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 201 | 70261 | | | Repo Filed | | CAN | DIE | DATE | | СОМ | 4ITTEE | ✓ | LOB | BYIST | | |
|---|--|-------------|------------------------|-----------|---------------|--------------|-----------------|-------|----------|-------|------------|--------------------|----------------|--------------|---------|-----------|----------|
| Name of Filing C | ommittee, Candi | date or L | obbyist: | P | PENNS | SYLVAI | VIANS I | FOR | R WELI | _QU/ | ALIFIE |) JUDGE | S | | | | |
| Street Address: | | | | | | | | | | | | | | | | | |
| City: | MEDIA | | | | | | State: | | PA | | | Zip Cod | l e: 19 | 063 | | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDAY PRIMARY | Y PRE- | 2. | 30 D PRIM | | P | OST- | 3. | | AMENDM REPORT? | | Yes | N | 0 | \ |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. X | 2ND FRIDAY ELECTION | Y PRE- | - 5. | 30 D ELEC | AY TION | P | OST- | 6. | | TERMINA REPORT? | | Yes | N | 0 | \ |
| report type) | ANNUAL REPOR | r 7. | Year 2022 | | | | NG MET CHECK | | | | | PAPER | | \checkmark | DISK | ETTE | |
| Name of Office S | ought by Candid | ate: | | | | | DATE | OI | F ELEC | CTIO | N | District Number | Office Code | Pa | ty Cod | Code | |
| | | | | | | | МО | | DAY | YE | AR | | | | | | |
| | | | | | | | | 11 | | 8 | 2022 | | (SEE INS | TRUCTI | ONS FOR | CODES | 5) |
| Summary of | | МО | DAY | YEAR | | | МО | | DAY | YE | AR | FO | R OFFIC | E USE | ONLY | , | |
| Expenditures | trom: | | 6 7 | 20 |)22 | то | | 9 | 1 | .9 | 2022 | | | | | | |
| A. Amount Bro | ught Forward Fro | m Last R | leport | | | \$ | 3 | | | | 0.00 | | | | | | |
| B. Total Moneta | ary Contributions | And Rec | eipts (From | Sched | lule I |) (| 5 | | | | 0.00 | | | | | | |
| C. Total Funds | Available (Sum C | of Lines A | and B) | | | | 5 | | | | 0.00 | | | | | | |
| D. Total Expend | ditures (From Sc | hedule II | Ί) | | | \$ | 5 | | | | 0.00 | | | | | | |
| E. Ending Cash | Balance (Subtra | ct Line D | From Line (| C) | | 9 | 5 | | | 2 | 10.84 | | | | | | |
| F. Value Of In- | Kind Contribution | ıs Receiv | ed (From So | chedule | e II) | 9 | 5 | | | | 0.00 | | | | | | |
| G. Unpaid Debt | s And Obligation | s (From S | Schedule IV |) | | 4 | 5 | | | | 0.00 | | , | | | | |
| | | | | AFFI | ΙDΑV | /IT SE | CTIO | N | | | | | | | | | |
| PART I - If this is | a Committee re | port, trea | surer sign l | nere. If | f this | is a Ca | ndidate | re | port, c | andio | date sig | ın here. | | | | | |
| I swear (or affirm) correct and comple | that this report, in ete. | cluding the | e attached sch | nedules | filed o | n paper | or by el | ectr | onic me | edium | , are to t | he best of | my knov | vledge | and be | lief , tr | ue |
| Sworn to and subs | cribed before me th day of | is | 20 | | | | | - | | s | ignature | of Persoi | n Submitt | ing Re | oort | | _ |
| | Signat | ure | _ | | | <u> </u> | | - | | | | Print | ted Name | | | | _ |
| My Commission Ex | _ | | | | | | | - | | | | Emai | I | | | | - |
| | мо | D | AY | YR | | | | | Are | a Cod | e | Daytim | e Teleph | one Nu | mber | | |
| Part II- If this is | a report of a car | ndidate's | authorized | Commi | ittee, | Candid | late sha | all s | ign he | re. | | | | | | | |
| I swear (or affirm) No 320) as amende | | my knowl | edge and beli | ef this p | politic | al comm | nittee ha | s no | t violat | ed an | y provis | ions of the | e act of Ju | ıne 3,1 | 937 (P. | L. 133 | з, |
| Sworn to and subsc | | 5 | | | | | | | | | S | ignature o | f Candida | ite | | | - |
| | day of ———————————————————————————————————— | | | | | _ | | , | | | | Printe | d Name | | | | _ |
| | Signature | <u> </u> | | | | | | _ | | | | | | | | | _ |
| My Commission Exp | ires | | | | | | | | | | | Emai | I | | | | |
| | МО | D | AY | YR | | | | , | Area | Code | | Da | ytime Te | elephoi | ne Num | ber | _ |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| Name of Filing Committee or Candidate | Reporting Period | | | | | | |
|--|------------------|---------|--------------|-----------|--|--|--|
| PENNSYLVANIANS FOR WELL QUALIFIED JUDGES | From: | 6/7/202 | <u>2</u> To: | 9/19/2022 | | | |
| 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

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 or Candidat | e | | Reporting | Period | | | |
|--------------------------------------|-------|-------------------|-----------|--------|------|----|--------|
| | | 1 | From: | | То | : | |
| | | | | DATE | | | AMOUNT |
| Full Name of Contributing Committee | | | МО | DAY | YEAR | | |
| Mailing Address | | | | | | \$ | 0.00 |
| City | State | Zip Code (Plus 4) | | | | | |

PAGE TOTAL
0.00

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

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.

| (Excl | ude contributions fro | m political comm | itte | es re _l | ported | in Part | A) | |
|--------------------------|-----------------------|-------------------|------|--------------------|--------|---------|----|------------|
| Name of Filing Commit | tee or Candidate | | Repo | orting P | Period | | | |
| From: To: | | | | | | | | |
| | | | | | 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.

