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 2015 | 0130 | | | Rep File | | | CA | NDI | DATE | | СОМ | AITTEE | V | LUBI | 51131 | |
|-------------------------------------------------------------------|--------------------------------------------|-------------|-----------------------|------------|-------------|-----|----------------|---------|---------|----------|--------|-----------|------------------------------|----------------|----------|-----------|----------------|
| Name of Filing C | ommittee, Candid | late or L | obbyist: | • | MAJC | OR, | RANI | A FR | IENI | OS OF | | • | | • | | | |
| Street Address: | | | | | | | | | | | | | | | | | |
| City: | PHILADELPHI | Α | | | | | | State | e: | PA | | | Zip Co | de: 19 | 146 | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDA PRIMARY | AY PRE- | - 2 | | 30 DA PRIMA | | P | POST- | 3. | | AMENDN REPORT | | Yes | No | |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDA ELECTION | AY PRE | - 5 | | 30 DA ELECT | | P | OST- | 6. | | TERMINA REPORT | | Yes | No | \ |
| report type) | ANNUAL REPORT | 7. X | Year 2022 | | | | FILIN | IG ME | | | | | PAPER | | | DISKE | TTE |
| Name of Office S | - Sought by Candida | te: | | | | | | DAT | ΈΟ | F ELE | CTIC | N | District Number | Office Code | Par | ty Code | County Code |
| JUDGE OF THE | MUNICIPAL COU | РТ | | | | | | МО | | DAY | YI | EAR | 1 | MCJ | DEN | М | 51 |
| JODGE OF THE | MONICH AL COO | XI | | | | | | | 11 | | 8 | 2022 | (SEE INSTRUCTIONS FOR CODES) | | | | |
| | Receipts and | МО | DAY | YEAR | l | | | МО | | DAY | ΥI | EAR | FC | OR OFFI | CE USE | ONLY | |
| Expenditures | trom: | | 11 29 | 2 | 022 | T | 0 | | 12 | | 31 | 2022 | | | | | |
| A. Amount Bro | ught Forward Froi | m Last R | eport | | | | \$ | | | | 13,9 | 923.41 | | | | | |
| B. Total Monetary Contributions And Receipts (From Schedule I) \$ | | | | | | | | | 0.00 | | | | | | | | |
| C. Total Funds Available (Sum Of Lines A and B) | | | | | | | \$ | | | | 13,9 | 923.41 | | | | | |
| D. Total Expenditures (From Schedule III) | | | | | | \$ | | | | 13,9 | 923.41 | | | | | | |
| E. Ending Cash Balance (Subtract Line D From Line C) | | | | | | | \$ | | | | | 0.00 | | | | | |
| F. Value Of In- | Kind Contribution | s Receiv | ed (From S | Schedu | le II) |) | \$ | | | | | 0.00 | | | | | |
| G. Unpaid Debt | s And Obligations | (From | Schedule I\ | V) | | | \$ | | | - | 41,1 | 101.59 | | | | | |
| | | | | AFF | IDA | VI | ΓSE | CTI | NC | | | | | | | | |
| I swear (or affirm) | s a Committee rep that this report, inc | - | _ | | | | | | | | | _ | | of my knov | wledge | and belie | ef , true |
| correct and comple | ete. cribed before me this | . | | | | | | | | | | | | | | | |
| | day of | | _ 20 | | | | | | | | 5 | Signature | e of Perso | n Submit | ting Rep | oort | |
| | Signatu | ıre | | | | | - | | | | | | Prin | ted Name | • | | |
| My Commission Ex | · | | | | | | - | | • | | | _ | Ema | | | | |
| | МО | | AY | YR | | | | | | | a Coo | de | Daytin | ne Teleph | one Nu | mber | |
| | a report of a cand | | | | | • | | | | | | w provis | ions of th | o act of l | uno 2 1 | 027 (B.I | 1222 |
| No 320) as amende | ed. | ily Kilowi | euge and bei | iei tilis | ponti | Cai | comm | ittee i | 145 III | ot viola | eu ai | iy provis | ions or th | e act of J | une 3,1 | 937 (P.L | . 1333, |
| Sworn to and subsc | ribed before me this day of | | 20 | | | | | | | | | s | ignature | of Candid | ate | | |
| | | | | | | | • | | | | | | Printe | ed Name | | | |
| My Commission Exp | Signature ires | | | | | | • | | | | | | Ema | il | | | — |
| | МО | D | AY | YR | | | | | | Area | Code | | D | aytime T | elephor | ne Numb | er |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| , - | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|-----------|--------------|------------|
| Name of Filing Committee or Candidate | Reporting | g Period | | |
| MAJOR, RANIA FRIENDS OF | 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 |) 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 | Period | (3) | \$ | 0.00 |
| 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E) | | | | |
| TOTAL for the Reporting |) 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

