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	001007	ı				Repor Filed I	_	CA	NDII	DATE		СОМ	ITTEE	✓	LOB	BYIS [.]		
Name of Filing C	ommittee, Can	didate o	or Lol	bbyis	t:	EI	LECT .	JUDGE	DEN	IIS F	. COH	EN	•						
Street Address:	C/O GLENI	N F. RO	SENE	BLUM	(MON)	NTGOM	IERY N	1CCR/	ACKE	N),1	735 M	ARKE	T STRE	ET, 19T	H FLOOI	₹			
City:	PHILADELF	ΉΙΑ							State	e:	PA			Zip Cod	ie: 19	103-7	'305		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.		2ND F PRIMA	RIDAY ARY	PRE-	2.	30 DA		Р	OST-	3.		AMENDM REPORT?		Yes		No	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.		2ND F ELECT		PRE-	5.	30 DA		Р	OST-	6. X		TERMINA REPORT		Yes		No	\
report type)	ANNUAL REPO	7. Year 2021 FILING METHOD () CHECK ONE									PAPER		√	DIS	KETTE				
Name of Office S	ought by Cand	idate:					-		DAT	ЕΟ	F ELE	СТІС	N	District Number	Office Code	Pai	rty Co	de Cou	
JUDGE OF THE	COURT OF CO	MMON	DLEA	C					МО		DAY	YI	AR		СРЈ				
JODGE OF THE	COOK! OF CO	MIMON	PLLA	.5						11		2	2021		(SEE INS	TRUCTI	ONS FO	R CODES	5)
Summary of		МС	0	DAY	Y	YEAR			МО		DAY	YI	AR	FO	R OFFIC	E USE	ONL	Y	
Expenditures	from:		10	0	19	202	21 1	О		11	7	22	2021						
A. Amount Bro	ught Forward F	rom La	st Re	port				\$					0.00						
B. Total Moneta	ary Contributio	ns And	Recei	ipts (From	Schedu	ule I)	\$					0.00						
C. Total Funds Available (Sum Of Lines A and B) \$ 0.00																			
D. Total Expenditures (From Schedule III) \$ 0.00																			
E. Ending Cash	Balance (Subt	ract Line	e D F	rom L	Line C)		\$				2,0	09.14						
F. Value Of In-	Kind Contributi	ons Red	ceive	d (Fro	om Sc	hedule	II)	\$					0.00						
G. Unpaid Debt	s And Obligation	ns (Fro	om Sc	chedu	le IV)	1		\$					0.00						
						AFFI	DAVI	T SE	CTIC	NC									
PART I - If this is					_														
I swear (or affirm) correct and comple		incluaing	g tne a	attacn	ea scn	eaules t	ilea on	paper	or by e	electr	ronic m	eaium	, are to t	ne best o	r my knov	vieage	ana b	ellet , ti	rue
Sworn to and subs	cribed before me day of	this		20						,		5	ignature	of Perso	n Submitt	ing Re	port		
	Sign	ature		-				_		,				Prin	ted Name				-
My Commission Ex	rpires							_		•				Ema	il				
	МО		DAY	Y		YR					Are	ea Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a c	andidat	te's a	uthor	rized (Commit	ttee, C	Candid	ate sl	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende		of my kn	nowled	dge an	d belie	f this p	olitical	comm	ittee h	as no	ot viola	ted an	y provis	ions of the	e act of Ju	ine 3,1	937 (1	P.L. 133	3,
Sworn to and subsc	ribed before me t day of	his		20									s	ignature o	of Candida	ite			_
				20				_						Printe	d Name				-
My Commission Exp	Signatu	ire						_						Ema	il				- $ $
my commission exp								_											_
	МО		DAY	Y		YR					Area	Code		Da	aytime Te	elephor	ne Nui	nber	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period						
ELECT JUDGE DENIS P. COHEN	From:	10/19/202	<u>'1</u> To:	11/22/2021			
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

	his Part to itemize onl with an aggregate val	-			•			
Name of Filing Comm	ittee or Candidate		Re					
		From:				:		
		1			DATE			AMOUNT
Full Name of Contribution	ng Committee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	•	•			•	•		PAGE TOTAL

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

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 Filling 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 Candi	me 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.)

ame of Filing Committee or Candidate				Reporting Period						
				Fror	n:		To	То:		
					D	ATE			AMOUNT	
Full Name of Contributor						DAY	YEAR			
Mailing Address								\$		0.00
City State Zip Code (Plus 4)				4)						
Employer Name		•			Occupation					
Employer Mailing Address/Principal Pla Business	ce of		City			State		Zip C	Code (Plus	4)
Enter Grand Total of Part C on Scho	edule I, Detail	led Sumr	mary Page,	Section	on 3.			\$	PAGE TO	TAL 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		Report	ting Perio	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description		•		•		•	•	
Enter Grand Total of Part E	on Schedule T. Detailer	d Summary Page	Section	4				PAGE TOTAL
Lines Grand Total of Fait L	on concurre 1, betanet	a Jammary rage,	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 Peri	od	
ELECT JUDGE DENIS P. COHEN	From:	<u>10/19/2021</u> To:	11/22/2021
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR	र	
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, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candid	ate		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 S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	те Г		PAGE TOTAL	
Section 2.	ciicadic 11, 111 Kii	ia contributions beta	nea Sam	iiiiai y i aş	,		PAGE TOTAL	
						\$	0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidat	ame of Filing Committee or Candidate					porting P	Period				
					Fro	om:		To:	То:		
							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 Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.					ed				PAGE TOTAL 0.00		

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	e		Reporti	ng Period					
							То:		
				DATE			AMOUNT		
To Whom Paid	мо	DAY	YEAR						
Mailing Address						\$	0.00		
City	State	Zip Code (Plus 4)	Descri	otion of Ex	penditure				
Enter Grand Total of Expenditures					PAGE TOTAL				
Lines Grand Total Of Expenditures	on rage 1, Ke	eport Cover Page, Item D	•			\$	0.00		