Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificat	ion 2019	0269			Repo	ort		CAN	DI	DATE		СОМ	MITTEE	\checkmark	LOB	BYIST		
Number :					Filed	-			4.0						CEC.			
Name of Filing G	Committee, Candid	ate or L	oddyist:		SCHE				AR	RETEN	110		MITTEE	FOR JUD	GESI		NI AN	ID
Street Address:	305 WEST PIT	FTSBUR	GH STREET	-														
City:	GREENSBURG	i						State:	1	PA			Zip Coo	le: 15	601			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2.		30 DA PRIMA		Ρ	OST-	3.		AMENDM REPORT		Yes	N	0	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.		30 DA ELECT		Ρ	OST-	6.		TERMINA REPORT		Yes	N	0	\checkmark
report type)	ANNUAL REPORT	7. X	Year 2021										PAPER		\checkmark	DISK	ETTE	
Name of Office	Sought by Candidat	te:						DATE	0	F ELE(CTIC	N	District Number	Office Code	Pa	ty Cod	e Cou Cod	
	,							мо		DAY	Y	AR	Humber	couc			1000	<u> </u>
									11		2	2021		(SEE INS	TRUCTI	ONS FOR	CODES	5)
	Receipts and	мо	DAY	YEAR				мо		DAY	Y	EAR	FO	R OFFIC	E USE	ONLY	7	
Expenditures	s from:		11 23	20	021	тс	2		12	3	31	2021						
A. Amount Bro	ught Forward From	n Last R	eport				\$				2,5	556.14						
B. Total Monet	ary Contributions	And Rec	eipts (From	Scheo	dule I	[)	\$				2,5	500.00						
C. Total Funds Available (Sum Of Lines A and B) \$ 2,556.14																		
D. Total Expen	ditures (From Sch	edule II	1)				\$					25.00						
E. Ending Cash	Balance (Subtract	t Line D	From Line	C)			\$				5,0	31.14						
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedul	e II)		\$					0.00						
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	')			\$					0.00						
				AFF	IDA	VIT	SE	CTIO	Ν									
	s a Committee repo		-										-					
I swear (or affirm correct and compl) that this report, incl ete.	uding the	e attached sc	hedules	filed	on p	aper o	or by el	ectr	onic me	dium	, are to t	the best o	f my knov	vledge	and be	lief , tı	rue
Sworn to and subs	scribed before me this day of	5	20								5	Signature	e of Perso	n Submitt	ing Re	port		_
	Signatu	re				_							Prin	ted Name				—
My Commission E	2								-				Ema	il				_
	мо	D	AY	YR						Are	a Coo	le	Daytim	e Teleph	one Nu	mber		_
Part II- If this is	a report of a cand	lidate's	authorized	Comm	ittee,	, Ca	ndida	ate sh	all s	sign he	ere.							
I swear (or affirm) No 320) as amend) that to the best of n ed.	ny knowl	edge and beli	ef this	politic	al c	ommi	ttee ha	s no	ot violat	ed an	ıy provis	ions of th	e act of Ju	ine 3,1	937 (P	L. 133	3,
Sworn to and subse	cribed before me this day of		20									S	ignature o	of Candida	ite			_
													Printe	d Name				-
My Commission For	Signature												Ema	il				_
My Commission Ex	pires												2a					
	мо	D	AY	YR		_				Area	Code		Da	aytime Te	elephor	ne Num	ber	

SCHEDULE I **CONTRIBUTIONS AND RECEIPTS**

Detailed Summary Page

Name of Filing Committee or Candidate	Reportin	g Period		
WESTMORELAND BAR RETENTION COMMITTEE FOR JUDGES BONONI AND SCHERER	<u>11/23/202</u>	2 <u>1</u> To:	<u>12/31/2021</u>	
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	\$	0.00		
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	2,500.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	g Period	(3)	\$	2,500.00
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 ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	2,500.00