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 Candidat | Name of Filing Committee or Candidate | | Reporting | Period | | | |
|--------------------------------------|---------------------------------------|-------------------|-----------|--------|------|----|--------|
| | | 1 | 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.

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.

| Name of Filing Comn | nittee or Candidate | Re | eporting | Period | | | |
|------------------------|---------------------|-------------------|----------|--------|------|------------|------------|
| | | Fr | om: | | To |) : | |
| | | | | DATE | | | AMOUNT |
| Full Name of Contribut | or | | МО | DAY | YEAR | | |
| Mailing Address | | | | | | \$ | 0.00 |
| City | State | Zip Code (Plus 4) | | | | | |
| | | | | 1 | | | |
| | I | I | | | | | PAGE TOTAL |

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.

| Name of Filing Committee or Candidate | me of Filing Committee or Candidate | | Reporting Period | | | | | | |
|---------------------------------------|-------------------------------------|---------|------------------|------|-----|------|---------------|-----------|------|
| | | | From: | | | То: | | | |
| | | | | DA | TE | | P | AMOUNT | |
| Full Name of Contributing Committee | | | | мо | DAY | YEAR | | | 0.00 |
| Mailing Address | | | | | | | - \$ | | 0.00 |
| City | State | Zip Cod | e (Plus 4) | | | | | | |
| | | | | | | | | PAGE TOTA | AL |
| Enter Grand Total of Part C on Sche | dule I, Detailed Sun | nmary P | 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 | | | | Rep | orting Pe | eriod | | | |
|-----------------------------------------|---------------------|------|------------|---------|-----------|-------|------|------------|--------------|
| | | | | Fron | n: | | Te |) : | |
| | | | | | D | ATE | | | AMOUNT |
| Full Name of Contributor | | | | | МО | DAY | YEAR | \$ | 0.00 |
| Mailing Address | | | | | | | | | |
| City | State | Zip | Code (Plus | s 4) | | | | | |
| Employer Name | | | | | Occupa | tion | | | |
| Employer Mailing Address/Principal Plac | e of Business | | City | | | State | | Zip C | ode (Plus 4) |
| Enter Grand Total of Part C on Sche | dule I, Detailed Sเ | umma | ary Page, | Section | on 3. | | | _ | PAGE TOTAL |
| | | | | | | | | \$ | 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 Candidate | | Report | ing Peri | od | | | |
|-----------------------------|---------------------------|---------------|---------|----------|-----|------|----|------------|
| | | | From: | | | To: | | |
| | | | | D | ATE | | | AMOUNT |
| Full Name | | | | мо | DAY | YEAR | \$ | 0.00 |
| Mailing Address | | | | | | | 7 | |
| City | State | Zip Code (| Plus 4) | | | | | |
| Receipt Description | • | • | | | • | | | |
| Forten Commit Tatal of Boot | F an Cabadala I Batallad | I C B | C | | | | | PAGE TOTAL |
| Enter Grand Total of Part | e on Schedule I, Detalled | 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 Per | iod | | | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------|---------------|------------------------------|-------------------|--|--|--|--|--|--|
| MAJOR, RANIA FRIENDS OF | From: | <u>11/29/2022</u> To: | <u>12/31/2022</u> | | | | | | |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P | ER CONTRIBUTO | R | | | | | | | |
| 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, | | \$ | 0.00 | | | | | | |

