### **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	20210	C0037				port		CAN	ANDIDATE COMMITTEE LOBBYIST									
Name of Filing C	ommittee, (	Candida	ite or Lo	obbyist:		TIF	FAN'	Y THO	MAS-S	MI	TH								
Street Address:																			
City:									State:					Zip Code	: 19	067-3	050		
TYPE OF REPORT	6TH TUESDA PRE-PRIMAR		1.	2ND FRIDAY PRIMARY	/ PRE-	-	2.	30 DA PRIMA		Р	OST-	3.		AMENDME REPORT?	NT	Yes	<b>√</b> No	)	
(place X to the right of	6TH TUESDA PRE-ELECTION		4.	2ND FRIDAY ELECTION	/ PRE	≣-	5.	30 DA		Р	OST- 6. <b>X</b>			TERMINAT REPORT?	ION	Yes	No	)	<b>\</b>
report type)	ANNUAL RE	EPORT	7	<b>Year</b> 2021					LING METHOD ) CHECK ONE					PAPER		<b>√</b>	DISKE	TTE	
Name of Office S	Sought by Ca	andidat	e:						DATE	0	F ELE	СТІО	N	District Number	Office Code	Par	ty Code	Cour	
	- ,								МО		DAY	YE	AR	7	CPJ	DEN	1		
JUDGE OF THE	COURT OF	COMMO	ON PLEA	48						11		2	2021	├──	(SEE INS	TRUCTI	ONS FOR	CODES	)
Summary of	•	and	МО	DAY	YEAR	2			МО		DAY	YE	AR	FOR	OFFIC	E USE	ONLY		
Expenditures	from:		1	19	2	021	Т	0	:	11	2	22	2021						
A. Amount Bro	ught Forwai	rd From	Last R	eport				\$					0.00						
B. Total Moneta	ary Contribu	ıtions A	nd Rec	eipts (From	Sche	dule	e I)	\$					0.00						
C. Total Funds	Available (S	Sum Of	Lines A	and B)				\$					0.00						
D. Total Expend	ditures (Fro	m Sche	dule II	[)				\$					0.00						
E. Ending Cash	Balance (S	ubtract	Line D	From Line C	2)			\$					0.00						
F. Value Of In-	Kind Contrib	butions	Receive	ed (From Sc	hedu	le I	I)	\$					0.00						
G. Unpaid Debt	s And Oblig	ations	(From S	chedule IV	)			\$				5	00.00		,				
					AFF	ID	AVI	T SE	CTIO	N									
PART I - If this is	a Committ	ee repo	rt, trea	surer sign h	nere. I	If th	nis is	a Can	ndidate	re	port, c	andid	late si	gn here.					
I swear (or affirm) correct and comple		ort, inclu	ıding the	attached sch	iedules	s file	ed on	paper (	or by ele	ectr	onic me	edium,	are to	the best of	my know	/ledge	and beli	ef , tr	ue
Sworn to and subs	cribed before day of	me this		20						•		S	ignatur	e of Person	Submitt	ing Rep	oort		_
		Signatur		· <u>-</u>				- -		•				Printe	d Name				-
My Commission Ex			-							-				Email					-
	мо	)	D#	Y	YR			_			Are	ea Cod	e	Daytime	Telepho	one Nu	mber		
Part II- If this is	a report of	a cand	idate's	authorized	Comn	nitte	ee, C	andida	ate sha	ıll s	sign he	ere.							
I swear (or affirm) No 320) as amende		est of m	y knowle	dge and belie	ef this	poli	itical	commi	ittee has	s no	ot violat	ted an	y provis	ions of the	act of Ju	ine 3,1	937 (P.L	133	3,
Sworn to and subsc		me this											s	ignature of	Candida	te			-
	day of — —							-						Printed	Name				-
	Sig	nature						_		-									_
My Commission Exp	ires													Email					
		мо	D#	ΑΥ	YR	l		-			Area	Code		Day	time Te	lephor	ne Numb	er	-

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
TIFFANY THOMAS-SMITH	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	g 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	y 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	J Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g 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	Name of Filing Committee or Candidate				Period			
			Fre	om:		То	:	
		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 Filing Committee	Name of Filing Committee or Candidate				Reporting Period						
Fro						o:					
					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.

Name of Filing Committee or Candi	ne 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	nme of Filing Committee or Candidate			Reporting Period						
			Fror	n:		То	То:			
				D	ATE		АМО	UNT		
Full Name of Contributor				МО	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plu	s 4)							
Employer Name				Occupa	tion					
Employer Mailing Address/Principal Plac Business	e of	City		•	State		Zip Code (	Plus 4)		
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page	Section	on 3.			PAG	<b>E TOTAL</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	andidate		Report	ting Perio	bd			
			From:			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 Fotal of Fair 2 of	r benedule 1/ betanet	z Sammary r age,	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 Per	iod	
TIFFANY THOMAS-SMITH	From:	<u>10/19/2021</u> <b>To:</b>	11/22/2021
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	R	
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:				
				DATE			AMOUNT
Full Name of Contributor			МО	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	nme of Filing Committee or Candidate					Period				
					From:			То:		
						DAT	E			AMOUNT
Full Name of Contributor					мо	DAY	,	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(Plus	4)						
Employer of Contributor					Оссир	ation				
Employer Mailing Address/Principal Plad Business	ce of	City	Sta	ite	Zi 4)	p Code(Pl )	us	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, I	n-Kind	Contributions	Deta	ailed					PAGE TOTAL
Summary Page, Section 3.										0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	ame of Filing Committee or Candidate								
							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		