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	0435			Repor Filed			CANDI	DATE		СОМІ	MITTEE	✓	LOB	BYIS	г	
Name of Filing (Committee	e, Candida	ate or Lo	obbyist:		VOTEN	-											
Street Address:	PO B	OX 13104	4															
City:	PITTS	SBURGH						:	State:	PA			Zip Co	de: 15	243			
TYPE OF REPORT	6TH TUES PRE-PRIM		1.	2ND FRIDA PRIMARY	Y PRE	- 2.		DA) IMA		POST-	3.		AMENDMENT REPORT?		Yes	\checkmark	No	
(place X to the right of	6TH TUES PRE-ELEC		4.	2ND FRIDA ELECTION	Y PRE	∃- 5. X		DA) ECTI		POST-	6.		TERMINATION REPORT?		Yes		No	\checkmark
report type)	ANNUAL	REPORT	7.	Year 2021					G METHO HECK OI				PAPER		\checkmark	DIS	KETTI	
Name of Office S	⊥ Sought by	Candidat	e:						DATE O	F ELE(CTIC	ON	District Number	Office Code	Pai	ty Co	de Co Co	
			-					1	мо	DAY	Y	EAR	-1	SPR	DEI	1	02	
JUDGE OF THE	SUPERIC	DR COURT							11		2	2021	j	(SEE INS	TRUCTI	ONS F	DR CODI	S)
Summary of		and	мо	DAY	YEAR	Ł			мо	DAY	Y	EAR	FC	OR OFFIC	e use	ONL	Y	
Expenditures	s from:			9 14	2	021	ГО		10	1	.8	2021						
A. Amount Bro	ought Forv	vard From	n Last R	eport				\$			7,	391.70						
B. Total Monet	ary Contr	ibutions A	And Rec	eipts (Fron	1 Sche	dule I)		\$				0.00	4					
C. Total Funds	Available	(Sum Of	Lines A	and B)				\$			7,	391.70						
D. Total Expen	ditures (F	rom Sche	edule II	[)				\$			2,	898.00						
E. Ending Cash	n Balance	(Subtract	Line D	From Line	C)			\$			4,4	493.70						
F. Value Of In-	Kind Con	tributions	Receive	ed (From S	chedu	le II)		\$				0.00						
G. Unpaid Deb	ts And Ob	ligations	(From S	Schedule IV	')			\$				0.00						
					AFF	IDAV	IT S	SEC	CTION									
PART I - If this i		•	•	-									-	f my know	ledae	and h	oliof	true
correct and compl		eport, men	uuning the	attached sc	lieuule	s med of	i pap		i by electi		arun	i, are to	the best o		neuge		ener,	ti ue
Sworn to and subs	scribed befo day of —	ore me this		20							:	Signaturo	e of Perso	n Submitt	ing Re	oort		
		Signatur	re				_						Prin	ted Name				
My Commission E	xpires												Ema	il				
		мо	DA	AY	YR					Are	a Co	de	Daytin	ne Telepho	one Nu	mber		
Part II- If this is I swear (or affirm)) that to th									-		ny provis	ions of th	e act of Ju	ine 3,1	937 (P.L. 13	33,
No 320) as amend Sworn to and subso		re me this													_			
	day of			20								S	ignature (of Candida	te			
													Printe	ed Name				
My Commission Exp		Signature											Ema	il				-
	-	мо	D/	AY.	YR	1	_			Area	Code		D	aytime Te	lephor	ne Nu	nber	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** VOTENEFT 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.)

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 Candidat	e		Reporting Period						
			From	m:		То			
					DATE			AMOUNT	
Full Name of Contributing Committee		мо	DAY	YEAR					
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4	4)						
								PAGE TOTAL	
nter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.						\$	0.00		

Use this Part to it	emize all other 50.01 to \$250.0	1 TO \$250.00 contribution 00 in the repo	s wi ortin	ith an ng per	aggreg iod.			rom
Name of Filing Committee or Candidate Reporting Period								
			Fror	m:		Тс):	
					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, 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		A	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.00
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Sched	lule I, Detailed Sun	nmary 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			Rep	orting Pe	riod			
			Froi	n:		Т):	
				D	ATE		АМ	IOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Pl	ıs 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page	e, Sectio	on 3.			P#	AGE TOTAL 0.00