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

| Name of Filing Committee or Car | | | | Reporting Period | | | | |
|---------------------------------|---------------------------------------------------------------------|-------------------|-------|---------------------|------|-------------|------------|------|
| | | | From: | | | То: | | |
| | | | | DATE | | | AMOUNT | |
| Full Name of Contributor | | | | DAY | YEAR | | | |
| Mailing Address | | | | | | 7 \$ | | 0.00 |
| City | State | Zip Code (Plus 4) | | | | | | |
| Description of Contribution: | • | | • | • | | | | |
| | | | | | - | | | |
| | ter Grand Total of Part F on Schedule II, In-Kind Contributions Det | | | ailed Summary Page, | | | PAGE TOTAL | |
| Section 2. | | | | | | \$ | (| 0.00 |

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

| Name of Filing Committee or Candidate | | | | Re | porting | Period | | | | |
|----------------------------------------|----------------|-----|------------------|--------|---------|----------------|-------|------|-----------------|------|
| | | | | Fro | m: | | To: | | | |
| | | | | | | DATE | | | AMOUN | т |
| Full Name of Contributor | | | | | мо | DAY | YEAR | | | |
| Mailing Address | | | | | | | | 1 | \$ | 0.00 |
| City | State | | Zip Code(Plus 4) | | | | | | | |
| Employer of Contributor | | | | | Occup | oation | | | | |
| Employer Mailing Address/Principal Pla | ce of Business | Cit | ty | Stat | e Zi | p Code(Plus 4) | Descr | ipti | ion of Contribu | tion |
| Enter Grand Total of Part G on Sch | edule II, In-K | ind | Contributions D | etaile | ed | | | | PAGE T | OTAL |
| Summary Page, Section 3. | | | | | | | | | | 0.00 |

SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate | Reporting I | Period | | |
|---------------------------------------|-------------|------------|-----|------------|
| MAJOR, RANIA FRIENDS OF | From | 11/29/2022 | То: | 12/31/2022 |

| | | | | | DATE | | | AMOUNT |
|-----------------|------------------------------------------------------------------------|-------|-------------------|---------|-------------|----------|----|------------|
| To W | hom Paid | | | мо | DAY | YEAR | | |
| RANI | RANIA MAJOR | | | | | ILAK | | |
| Mailing Address | | | | 12 | 31 | 2021 | \$ | 13,923.41 |
| City | PHILADELPHIA | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | |
| | | PA | 19146 | DEBT | | | | |
| _ | | | | | | | | PAGE TOTAL |
| Ente | nter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. | | | | | | | 13,923.41 |

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 | | | | | | |
|-------------------------------------------------------------------------|--------------|------------------------------------|----------|--------|---------------------|------------------------|-----|------|--------------------------------|---------------|--|
| MAJOR, RANIA FRIENDS OF | | | | | From: | 11/29/2022 To : | | | | 12/31/2022 | |
| DATE | | | | | | | | | Outstanding Balance of Debt | | |
| Name of Creditor RANIA MAJOR | | | | | | мо | DAY | YEAR | | | |
| Mailing Address | | | | | | 12 | 31 | 202 | 0 \$ | \$ 141,101.59 | |
| City | PHILADELPHIA | IILADELPHIA State Zip Code (Plus 4 | | lus 4) | Description of Debt | | | | | | |
| | | PA | PA 19146 | | | DEBT | | | | | |
| Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G. | | | | | | | | | | PAGE TOTAL | |
| | | | | | | | | | \$ | 141,101.59 | |