### **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 2013	30151			Repo Filed		:	CAND	CANDIDATE COMMITTEE \( \sqrt{ LOBBYIST} \)								
Name of Filing C	Committee, Candid	late or L	obbyist:		COMN	1ITT	EE 7	TO ELEC	T ROSE	MAR	Y CRAV	VFORD J	UDGE				
Street Address:	P.O. BOX 130	)															
City:	PITTSBURGH							State:	PA			Zip Cod	le: 15	5090			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY P PRIMARY	RE-	2.		0 DA RIMA		POST-	3.		AMENDM REPORT?		Yes	No	~	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY F ELECTION	PRE-	- 5.		0 DA		POST-	6.		TERMINA REPORT?		Yes	No	~	
report type)	ANNUAL REPORT	7. <b>X</b>	<b>Year</b> 2022					IG METH CHECK C						<b>\</b>	DISKE	TTE	
Name of Office S	Sought by Candida	ite:	-					DATE (	N	District Number	Office Code	Par	ty Code	County	,		
	· ,							МО	DAY	YE	AR	DEM					
								11		8	2022	(SEE INSTRUCTIONS FOR CODES)					
•	Receipts and	МО	DAY YE	AR				МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
Expenditures	s from:		11 29	20	)22	ТО		12	2	31	2022						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$				12.65						
B. Total Monet	ary Contributions	And Rec	eipts (From Sc	hec	lule I	)	\$				0.00						
C. Total Funds Available (Sum Of Lines A and B) \$ 12.									12.65								
D. Total Expenditures (From Schedule III) \$ 12.65																	
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)				\$				0.00						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sche	dul	e II)		\$				0.00						
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV)				\$			2,5	00.00			1			
			А	FF	[DA\	/IT	SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign her	e. I	f this	is a	Can	ndidate r	eport, o	candi	date sig	ın here.					
I swear (or affirm) correct and comple	) that this report, inc ete.	luding the	e attached schedu	ules	filed o	on pa	per o	or by elec	tronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , true	<b>.</b>
Sworn to and subs	cribed before me thi day of	s	20							S	ignature	of Perso	n Submit	ting Rep	ort		
	Signatu	ıre				_						Prin	ted Name	e			-
My Commission Ex	cpires											Ema	il				
	мо	D	AY	YR					Ar	ea Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized Cor	mm	ittee,	Car	ndida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of i	ny knowl	edge and belief t	his	politic	al co	ommi	ittee has i	not viola	ted an	y provis	ions of the	e act of J	une 3,1	937 (P.L	. 1333,	
Sworn to and subso	ribed before me this										s	ignature o	of Candid	ate			
-	day of					_						Printe	d Name				
	Signature																
My Commission Exp	ires											Ema	ıı				
	мо	D	AY	ΥR					Area	Code		Da	aytime T	elephon	e Numb	er	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
COMMITTEE TO ELECT ROSEMARY CRAWFORD 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	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	(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

Name of Filing Committe	e or Candidate		Reporting	Period			
			From:		То	:	
		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.

PAGE TOTAL
\$ 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 Filing Committee or Cand	idate		Rep	oorting P	eriod			
			Fro	m:		To	):	
					DATE		АМ	OUNT
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.

Name of Filing Committee or Candidate	Reporting Period							
			From:			То:		
				DA	TE		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 Scheo	dule I, Detailed Sum	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				
		Fron	rom: To:						
			D/	<b>ATE</b>		АМО	UNT		
			МО	DAY	YEAR				
Mailing Address						\$	0.00		
State Zip Code (Plus 4)									
			Occupat	ion					
e of	City			State		Zip Code (	Plus 4)		
lule I, Detailed Su	ımmary Page,	Section	on 3.		4		<b>E TOTAL</b> 0.00		
	e of	e of City	State Zip Code (Plus 4)	State Zip Code (Plus 4) Occupat	State Zip Code (Plus 4)  Occupation  Octobroad  Octobro	State Zip Code (Plus 4)  Occupation  Occupation  Olivy State  State  Output  Date  Occupation  Output  Output	DATE AMO  MO DAY YEAR  \$ State Zip Code (Plus 4)  Occupation  Occupation  PAG		

## 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 C	andidate		Reporting Period					
			From:			To:		
				D	ATE		АМ	OUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description		·					•	
Enter Grand Total of Part E or	n Schedule T. Detailed	d Summary Page	Section	4			PAC	GE TOTAL
	Juliania I Detaile	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 Perio	od	
COMMITTEE TO ELECT ROSEMARY CRAWFORD 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 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 Candidat	:e		Reporting Period					
	Fro						o:	
				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					Period			
				Fro	om:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occupa	tion			
Employer Mailing Address/Principal Plac Business	ce of Cit	ity	State		Zip 4)	Code(Plus	Descri	ption o	f Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-K	Kind (	Contributions De	etaile	ed				PAGE TOTAL 0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting	g Period				
COMMITTEE TO ELECT ROSEMARY CRAWFORD JUDGE	From	11/29/2022	То:	12/31/2022		

				DATE			AMOUNT	
To Whom Paid PNC BANK			МО	DAY	YEAR			
Mailing Address P.O. BOX 609			1	1	2022	\$	12.65	
City PITTSBURGH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15230	Description of Expenditure SERVICE CHARGE					
Enter Grand Total of Evnenditures		PAGE TOTAL						
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	12.65	

## 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			Reporting Period					
COMMITTEE TO ELECT ROSEMARY CRAWFORD JUDGE			From:	11/29/2022 <b>To</b> :			12/31/2022	
					DATE			Outstanding Balance of Debt
Name of Creditor ROSEMARY CRAWFORD				мо	DAY	YEAR		
Mailing Address 4923 APPLE RIDGE DRIVE				1	28	2021	\$	2,500.00
City ALLISON PARK	State PA	<b>Zip Code (Pl</b> 15101	us 4)	Description of Debt LOAN				
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.								PAGE TOTAL
							\$	2,500.00