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			Report	ing Peric	d				
			From:			То:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (Plus 4)						
Receipt Description	·	•					•		
		_						PAGE TO	TAL
Enter Grand Total of Part E on Sched	ule 1, Detailed Sumn	nary Page,	Section	4.			\$		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		
VOTENEFT	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			Reporting	Period			
			From:			То:	
				DATE			AMOUNT
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	ie,	F	PAGE TOTAL
						\$	0.00

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

Name of Filing Committee or Candidate			Rep	porting I	Period		
			Fro	om:		То:	
					DATE		AMOUNT
Full Name of Contributor				мо	DAY	YEAR	
Mailing Address			-				\$ 0.00
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupa	ation		
Employer Mailing Address/Principal Plac	e of Business	City	State	e Zip	Code(Plus 4)	Descri	ption of Contribution
Enter Grand Total of Part G on Scho Summary Page, Section 3.	edule II, In-Kin	d Contributions D	etaile	ed			PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period				
VOTENEFT			From	<u>9/14</u>	<u>4/2021</u>	То:	<u>10/18/2021</u>	
				DATE			AMOUNT	
To Whom Paid			мо	DAY	YEAR			
Maria McLaughlin for Supreme Court			no					
Mailing Address PO Box 15953			9	29	2021	\$	1,000.00	
City Philadelphia	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure	-		
	PA	19103	Donatio	n				
To Whom Paid Judge Lane for Superior Court			мо	DAY	YEAR			
Mailing Address PO Box 15951			9	29	2021	\$	500.00	
City Philadelphia	State	Zip Code (Plus 4)	Descript	l tion of Exp	enditure	1		
	PA	19103	Donation					
To Whom Paid Friends of Judge Dumas for Commonwealth Court			мо	DAY	YEAR			
Mailing Address PO Box 40606			9	29	2021	\$	500.00	
City Philadelphia	State	Zip Code (Plus 4)	Descript	l tion of Exp	enditure			
	PA	19107	Donatio					
To Whom Paid Indiana County Democratic Committee			мо	DAY	YEAR			
Mailing Address PO Box 315			9	21	2021	\$	50.00	
City Indiana	State	Zip Code (Plus 4)	Descript	l tion of Exp	enditure			
	PA	15701	Donatio	n				
To Whom Paid Washington County Democratic Commit	ttee		мо	DAY	YEAR			
Mailing Address 15 Redstone Ln			10	1	2021	\$	105.00	
City Washington	State	Zip Code (Plus 4)	Descript	l tion of Exp	enditure			
	PA	15301	Donatio	-				
Fo Whom Paid Democratic Campaign Committee of Philadelphia			мо	DAY	YEAR			
Mailing Address 219 Spring Garden S	ailing Address 219 Spring Garden St		10	13	2021	\$	150.00	
City Philadelphia	State	Zip Code (Plus 4)) Description of Expenditure					
	PA	19123	Donation					

To Who	m Paid				мо	DAY	YEAR		
Blair Co	ounty Demo	cratic Committee			HO				
Mailing	Address	309 Allegheny St ST	TE 9		10	17	2021	\$	40.00
City	Hollidaysbu	Irg	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
			РА	16648	Donatio	n			
To Who	m Paid				NO	DAY	YEAR		
Commit	ttee to Elec	t Ben Bright			мо		TEAR		
Mailing	Address	PO Box 173			9	21	2021	\$	100.00
City	Slovan		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
			РА	15078	Donatio	n			
To Who	m Paid				мо	DAY	YEAR		
Delawa	re County D	Democratic Committe	e						
Mailing	Address	PO Box 473			10	13	2021	\$	250.00
City	Media		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
PA 19063				19063	Donatio	n			
To Who	m Paid				мо	DAY	YEAR		
Friends	of Tiffany S	Sizemore			no				
Mailing	Address	1054 Osage Dr			10	4	2021	\$	100.00
City	Pittsburgh		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
			РА	15235	Donatio	n			
To Who	m Paid				мо	DAY	YEAR		
Citizens	s Bank				мо				
Mailing	Address	1701 Cochran Rd			9	30	2021	\$	3.00
City	Pittsburgh		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
			РА	15220	Bank St	atement F	ee		
To Who	m Paid				мо	DAY	YEAR		
Friends	of HWT				MO				
Mailing	Address	PO Box 24556			10	4	2021	\$	100.00
City	Pittsburgh		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
			РА	15234	Donatio	n			
F									PAGE TOTAL
Enter G	Grand Tota	ii of Expenditures (on Page 1, Report	Cover Page, Item D	•			\$	2,898.00