#### **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 202	21C0202				eport led B		CAI	NDII	COMMITTEE LOBBYIST								
Name of Filing C	ommittee, Cand	idate or L	obbyist:		BRI	UCE	R. BE	EMER										
Street Address:																		
City:						State:							<b>Zip Code:</b> 15015					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRI PRIMARY	iday pr Y	E-	2.	30 DA		Р	OST-	3.		AMENDMENT Yes REPORT?					<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRI ELECTIO	IDAY PE DN	RE-	5. <b>X</b>	30 DA		Р	OST-	6.		TERMINAT REPORT?	TION	Yes	٨	0	<b>\</b>
report type)	ANNUAL REPOR	<b>T</b> 7.	Year 20	21					ETHOD PAPER CK ONE					<b>V</b>	DISK	ETTE		
Name of Office S	ought by Candid	<del></del> late:						DAT	E O	F ELE	CTI	ON	District Number	Office Code	Pai	ty Cod	Code	
	<b>5</b> ,							МО		DAY	Y	<b>YEAR</b>	5	СРЈ	D/F	l .	1000.	
JUDGE OF THE	COURT OF COM	MON PLE	AS						11		2	2021		(SEE IN	STRUCTI	ONS FOI	CODES	5)
Summary of	•	МО	DAY	YEA	R			МО		DAY	١	YEAR	FOI	OFFI	CE USE	ONLY		
Expenditures	from:		9	14	2021	T	0		10		18	2021						
A. Amount Bro	ught Forward Fr	om Last R	eport	·			\$					0.00						
B. Total Moneta	ary Contribution	s And Rec	eipts (Fr	om Sch	edul	e 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	ct Line D	From Lir	ne C)			\$					0.00						
F. Value Of In-	Kind Contributio	ns Receiv	ed (Fron	n Sched	ule I	Ξ)	\$					0.00						
G. Unpaid Debt	s And Obligation	ıs (From S	Schedule	IV)			\$					0.00						
				AF	FID	AVI	T SE	CTIC	DΝ									
PART I - If this is	a Committee re	port, trea	surer sig	gn here.	If th	his is	a Car	ndidat	e re	port, o	cand	lidate sig	gn here.					
I swear (or affirm) correct and complete		icluding the	e attached	l schedul	es file	ed on	paper	or by e	lectr	onic m	ediui	m, are to	the best of	my knov	wledge	and be	lief , tr	ue
Sworn to and subs	cribed before me t	nis	20									Signature	e of Person	Submit	ting Re	oort		_
	Signa	ture					<b>-</b>						Print	ed Name	•			_
My Commission Ex	_	iui c							-				Email					-
	мо	D	AY	Y	₹		_			Arc	ea Co	ode	Daytime	Teleph	one Nu	mber		
Part II- If this is	a report of a ca	ndidate's	authoriz	ed Com	mitte	ee, C	andid	ate sh	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende		f my knowl	edge and l	belief th	is poli	itical	comm	ittee h	as no	ot viola	ted a	any provis	ions of the	act of J	une 3,1	937 (P	L. 133	3,
Sworn to and subsc		is										s	ignature of	Candid	ate			-
	day of						-						Printed	Name				- <b> </b>
	Signatur	e					-											_
My Commission Exp	ires												Email					
	МО	D	AY	Y	R		•			Area	Code	e	Da	ytime T	elephor	ne Num	ber	_

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting Period							
BRUCE R. BEEMER	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 an 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 only with an aggregate valu							
Name of Filing Committee or Candidate			Reporting Period					
			Fre	om:		То	:	
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	)					
	•	·			•	•	$\overline{}$	DACE 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 Candidate					Reporting Period From: To:				
					DATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$	0.00	
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.

lame of Filing Committee or Candidate			Reporting Period						
			From:			То:			
				DA	TE		Α	MOUNT	
Full Name of Contributing Commit	tee			мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary 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	ame of Filing Committee or Candidate			Reporting Period						
			Fron	n:		To	То:			
				D	ATE		A	AMOUNT		
Full Name of Contributor				МО	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus	s <b>4</b> )							
Employer Name				Occupat	tion					
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Co	de (Plus 4)		
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			1	PAGE TOTAL		
							<b>\$</b>	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 Co	Name of Filing Committee or Candidate				od			
						То:		
				D	ATE		AM	10UNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	·	•						
Enter Grand Total of Part E or	Schedule T. Detailer	d Summary Page	Section	4			PA	GE TOTAL
Lines Grana Total of Fair 2 of	r benedule 1/ betanet	z Summary r 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 Perio	d	
BRUCE R. BEEMER	From:	<u>9/14/2021</u> <b>To:</b>	<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** 

lame of Filing Committee or Candidate				g Period			
	From:						
		DATE		AMOUNT			
Full Name of Contributor				DAY	YEAR		
Mailing Address						<b>\$</b>	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 Candidate				Re	Reporting 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	tion				
Employer Mailing Address/Principal Plac Business	ce of Cit	ity	State		Zip 4)	Code(Plus	Descri	ption o	f Contribution	
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-K	Cind C	Contributions De	etaile	ed				PAGE TOTAL 0.00	

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or C	Reporting Period						
	From			То:			
				DATE			AMOUNT
To Whom Paid	мо	DAY	YEAR				
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)	Descri	ption of Ex	penditure		
							PAGE TOTAL
inter Grand Total of Expenditures on Page 1, Report Cover Page, Item D			<b>,</b> .			\$	0.00