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	Reporting Period						
			From:		То	:	
		÷		DATE			AMOUNT
Full Name of Contributing C	Committee		мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
						Г	PAGE TOTAL
Enter Grand Total of Par	t A on Schedule I, Detail	ed Summary Page, Sect	ion 2.			\$	0.00

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

\$

PART B 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 or Candidat	e		-	orting P	eriod			
			Fro	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, Detailed Summary Page, Section 2. \$ 0.00								

PAGE 5

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									
WESTMORELAND BAR RETENTION COMMITTEE FOR JUDGES From: BONONI AND SCHERER					<u>11/23/2021</u> To: <u>12/31/20</u>				
	DA	TE		A	MOUNT				
Full Name of Contributing Committee ROBERT D. SCHERER FAMILY TRT R	мо	DAY	YEAR						
Mailing Address 806 MONTCLAIR	DR						\$	2,500.00	
City NEW KENSINGTON State Zip Code (Plus 4) PA 15601					11	2021			
				Γ		PAGE TOTAL			
Enter Grand Total of Part C on Sc	hedule I, Deta	iled Summary Pa	age, Sectio	n 3.			\$	2,500.00	

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	Reporting Period	
	From:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

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				ting Perio	bd				
From:					om: To:				
			I	D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$	i	0.00
City	State	Zip Code (Plus 4)						
Receipt Description	I				1				
Enter Grand Total of Part E o	- Schodulo I. Dotailoc	l Summary Page	Section	4				PAGE TOT	AL
	i Schedule 1, Detailet	summary raye,	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	riod	
WESTMORELAND BAR RETENTION COMMITTEE FOR JUDGES BONONI AND SCHERER	From:	<u>11/23/2021</u> то:	<u>12/31/2021</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER 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	TF)		
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, 3		\$	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: To:						
				DATE		АМО	UNT
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 Schedule II, In-Kind Contributions Detail Section 2.				mary Pag	je,	PAGE	TOTAL
					4	6	0.00

0.00

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

Name of Filing Committee or Candidate						Reporting Period					
					Fro	om:		То:			
					I		DATE			AMOUNT	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address									\$	0.00	
City	State		Zip Code(P	Plus 4)							
Employer of Contributor			1			Occupat	tion		I		
Employer Mailing Address/Principal Pl Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption o	f Contribution	
										PAGE TOTAL	

_ 1	Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.	PAG

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate				Reporting Period				
WESTMORELAND BAR RETENTION COMMITTEE FOR JUDGES BONONI AND SCHERER				m <u>11/23/2021</u> To:			<u>12/31/2021</u>	
				DATE		AMOUNT		
To Whom Paid FIRST COMMONWEALTH BANK			мо	DAY	YEAR			
Mailing Address PO BOX 400			5	31	2021	\$	5.00	
City INDIANA	State PA	Zip Code (Plus 4) 15701	Description of Expenditure MISC. FEE					
To Whom Paid FIRST COMMONWEALTH BANK			мо	DAY	YEAR			
Mailing Address PO BOX 400			6	30	2021	\$	5.00	
City INDIANA	State PA	Zip Code (Plus 4) 15701	Description of Expenditure MISC. FEE					
To Whom Paid FIRST COMMONWEALTH BANK			мо	DAY	YEAR			
Mailing Address PO BOX 400			6	30	2021	\$	5.00	
City INDIANA	State PA	Zip Code (Plus 4) 15701	Description of Expenditure MISC. FEE					
To Whom Paid FIRST COMMONWEALTH BANK			мо	DAY	YEAR			
Mailing Address PO BOX 400			8	31	2021	\$	5.00	
City INDIANA	State PA	Zip Code (Plus 4) 15701	Description of Expenditure MISC. FEE					
To Whom Paid FIRST COMMONWEALTH BANK			мо	DAY	YEAR			
Mailing Address PO BOX 400			9	30	2021	\$	5.00	
City INDIANA	State PA	Zip Code (Plus 4) 15701		Description of Expenditure MISC. FEE				
Enter Grand Total of Expendi			 `				PAGE TOTAL	
	tures on Page 1, Re	port cover Page, Item I	<i>.</i>			\$	25.00	