbyist:		ELECT J	-	ECK								
Street Address:	PO BO>	(81583	3													
City:	PITTSB	URGH						State:	PA			Zip Co	de: 15	217-1	606	
TYPE OF REPORT	6TH TUESD/ PRE-PRIMAR		1.					AY F ARY	POST-	ST- 3.		AMENDMENT REPORT?		Yes	N	D V
(place X to the right of	6TH TUESD/ PRE-ELECTI		4.	2ND FRIDAY PRE- ELECTION 5. X				AY F TION	POST- 6.		TERMINATION REPORT?		Yes	N	o 🔨	
report type)	ANNUAL R	EPORT	7.	Year 2021				NG METHO				PAPER		\checkmark	DISK	ETTE
Name of Office Sought by Candidate:								DATE O	F ELE(CTIO	N	District Number	Office Code	Par	ty Code	Count
		COURT	-					мо	DAY	YE	AR	-1	SPR	DEN	1	02
JUDGE OF THE	SUPERIOR	COURT						11		2	2021	 	(SEE INS	TRUCTIO	ONS FOR	CODES)
Summary of		and	мо	DAY	YEAR			мо	DAY	YI	EAR	FC	OR OFFIC	E USE	ONLY	
Expenditures	s from:			9 14	20	021 T	0	10	1	.8	2021					
A. Amount Bro	ught Forwa	rd From	1 Last R	eport			\$			79,6	572.74					
B. Total Monet	ary Contribu	utions A	nd Rec	eipts (From	1 Sche	dule I)	\$				0.00					
C. Total Funds	Available (S	Sum Of	Lines A	and B)			\$			79,6	572.74					
D. Total Expen	ditures (Fro	m Sche	dule II	[)			\$			4,8	353.96					
E. Ending Cash	Balance (S	ubtract	Line D	From Line	C)		\$			74,8	818.78	-				
F. Value Of In-	Kind Contri	butions	Receive	ed (From S	chedul	le II)	\$				0.00					
G. Unpaid Deb	ts And Oblig	ations	(From S	chedule IV	')		\$			80,0	00.00					
					AFF	IDAVI	T SE	CTION								
PART I - If this i		-	•	-							-					
I swear (or affirm correct and compl		ort, inclu	iding the	attached sc	hedules	s filed on	paper	or by elect	ronic me	dium	, are to i	the best o	f my know	vledge	and bel	ief , true
Sworn to and sub	scribed before day of	me this		20						S	Signature	e of Perso	n Submitt	ing Rep	oort	
		Signatur	e				_					Prin	ted Name			
My Commission E	xpires	_					_					Ema	il			
	мс)	D/	AY	YR				Are	a Coc	le	Daytin	ne Telepho	one Nu	mber	
Part II- If this is	a report of	a cand	idate's	authorized	Comm	nittee, C	andid	ate shall	sign he	ere.						
I swear (or affirm) No 320) as amend		est of m	y knowle	edge and beli	ef this	political	comm	ittee has n	ot violat	ed an	ıy provis	ions of th	e act of Ju	ine 3,19	937 (P.	L. 1333,
Sworn to and subse	cribed before day of	me this		20							s	ignature	of Candida	ite		
							-					Printe	ed Name			
My Commission Exp		nature					-					Ema	il			
		M0					-					-				
		мо	D/	ΑY	YR				Area (Lode		D	aytime Te	elephon	e Num	ber

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** ELECT JILL BECK From: <u>9/14/2021</u> To: 10/18/2021 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.)

PAGE 3

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 Committee or Candidate				Reporting Period					
Fro				From: To:					
				DATE			AMOUNT		
Full Name of Contributing Con	mmittee		мо	DAY	YEAR				
Mailing Address						\$	0.00		
City State Zip Code (Plus 4)									
						Γ	PAGE TOTAL		

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			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	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 Candidate			Reporting Period					
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Commit	ttee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C on	Schedule I, Detail	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	Name of Filing Committee or Candidate			ing Perio	d				
Fro			From:	From: To:					
				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		
ELECT JILL BECK	From:	<u>9/14/2021</u> то:	<u>10/18/2021</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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 Candidate R			Reporting Period					
F						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	

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(P	Plus 4)						
Employer of Contributor						Occupat	tion			
Employer Mailing Address/Principal Place of City State Business					Zip 4)	Code(Plus	Descri	ption o	f Contribution	

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed	PAGE TOTAL
Summary Page, Section 3.	0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidat	ie		Reporti	ng Period					
ELECT JILL BECK	From	From <u>9/14/2021</u>			<u>10/18/2021</u>				
				DATE AM					
To Whom Paid Hunk Digital LLC			мо	DAY	YEAR				
Mailing Address 1605 Denniston Street				12	2021	\$	853.96		
City Pittsburgh State Zip Code (Plus 4)				ption of Exp	penditure				
	PA	15217	Online/	/Web Servi	ces				
To Whom Paid			мо	DAY	YEAR				
GPS Impact									
Mailing Address 220 SE 6th St			10	12	2021	\$	4,000.00		
City Des Moines	State	Zip Code (Plus 4)	Descrip	ption of Exp	penditure				
IA 50309				TV Product	ion Costs	3			
			_				PAGE TOTAL		
Enter Grand Total of Expenditures	; on Page 1, Re	eport Cover Page, Item D).			\$	4,853.96		

SCHEDULE IV STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate			Reporting Period					
ELECT JILL BECK			From:	<u>9/14/2021</u> To:				<u>10/18/2021</u>
				DATE				Outstanding Balance of Debt
Name of Creditor Jill Beck				мо	DAY	YEAR		
Mailing Address 5342 Pocusset Street				10	17	2021	\$	80,000.00
City Pittsburgh	State	Zip Code (Pl	us 4)	Description of Debt				
	PA 15217		Loan - campaign operations & expenses					
							PAGE TOTAL	
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							\$	80,000.00
City Pittsburgh State Zip Code (Plus 4) Description of Debt PA 15217 Loan - campaign operation							ns 8	expenses