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 2022	20573			Report		CANDI	CANDIDATE COMMITTEE \(\square\) LOBBYIST					BYIST			
Name of Filing C	Committee, Candid	late or L	obbyist:	D.	AMAR:	IS L G	SARCIA F	OR JUI	OGE							
Street Address:																
City:	PHILADELPHI	ΪA					State:	PA			Zip Cod	ie: 19	9103-8	280		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PR PRIMARY	E-	2.	30 DA		POST-	3.		AMENDMENT Yes REPORT?			No		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PF ELECTION	RE-	5.	30 DA		POST-	6.		TERMINA REPORT		Yes	No	`	
report type)	ANNUAL REPORT	7. X	Year 2022				NG METH				PAPER		\	DISKE	TTE	
Name of Office S	Sought by Candida	rte:	•				DATE O	F ELE	CTIO	N	District Number	Office Code	Pai	ty Code	Count Code	у
							МО	DAY	YE	AR	rumber	couc	DEI	1	51	
					11		8	2022		(SEE IN	STRUCTI	ONS FOR (ODES)			
Summary of Expenditures	Receipts and	МО	DAY YEA	R			МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
			1 1	202	22 T	0	12		31	2022						
A. Amount Bro	ught Forward Fro	m Last R	eport			\$				0.00						
B. Total Moneta	ary Contributions	And Rec	eipts (From Sch	edu	ule I)	\$			2,0	00.00						
C. Total Funds	Available (Sum O	f Lines A	and B)			\$			2,0	00.00						
D. Total Expenditures (From Schedule III) \$									0.00							
E. Ending Cash Balance (Subtract Line D From Line C)						\$			2,0	00.00						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sched	ule	II)	\$				0.00						
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV)			\$			2,0	00.00						
			AF	FΙΙ	DAVI	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign here.	If	this is	a Car	ndidate r	eport, o	candio	date sig	ın here.					
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	e attached schedul	es f	iled on	paper	or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , tru	e,
Sworn to and subs	cribed before me thi day of	S	20						s	ignature	of Perso	n Submit	ting Re _l	oort		-
	Signati	ıre				- -					Prin	ted Name	•			-
My Commission Ex	cpires					_					Ema	il				-
	мо	D	AY YI	R				Are	ea Cod	e	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized Com	mit	ttee, C	andid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and belief th	is p	olitical	comm	ittee has r	ot viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333,	
Sworn to and subsc	ribed before me this									s	ignature o	of Candid	ate			-
	day of					-					Printe	d Name				-
Signature					-					Ema					-	
My Commission Exp	oires										Ema					
	МО	D	AY Y	R		-		Area Code Daytime Telephone Number								

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	(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) 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			\$	2,000.00

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			Reporting Period						
		'	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.

(Exclude contributions from political committees reported in Part A)

Name of Filing Committee	or Candidate		Rep					
				From: To				
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address	<u> </u>						\$	0.00
City	State	Zip Code (Plus 4))					

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.

lame of Filing Committee or Candidate		Reporting Period						
			From:			То:		
				DA	TE		P	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.0
Mailing Address							- \$	0.0
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
inter Grand Total of Part C on Schedule I, Detailed Summary Page,				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	DAMARIS L GARCIA FOR JUDGE Fro				From: <u>1/1/2022</u>			To: <u>12/31/2022</u>		
					D/	AMOUNT				
Full Name of Contributor					мо	DAY	YEAR		\$ 2.000.00	
Herman L. Reid III							1 = 2 1.11		\$ 2,000.00	
Mailing Address					12	12	2022	,		
City Evansville	State	Zip C	Code (Plus 4	4)	12	12	2022	- I		
	IN	4772	25							
Employer Name Ascension St. Vincent					Occupation Doctor					
Employer Mailing Address/Principal Plac	e of Business	(City			State		Zi	p Code (Plus 4)	
		F	Fort Branch	1		IN		47648		
nter Grand Total of Part C on Schedule I, Detailed Summary Page, Sect					on 3.		Γ		PAGE TOTAL	
,								\$	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	Name of Filing Committee or Candidate		Repor	ting Peri	od			
			From:			To:		
				[DATE		ı	AMOUNT
Full Name				МО	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plus 4)					
Receipt Description		I		1	1	1	ı	
	- 61 11 - 5 - 7 1		. .:	_		ſ	P	PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	i 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							
DAMARIS L GARCIA FOR JUDGE	From:	<u>1/1/2022</u> To:	12/31/2022					
L. 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 Cand	ame of Filing Committee or Candidate			Reporting Period					
			From:			To:			
				DATE			AMOUNT		
Full Name of Contributor			МО	DAY	YEAR				
Mailing Address						7 \$	0.00		
City	State	Zip Code (Plus 4)							
Description of Contribution:	•		•	•	•				
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detail			led Sum	mary Pag	ge,		PAGE TOTAL		
Section 2.						\$	0.00		

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	ame of Filing Committee or Candidate			Rep	Reporting Period						
				Fro	From:			То:			
					DATE				AMOUNT		
Full Name of Contributor					мо	DAY	YEAR				
Mailing Address				-				\$	0.00		
City	State		Zip Code(Plus 4)								
Employer of Contributor					Occup	ation					
Employer Mailing Address/Principal Place of Business City State					e Zip	Code(Plus 4)	Descri	ption	of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed							PAGE TOTAL				
Summary Page, Section 3.							0.00				

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	ame of Filing Committee or Candidate				Reporting Period				
				From			То:		
		AMOUNT							
To Whom Paid				DAY	YEAR				
Mailing Address						\$	0.00		
City State Zip Code (Plus 4)) Description of Expenditure					
inter Grand Total of Evnenditures on Dage 1. Deport Cover Dage Item							PAGE TOTAL		
nter Grand Total of Expenditures on Page 1, Report Cover Page, Item D						\$	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	ame of Filing Committee or Candidate				Reporting Period					
DAMARI	DAMARIS L GARCIA FOR JUDGE From:					1/1/2022	То:		12/31/2022	
						DATE			utstanding alance of Debt	
Name of Creditor Herman L. Reid III					мо	DAY	YEAR			
Mailing A	Address				12	12	2022	<u>2</u> \$	2,000.00	
City	Evansville	State	Zip Code (P	lus 4)	Descript	tion of Deb	t			
		IN	47725		Loan					
									PAGE TOTAL	
Ente	Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							\$	2,000.00	