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	20220	0573			Rep File			CA	NDII	NDIDATE COMMITTEE LOBBYIST								
Name of Filing C	ommittee,	Candida	ite or Lo	obbyist:		DAM	IAR]	SLG	ARCI	A FC	OR JUI	OGE			·				
Street Address:	PO BO	X 30280)																
City:	PHILAD	DELPHIA	١						State	e:	PA			Zip Cod	ie: 19	103-8	280		
TYPE OF REPORT	6TH TUESD PRE-PRIMA		1.	2ND FRIDA PRIMARY	Y PRE-	- 2	2.	30 DA		Р	OST-	3.		AMENDM REPORT?		Yes	N	lo	√
(place X to the right of	6TH TUESD PRE-ELECTI		4.	2ND FRIDA ELECTION	AY PRE	- 5	5.	30 DA		Р	OST-	6.		TERMINA REPORT?		Yes	Ν	lo	\
report type)	ANNUAL R	EPORT	7. X	Year 2023						PAPER PAPER				√	DISK	ETTE			
Name of Office S	ought by C	andidat	e:	_					DAT	E O	F ELE	CTIC	N	District Number	Office Code	Par	ty Cod	e Coui	
JUDGE OF THE	COURT OF	СОММО	ON PLE	AS - PHILA	ADELPH	HIA			МО		DAY	Y	EAR	1	CPJP	DE	1	51	
										11		7	2023		(SEE INS	TRUCTI	ONS FO	R CODES	5)
Summary of Expenditures		and	МО	DAY	YEAR		_	_	МО		DAY	Y	EAR	FO	R OFFIC	E USE	ONL	7	
				1 1	. 20	022	<u> </u>	<u>О</u>		12		31	2022						
A. Amount Bro	ught Forwa	rd From	Last R	eport				\$					0.00						
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 2,000.00																			
C. Total Funds	Available (Sum Of	Lines A	and B)				\$				2,	00.00						
D. Total Expend	ditures (Fro	om Sche	dule II	I)				\$					0.00						
E. Ending Cash	Balance (S	ubtract	Line D	From Line	C)			\$				2,0	00.00	-					
F. Value Of In-						le II)	\$					0.00						
G. Unpaid Debt	s And Oblig	gations ((From S	Schedule I\	/)			\$				2,0	00.00						
					AFF	ΊDΑ	VI	T SE	CTIC	NC									
PART I - If this is	a Commit	tee repo	rt, trea	surer sign	here.	[f thi	is is	a Car	ndidat	e re	port, o	candi	date sig	jn here.					
I swear (or affirm) correct and comple		port, inclu	uding the	attached so	hedules	filed	l on	paper	or by e	electr	onic m	edium	, are to t	the best o	f my knov	vledge	and be	lief , tr	ue
Sworn to and subs	cribed before day of	e me this		20								:	Signature	of Perso	n Submitt	ing Re _l	ort		_
		Signatur	e					-		•				Prin	ted Name				_
My Commission Ex	pires							_						Ema	il				
	М	0	D/	AY	YR						Are	ea Co	de	Daytim	e Teleph	one Nu	mber		\Box
Part II- If this is	a report o	f a cand	idate's	authorized	Comn	nitte	e, C	andid	ate sl	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende		best of m	y knowle	edge and bel	ief this	polit	ical	comm	ittee h	as no	ot viola	ted ar	ny provis	ions of the	e act of Ju	ine 3,1	937 (P	.L. 133	3,
Sworn to and subsc	ribed before day of	me this		20									s	ignature o	of Candida	ite			_
								-						Printe	d Name				-
	_	nature						-						Ema	il				_
My Commission Exp	ires							_						£ma	··				_
		мо	D/	AY	YR			-			Area	Code		Da	aytime Te	lephor	e Num	ber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
DAMARIS L GARCIA FOR JUDGE	From:	1/1/202	<u>2</u> To:	12/31/2022
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)			\$	2,000.00
TOTAL for the Reporting) Period	(3)	\$	2,000.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	J Period	(4)	\$	0.00
			<u> </u>	
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			\$	2,000.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Name of Filing Committe	e or Candidate		Reporting Period					
			From: To					
		L		DATE			AMOUNT	
Full Name of Contributing (Committee		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.

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 Fining Committee of Canadate			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	nme of Filing Committee or Candidate Re		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	ame of Filing Committee or Candidate				Reporting Period					
DAMARIS L GARCIA FOR JUDGE			Fron	n:	1/1/2	<u>022</u> To	To: 12/31/202			
				D/	ATE		AMOUNT			
Full Name of Contributor Herman L. Reid III				МО	DAY	YEAR				
Mailing Address 18920 Roscommon Rd						2022	\$	2,000.00		
City Evansville	State IN	Zip Code (Plus 47725	5 4)	12	12	2022				
Employer Name Ascension St. Vincent	<u> </u>			Occupation Doctor						
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	(Plus 4)		
7839 South Professional Dr		Fort Brai	nch		IN		47648			
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			PAC	GE TOTAL 2,000.00		
							•	2,000.00		

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		А	MOUNT
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 I. Detailed	d Summary Page	Section	4			P	AGE TOTAL
- Control of Fare E	on Jonesia 1, Detailed	a cannual y 1 age,	2001011	••			\$	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							
DAMARIS L GARCIA FOR JUDGE	From:	<u>1/1/2022</u> To:	12/31/2022					
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR								
TOTAL for the Reporting Pe	eriod (1)	\$	0.00					
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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 Candidat	:e		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 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					Reporting	Period			
					From:		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 Plad Business	ce of	City	Sta	ite	Zip 4)	Code(Plus	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		Reporti	ng Period			
			From			То:	
				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)	Description of Expenditure				
							PAGE TOTAL
Enter Grand Total of Expe	naitures on Page 1, Re	port Cover Page, Item L).			\$	0.00

STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or	Candidate		Reportii	ng Period				
DAMARIS L GARCIA FOR JUD	OGE		From:		1/1/2022	То:	<u>1</u>	2/31/2022
					DATE			Outstanding Balance of Debt
Name of Creditor Herman L. Reid III				мо	DAY	YEAR		
Mailing Address 18920 F	Roscommon Rd			12	12	2022	\$	2,000.00
City Evansville	State IN	Zip Code (Pl 47725	us 4)	Descrip Loan	otion of Del	bt	•	
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							\$	PAGE TOTAL 2,000.00
1								