# **Campaign Finance Report**

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

Filer Identificat Number :	<b>ion</b> 2017	0261			Repor Filed		CAND	IDATE		СОМ	MITTEE	<	LOB	BYIST			
	Committee, Candid	ate or L	obbyist:			-	NIANS FO	DR WELL	_ QU/	L ALIFIEI	d judge	S					
Street Address:	Street Address:																
City:	MEDIA						State: PA					<b>Zip Code:</b> 19063					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 D PRIM		POST-	3.		AMENDN REPORT		Yes	N	D	<b>/</b>	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	∃- 5. <b>X</b>						TERMINATION Yes REPORT?			N	C		
report type)	ANNUAL REPORT	7.	<b>Year</b> 2022				NG METH		PAPER		$\checkmark$	DISK	ETTE				
Name of Office	L Sought by Candida	te:					DATE (	OF ELEC	CTIO	N	District Number	Office Code	Par	ty Code	Coun Code		
							мо	DAY	YE	AR							
							1	1	8	2022		(SEE INS	TRUCTI	ONS FOR	CODES)		
	Receipts and	мо	DAY	YEAR			мо	DAY	YE	AR	FC	OR OFFIC	e use	ONLY			
Expenditures	s from:		9 20	2	022	ГО	10	0 2	24	2022							
A. Amount Bro	ought Forward From	n Last R	eport			\$	5			0.00							
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sche	dule I)	4	\$			0.00							
C. Total Funds	Available (Sum Of	f Lines A	and B)			4	\$			0.00							
D. Total Expen	ditures (From Sch	edule II	I)			\$	\$			0.00							
E. Ending Cash	n Balance (Subtrac	t Line D	From Line	C)		4	5		2	10.84	-						
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	le II)	4	\$			0.00	-						
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	/)		4	\$			0.00						_	
				AFF	IDAV	IT SI	ECTION										
	s a Committee rep											f my knou	dadaa	and hal	iof tru		
correct and compl		ruaing the	e attached sc	nequie	s med or	i paper	or by elec	tronic me	arum,	, are to	the best o	т ту кноч	neage	anu bei	ier, tru	Ie,	
Sworn to and sub	scribed before me this day of 	5	20						s	ignatur	e of Perso	n Submitt	ing Rep	oort		-	
	Signatu	re				_					Prin	ted Name				-	
My Commission E	xpires					_					Ema	il				_	
	мо	D	AY	YR				Are	ea Cod	e	Daytin	ne Teleph	one Nu	mber			
Part II- If this is	a report of a can	didate's	authorized	Comn	nittee, (	Candio	date shall	l sign he	ere.								
I swear (or affirm No 320) as amend	) that to the best of r ed.	ny knowle	edge and beli	ief this	politica	com	nittee has	not violat	ed an	y provis	ions of th	e act of Ju	ine 3,1	937 (P.	L. 1333	ι,	
Sworn to and subscribed before me this day of 20										S	ignature	of Candida	te			-	
											Printe	ed Name				-	
My Commission Ex	Signature pires					_					Ema	il				-	
	мо	D	AY	YR	1	_		Area	Code		D	aytime Te	lephor	ne Numl	ber	-	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
PENNSYLVANIANS FOR WELL QUALIFIED JUDGES	From:	<u>9/20/202</u>	<u>2</u> To:	<u>10/24/2022</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	g 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	g 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 ar 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 Candidate				porting	Period			
						:		
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	4)					
								PAGE TOTAL
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Sec				n 2.			\$	0.00

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 Candida	te		Rep	orting P	eriod				
			Fror	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, Detail	ed Summary Pag	je, Se	ection 2			\$	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 Candidate			Reporting Period						
						То:			
				DA	TE		A	MOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR	\$	0.00	
Mailing Address							<b>]</b> *	0.00	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on Sched	lule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00	

## 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					
Fro					From:				
				D	ATE		АМ	IOUNT	
Full Name of Contributor				мо	DAY	YEAR	\$	0.00	
Mailing Address									
City	State	Zip Code (Pl	ıs 4)						
Employer Name				Occupation					
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page	e, Sectio	on 3.			P#	<b>AGE TOTAL</b> 0.00	

## 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	Name of Filing Committee or Candidate			Reporting Period					
			From: To:						
				D	ATE			AMOUNT	Г
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (	Plus 4)						
Receipt Description	·	•					•		
		_						PAGE TO	TAL
Enter Grand Total of Part E on Sched	ule 1, Detailed Sumr	nary 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	l	
PENNSYLVANIANS FOR WELL QUALIFIED JUDGES	From:	<u>9/20/2022</u> то:	<u>10/24/2022</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, 1		\$	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					
						То:		
				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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	ie,		PAGE TOTA	L
						\$		0.00

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

Name of Filing Committee or Candidate				Reporting Period				
						То:		
					DATE		AMOUNT	
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$ 0.00	
City	State	Zip Code(Plus 4)						
Employer of Contributor		•		Occupa	ation			
Employer Mailing Address/Principal Plac	e of Business	City	State	e Zip	Code(Plus 4)	Descri	ption of Contribution	
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-Kind	d Contributions D	etaile	d			<b>PAGE TOTAL</b> 0.00	

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period						
	From			То:			
				DATE			AMOUNT
To Whom Paid	To Whom Paid						
Mailing Address						\$	0.00
City State Zip Code (Plus 4)				tion of Exp	oenditure		
Enter Crand Tatal of Evnanditures	an Dago 1. Donort (	Cover Dage Item [					PAGE TOTAL
Enter Grand Total of Expenditures of	on Page 1, Report C	lover Page, Item L				\$	0.00