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 | lame of Filing Committee or Candidate | | | Reporting Period | | | | | | | |
|---------------------------------------|---------------------------------------|----------|-------------|------------------|-----|------|----|---------|------|--|--|
| | | | From: | | | То: | | | | | |
| | | | | DA | TE | | А | MOUNT | | | |
| Full Name of Contributing Committee | | | | мо | DAY | YEAR | \$ | | 0.00 | | |
| Mailing Address | | | | | | | 7 | | 0.00 | | |
| City | State | Zip Cod | e (Plus 4) | | | | | | | | |
| | | | | | | | | PAGE TO | TAL | | |
| Enter Grand Total of Part C on Scheo | lule I, Detailed Sun | 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 | | | | Reporting Period | | | | | |
|---------------------------------------|---------------------|-------|------------|------------------|--------|-------|------|------------|--------------|
| | | | | Fror | n: | | To |) : | |
| | | | | | D | ATE | | | AMOUNT |
| Full Name of Contributor | | | | | мо | DAY | YEAR | \$ | 0.00 |
| Mailing Address | | | | | | | | | |
| City | State | Zip | Code (Plus | 4) | | | | | |
| Employer Name | • | | | | Occupa | tion | • | • | |
| Employer Mailing Address/Principal Pl | ace of Business | | City | | | State | | Zip Co | ode (Plus 4) |
| Enter Grand Total of Part C on Sch | edule I, Detailed S | Summa | ary 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 of | or Candidate | | Report | ing Peri | od | | | |
|-----------------------------|---------------------------|---------------|---------|----------|-----|------|--------|------------|
| | | | From: | | | To: | | |
| | | | | D | ATE | | | AMOUNT |
| Full Name | | | | мо | DAY | YEAR | \$ | 0.00 |
| Mailing Address | | | | | | | \neg | |
| City | State | Zip Code (I | Plus 4) | | | | | |
| Receipt Description | • | • | | | 1 | • | • | |
| Futor Coand Total of Bank | Cabadula I Detailed | Commence De | Caatle | | | | | PAGE TOTAL |
| Enter Grand Total of Part I | e on Schedule I, Detailed | Summary Page, | Section | 4. | | | \$ | 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 Period | | |
|--|------------------|----------------------------|-----------|
| PENNSYLVANIANS FOR WELL QUALIFIED JUDGES | From: | <u>6/7/2022</u> To: | 9/19/2022 |
| 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, 1 | | \$ | 0.00 |

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

| Name of Filing Committee or Car | ndidate | | Reporting Period | | | | | |
|---------------------------------|----------------------|------------------------|---------------------|------|------|-------------|--------|------|
| | | | From: To: | | | | | |
| | | | | DATE | | | AMOUNT | |
| Full Name of Contributor | | | МО | DAY | YEAR | | | |
| Mailing Address | | | | | | 7 \$ | C | 0.00 |
| City | State | Zip Code (Plus 4) | | | | | | |
| Description of Contribution: | • | | • | • | | • | | |
| | | | | | - | | | |
| Enter Grand Total of Part F o | n Schedule II, In-Ki | nd Contributions Detai | ailed Summary Page, | | | PAGE TOTAL | | |
| Section 2. | | | | | | \$ | 0 | .00 |

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

| Name of Filing Committee or Candidate | Name of Filing Committee or Candidate | | | | Reporting Period | | | | | | |
|---|---------------------------------------|------|------------------|--------|------------------|-------|-------------|------|------|-------------|-----------|
| | | | | | From: | | | То: | | | |
| | | | | | | | DATE | | | АМ | IOUNT |
| Full Name of Contributor | | | | | мо | | DAY | YEAR | | | |
| Mailing Address | | | | | | | | | | \$ | 0.00 |
| City | State | | Zip Code(Plus 4) | | | | | | | | |
| Employer of Contributor | | | | | Оссі | upati | ion | | | | |
| Employer Mailing Address/Principal Plac | e of Business | Cit | ty | Stat | e Z | Zip C | ode(Plus 4) | Desc | ript | tion of Con | tribution |
| Enter Grand Total of Part G on Sch | edule II, In-Kir | nd (| Contributions D | etaile | ed | | - | | | PA | GE TOTAL |
| Summary Page, Section 3. | , | | | | | | | | | | 0.00 |

SCHEDULE III STATEMENT OF EXPENDITURES

| Name 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) | Descrip | tion of Exp | enditure | | | |
| Enter Grand Total of Expenditures | on Bogo 1 Bonort C | 'over Page Item I | ` | | | | PAGE TOTAL | |
| Lines Grand Total of Expenditures (| ni rage 1, kepoit C | over rage, Item I | <i>.</i> | | | \$ | 0.00 | |