### **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 2021	0040			Repor Filed I		CA	MDI	DATE		COM	AITTEE	<b>Y</b>	LOBE	1131	
Name of Filing C	ommittee, Candid	ate or L	obbyist:		PATRIC	K SW	EENE	Y FC	OR JUD	GE						
Street Address: 1205 FILSON ST																
City:	PITTSBURGH						State	e:	PA			Zip Co	de: 15	5212		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2.	30 DA		P	POST-	3.		AMENDN REPORT		Yes	No	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	÷ 5.	30 DA		P	POST-	6.		TERMIN/ REPORT		Yes	No	<b>\</b>
report type)	ANNUAL REPORT	7. <b>X</b>	<b>Year</b> 2022				NG MI					PAPER		$\checkmark$	DISKE	ГТЕ
Name of Office S	- Sought by Candidat	te:					DAT	ΈO	F ELECTION District Office Number Code Part					ty Code	County Code	
						МО		DAY	YE	AR		·	D/R	•		
								11		8	2022		(SEE IN	STRUCTIO	NS FOR C	ODES)
	Receipts and	МО	DAY	YEAR			МО		DAY	YE	AR	FC	R OFFI	CE USE	ONLY	
Expenditures	from:		11 29	20	)22 <b>T</b>	О		12	3	1	2022					
A. Amount Bro	ught Forward Fron	n Last R	eport			\$					0.00					
B. Total Moneta	ary Contributions /	And Rec	eipts (Fron	n Sche	dule I)	\$					0.00					
C. Total Funds Available (Sum Of Lines A and B)						\$					0.00					
D. Total Expenditures (From Schedule III)						\$					0.00					
E. Ending Cash Balance (Subtract Line D From Line C)					\$				4,33	34.55						
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedul	le II)	\$					0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	/)		\$					0.00			'		
				AFF	IDAVI	T SE	CTI	NC								
I swear (or affirm)	s a Committee repo that this report, incl	*	_								_		f my kno	wledge a	and belie	ef , true
correct and comple	ete. cribed before me this															
	day of		20			_				Si	ignature	of Perso	n Submit	ting Rep	ort	
	Signatu	re				_						Prin	ted Name	9		
My Commission Ex	·					_		•				Ema				
	МО		AY	YR						a Code	e	Daytin	ne Teleph	none Nu	nber	
	a report of a cance that to the best of m				•						, provis	ions of th	o act of 1	uno 2 16	27 (D.I	1222
No 320) as amende	ed.	iy Kilowi	euge and ben	iei tilis	pontical	Commi	iittee i	ias iii		eu any	y provis	ions or th	e act of 3	une 3,1:	737 (P.L.	
SWOTH TO AND SUDSC	ribed before me this day of		20								S	ignature (	of Candid	ate		
						_						Printe	d Name			
My Commission Exp	Signature ires											Ema	il			-
	МО	D	AY	YR		-			Area C	Code		D	aytime T	elephon	e Numbe	er

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period							
PATRICK SWEENEY FOR JUDGE	From:	11/29/202	<u>2</u> To:	12/31/2022					
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor									
TOTAL for the Reporting	\$	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)			\$	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	J Period	(4)	\$	0.00					
			1						
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

	this Part to itemize onl with an aggregate valu	-			-					
Name of Filing Comm	Name of Filing Committee or Candidate			Reporting Period						
			From: To:							
		L			DATE			AMOUNT		
Full Name of Contribut	ing Committee			мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4)	)							
	•	•				-		DAGE 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 Fining Committee of Candidate				Reporting Period From: To:				
					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.

lame of Filing Committee or Candidate Repo			Reporting	ng Period					
			From:			То:			
			DATE				А	MOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on Scho	edule 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.)

Reporting Period					
NT					
0.00					
Occupation					
us 4)					
<b>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		Reporting Period					
			From:			То:		
				D	ATE		AM	10UNT
Full Name					DAY	YEAR		
Mailing Address	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	riod								
PATRICK SWEENEY FOR JUDGE	From:	<u>11/29/2022</u> <b>To:</b>	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 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	lame of Filing Committee or Candidate			Reporting Period						
	F					From: To:				
	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	Name of Filing Committee or Candidate				Reporting Period						
					Fro	om:		To:	То:		
							DATE			AMOUNT	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address									- \$	0.00	
City	State		Zip Code(I	Plus 4)							
Employer of Contributor	Employer of Contributor					Occupation					
Employer Mailing Address/Principal Pla Business	ce of	City		State Zip Code(Plus 4) Description			n of Contribution				
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.							PAGE TOTAL 0.00				

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or (	Reporting 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 Expenditures on Page 1, Report Cover Page, Item D						\$	0.00	