# **Campaign Finance Report**

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificat Number :	tion 2023	C0175			Repo Filed		CAI	NDI	DATE	✓	СС	OMMITTEI	E	LOB	BYIST			
Name of Filing	Committee, Candid	ate or Lo	obbyist:		MATTH	HEW S	s. Woli	F										
Street Address	Street Address:																	
City:							State:					Zip Cod	<b>Zip Code:</b> 19530					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. <b>X</b>	2ND FRIDA PRIMARY	Y PRE	- 2.		DAY MARY	Ρ	POST- 3.			AMENDMENT REPORT?		Yes	N	0	$\checkmark$	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	≣- 5.		DAY CTION	Ρ	POST-	5.		TERMINATION REPORT?		Yes	N	0	$\checkmark$	
report type)	ANNUAL REPORT	7.	<b>Year</b> 2023				ING ME ) CHEC					PAPER		$\checkmark$	DISK	ETTE		
Name of Office	Sought by Candidat	te:					DAT	ΕO	F ELEC	TION		District Number	Office Code	Par	ty Code	Cou Cod		
			_				мо		DAY	YEA	R	-1	CCJ	DEN	1			
JUDGE OF THE	E COMMONWEALTH	COURT						11		7	2023		(SEE INS	TRUCTI	ONS FOR	CODES	5)	
	Receipts and	мо	DAY	YEAR	Ł		мо		DAY	YEA	R	FO	R OFFIC	e use	ONLY			
Expenditure	s from:		1 1	2	023	то		3	2	7	2023							
A. Amount Bro	ought Forward From	n Last R	eport				\$				0.00							
B. Total Mone	tary Contributions	And Rec	eipts (Fron	1 Sche	dule I)		\$				0.00	_						
C. Total Funds	s Available (Sum Of	Lines A	and B)				\$				0.00							
D. Total Exper	nditures (From Scho	edule II	[)				\$				0.00							
E. Ending Cas	h Balance (Subtract	t Line D	From Line	C)		_	\$				0.00							
F. Value Of In	-Kind Contributions	Receive	ed (From S	chedu	le II)	_	\$				0.00	-						
G. Unpaid Deb	ots And Obligations	(From S	Schedule IV	')			\$				0.00							
							SECTIC											
	is a Committee repond ) that this report, incl												my know	ledae	and be	iof t		
correct and comp	lete.	-	attacheu sc	lieuule	s meu o	праре	er or by e	necu		arum, e	ile to	the best of	IIIY KIIOW	leuge		ier, ti	ue	
Sworn to and sub	day of	5	20							Sig	nature	e of Person	Submitti	ing Rep	oort			
	Signatu	re										Print	ed Name				_	
My Commission I	Expires							-				Emai	I					
	мо	DA	AY	YR					Area	a Code		Daytime	e Telepho	one Nu	mber			
	s a report of a cand ) that to the best of n ded.								-		provis	ions of the	act of Ju	ne 3,1	937 (P.	L. 133	3,	
Sworn to and subs						s	ignature o	f Candida	te			-						
day of 20 Printed Name											—							
My Commission Ex	Signature											Emai	1				_	
						_											_	
	мо	D/	AY .	YR	1				Area C	ode		Da	ytime Te	lephor	e Num	ber		

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** MATTHEW S. WOLF From: <u>1/1/2023</u> **To:** <u>3/27/2023</u> 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 0.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

# 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: To:			:			
		·			DATE			AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4	4)							
								PAGE TOTAL		
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.								0.00		

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. (Exclude contributions from political committees reported in Part A)										
Name of Filing Committee or Candida	te		Rep	orting P	eriod					
			From: To			D:				
					DATE			AMOUNT		
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address	_	_					\$	0.00		
City	State	Zip Code (Plus 4	)							
								PAGE TOTAL		
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2. \$ 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		ŀ	AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR		0.00		
Mailing Address							<b>-</b>   \$	0.00		
City	State	Zip Cod	e (Plus 4)							
					PAGE TOTAL					
Enter Grand Total of Part C on Sched	n 3.			\$	0.00					

### PART D 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				porting Period					
			Froi	n:		Т	):		
				D	ATE		АМ	IOUNT	
Full Name of Contributor				мо	DAY	YEAR	\$	0.00	
Mailing Address									
City	State	Zip Code (Pl	ıs 4)						
Employer Name				Occupation					
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)	
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section							P#	<b>AGE TOTAL</b> 0.00	

### PART E **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 Peric	d					
				From: To:						
				D	ATE			AMOUNT		
Full Name				мо	DAY	YEAR	\$		0.00	
Mailing Address										
City	State	Zip Code (	Plus 4)							
Receipt Description	·									
		_	<b>.</b>					PAGE TOT	AL	
Enter Grand Total of Part E on Schedule I, Detailed Summary Page, 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	<b>Reporting Period</b>		
MATTHEW S. WOLF	From:	<u>1/1/2023</u> <b>To:</b>	<u>3/27/2023</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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 Candidate Re			Reporting Period						
F						То:			
				DATE			AMOUNT		
Full Name of Contributor				DAY	YEAR				
Mailing Address		_				<b>7</b> \$		0.00	
City	State	Zip Code (Plus 4)							
Description of Contribution:			1						
Enter Grand Total of Part F on Sched Section 2.	iled Sum	mary Pag	je,		PAGE TOTA	AL.			
						\$		0.00	

### SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate				Reporting Period						
				From:						
					DATE		AMOUNT			
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address			-				<b>\$</b> 0.00			
City	State	Zip Code(Plus 4)								
Employer of Contributor				Occupa	ation					
Employer Mailing Address/Principal Plac	e 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 Summary Page, Section 3.					<b>PAGE TOTAL</b> 0.00					

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period						
	From			То:					
		DATE		AMOUNT					
To Whom Paid	мо	DAY	YEAR						
Mailing Address						\$	0.00		
City	Zip Code (Plus 4)	) Description of Expenditure							
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D							PAGE TOTAL		
	JII Page 1, Report C	lover Page, menn i				\$	0.00		