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 20	21C0341				Report		CAN	IIDI	DIDATE COMMITTEE LOBBYIST								
Name of Filing C	ommittee, Cand	idate or L	obbyist	:	JL	UDGE [DENIS	5 P. C	OHE	N								
Street Address:																		
City:								State	:				Zip Cod	e: 19	9151			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FR PRIMAR		PRE-	2.	30 DA		Р	OST-	3.		AMENDME REPORT?	ENT	Yes		No	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FR ELECTI		PRE-	5. X	30 DA		Р	OST-	6.		TERMINAT REPORT?	TION	Yes	1	No	\
report type)	ANNUAL REPOR	t T 7.	Year 2	021					METHOD PAPER CK ONE					DI	SKETT	E		
Name of Office S	ought by Candi	date:	•					DAT	E O	F ELE	CTI	ON	District Number	Office Code	Pa	rty C	Code Co	ounty ode
								МО		DAY	Υ	/EAR	1	CPJ				
JUDGE OF THE	COURT OF COM	IMON PLE	AS						11		2	2021		(SEE IN	STRUCT	ONS	FOR COD	ES)
Summary of	•	МО	DAY	•	YEAR			МО		DAY	Y	/EAR	FOI	OFFI	CE USE	ON	ILY	
Expenditures	from:		9	14	202	21 T	0		10		18	2021						
A. Amount Bro	ught Forward Fr	om Last F	Report			·	\$				•	0.00						
B. Total Moneta	ary Contribution	s And Rec	eipts (F	rom	Schedu	ule I)	\$					0.00						
C. Total Funds	Available (Sum	Of Lines A	and B)				\$					0.00						
D. Total Expend	ditures (From So	:hedule II	I)				\$					0.00						
E. Ending Cash	Balance (Subtra	act Line D	From Li	ine C)		\$					0.00						
F. Value Of In-	Kind Contributio	ns Receiv	ed (Fro	m Scl	hedule	ıI)	\$					0.00						
G. Unpaid Debt	s And Obligation	ns (From	Schedul	e IV)			\$					0.00						
					AFFII	DAVI	ΓSE	CTIC	N									
PART I - If this is	a Committee ro	eport, trea	surer si	ign h	ere. If	this is	a Car	ndidat	e re	port, o	cand	lidate sig	jn here.					
I swear (or affirm) correct and comple		ncluding th	e attache	d sche	edules f	filed on	paper	or by e	lectr	onic m	ediur	n, are to t	the best of	my knov	wledge	and	belief ,	true
Sworn to and subs	cribed before me t	his	20									Signature	of Person	Submit	ting Re	port		_
	Signa						-						Print	ed Name	.			
My Commission Ex	-	· · ·							-				Email					_
	мо	D	AY		YR		_			Arc	ea Co	ode	Daytime	Teleph	one Nu	ımbe	er	
Part II- If this is	a report of a ca	ndidate's	authori	zed C	Commit	ttee, C	andid	ate sh	alls	sign he	ere.							
I swear (or affirm) No 320) as amende		f my knowl	edge and	belie	f this p	olitical	comm	ittee ha	as no	ot viola	ted a	ny provis	ions of the	act of J	une 3,1	.937	(P.L. 1	333,
Sworn to and subsc		is										s	ignature of	Candid	ate			—
	day of						-						Printed	Name				<u> </u>
	Signatur	e					-											
My Commission Exp	ires												Email					
	МО	D	AY		YR		•			Area	Code	1	Da	ytime T	elepho	ne N	umber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
JUDGE DENIS P. COHEN	From:	9/14/202	<u>1</u> To:	10/18/2021
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)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting) Period	(3)	\$	0.00
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 ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate value		\$2) in the			
Name of Filling committee of Canadate			From:			То	:	
					DATE			AMOUNT
Full Name of Contribut	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	!	I	!		<u> </u>			DAGE TOTAL

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 Fining Committee of Camulate					Reporting Period From: To:				
					DATE			AMOUNT	
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 Period						
			From:			То:			
				DA	TE		Α	MOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on Schee	dule I, Detailed Sum	nmary Pa	age, Sectio	n 3.			\$	0.00	

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 Candidate			Rep	orting Pe	riod			
			Fron	n:		To) :	
				D	ATE		ı	AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupa	tion			
Employer Mailing Address/Principal Pla Business	ce of	City			State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Scho	edule I, Detailed Su	ımmary Page,	Section	on 3.			\$	PAGE 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		Repor	ting Perio	od			
			From:			To:		
			•	D	ATE		AI	MOUNT
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. Detailed	d Summary Page	Section	4			PA	GE TOTAL
- Inc. Statia Total of Fall E	Jonedane 1, Betanet	. Jammar y r uge,	500.011				\$	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 Perio	d	
JUDGE DENIS P. COHEN	From:	<u>9/14/2021</u> To:	<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	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						\$	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	me of Filing Committee or Candidate				Re	porting F	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	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				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Cano	ame of Filing Committee or Candidate					Reporting Period				
			From			То:				
				DATE			AMOUNT			
To Whom Paid				DAY	YEAR					
Mailing Address						\$	0.00			
City	State	Zip Code (Plus 4)	Descri	ption of Ex	penditure					
							PAGE TOTAL			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item						\$	0.00			