### **Campaign Finance Report**

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

Filer Identification 2023C0164 Number :						Report Filed By :		CAND	IDATE	✓ co		OMMITTEE		LOBBYIST								
Name of Filing C	Committee	e, Candida	ate or L	obbyist:		BRI	AN I	1CLAL	JGHLIN													
Street Address:																						
City:									State:				Zip Code	e: 19	114							
TYPE OF REPORT	6TH TUES PRE-PRIM		1. <b>X</b>	2ND FRIDAY PRIMARY	PRE	- [	2.	30 DA PRIMA		POST-	3.		AMENDME REPORT?	NT	Yes	No		<b>\</b>				
(place X to the right of	6TH TUES		4.	2ND FRIDAY ELECTION	PRE	- !	5.	30 DA ELECT		POST-	6.		TERMINAT	ΓΙΟΝ	Yes	No		<b>\</b>				
report type)	ANNUAL	REPORT	7.	<b>Year</b> 2023					IG METH CHECK O						Number Code  1 CPJ  SEE  FOR OFF		PAPER		$\checkmark$	DISKE	TTE	
Name of Office S	Sought by	Candidat	te:	-					DATE (	)F ELE	CTIO	N		Office Code	Par	ty Code	Cour					
									МО	DAY	YE	AR			DEM	1						
JUDGE OF THE	COURT	эг сомм	ON PLE	AS					11		7	2023		(SEE IN	STRUCTIO	ONS FOR O	CODES	)				
Summary of		and	МО	DAY	YEAR				мо	DAY	YE	AR	FOR	OFFIC	E USE	ONLY						
Expenditures	from:			1 1	2	023	Т	0	3	3	27	2023										
A. Amount Bro	ught Forv	vard Fron	ı Last R	eport				\$				0.00										
B. Total Monet	ary Contri	ibutions A	And Rec	eipts (From	Sche	dule	eI)	\$				0.00										
C. Total Funds	Available	(Sum Of	Lines A	and B)				\$				0.00										
D. Total Expend	ditures (F	rom Sche	edule II	I)				\$			84,1	.90.00										
E. Ending Cash	Balance	(Subtract	Line D	From Line C	)			\$				0.00										
F. Value Of In-	Kind Cont	ributions	Receiv	ed (From Sc	hedu	le II	[)	\$				0.00										
G. Unpaid Debt	s And Ob	ligations	(From S	Schedule IV)	)			\$				0.00			'							
					AFF	IDA	٩VI	T SE	CTION													
PART I - If this is	s a Comm	ittee repo	ort, trea	surer sign h	ere. 1	[f th	is is	a Can	didate r	eport, (	candio	date sig	jn here.									
I swear (or affirm) correct and comple		eport, incl	uding the	attached sch	edules	filed	d on	paper o	or by elec	tronic m	edium	, are to t	the best of	my knov	vledge a	and beli	ef , tr	ue				
Sworn to and subs	cribed befo	ore me this		20							s	ignature	e of Person	Submitt	ing Rep	ort						
		Signatui	re					-					Printe	ed Name	1			_				
My Commission Ex	cpires	•											Email					-				
		мо	D	AY	YR					Ar	ea Cod	le	Daytime	Teleph	one Nu	mber						
Part II- If this is	a report	of a cand	lidate's	authorized (	Comn	nitte	e, C	andida	ate shall	sign h	ere.											
I swear (or affirm) No 320) as amende		e best of m	y knowle	edge and belie	f this	polit	tical	commi	ittee has ı	not viola	ted an	y provisi	ions of the	act of Ju	ıne 3,19	937 (P.L	. 133	3,				
Sworn to and subsc		e me this										Si	ignature of	Candida	ate			-				
	day of							-					Printed	Name				-				
	9	Signature						-										_				
My Commission Exp													Email									
	_	мо	D	AY	YR			•		Area	Code		Day	time To	elephon	e Numb	er	-				

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
BRIAN MCLAUGHLIN	From:	1/1/202	<u>3</u> To:	3/27/2023
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	) 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
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
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 Candida	te		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	orting P	eriod			
			Fro	m:		To	<b>)</b> :	
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	•)					
								PAGE TOTAL

#### **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		,	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 Schee	dule 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.)

Name of Filing Committee or Candidate			Rep	orting Pe	riod			
			Fron	n:		То	:	
				D	ATE		Α	MOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupa	tion	-	-	
Employer Mailing Address/Principal Place	e of Business	City			State		Zip Co	de (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Sเ	ummary 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	_						$\neg$	
City	State	Zip Code (	Plus 4)					
Receipt Description	•	•		•	•	•	•	
			<b>.</b>	_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	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 Perio	d						
BRIAN MCLAUGHLIN	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 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	TF)							
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,	<u> </u>	\$	0.00					

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Filing Committee or Ca	e of Filing Committee or Candidate				Reporting Period				
			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:	•		•	•					
				_	Г				
Enter Grand Total of Part F of Section 2.	n Schedule II, In-Ki	nd Contributions Detai	led Sum	nmary Pa	ge,		PAGE TOTAL		
						\$	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	Re	Reporting Period					
BRIAN MCLAUGHLIN	Fro	om	1/1	1/2023	To:	3/27/2023	
			DATE			AMOUNT	
To Whom Paid	м	40	DAY	YEAR			

					DATE		AMOUNT
To Who	om Paid				DAY	YEAR	
BRIAN	MCLAUGHLIN FOR JUDGE			МО	DAT	TEAR	
Mailing	Address			2	3	2023	\$ 15,130.00
City	PHILADELPHIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
		PA	19114	LOAN			
To Who	om Paid			мо	DAY	YEAR	
BRIAN	MCLAUGHLIN FOR JUDGE			МО	DAI	ILAK	
Mailing	Address			2	21	2023	\$ 260.00
City	PHILADELPHIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
PA 19114				LOAN			
To Who	om Paid			мо	DAY	YEAR	
BRIAN	MCLAUGHLIN FOR JUDGE			1-10		ILAK	
Mailing	Address			2	24	2023	\$ 4,800.00
City	PHILADELPHIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	
		PA	19114	LOAN			
To Who	om Paid			мо	DAY	YEAR	
BRIAN	MCLAUGHLIN FOR JUDGE			MO	DAT	TEAR	
Mailing	Address			2	28	2023	\$ 64,000.00
City	City PHILADELPHIA State Zip Code (Plus 4)			Descrip	tion of Exp	enditure	
		PA	19114	LOAN			
							PAGE TOTAL
Enter	Grand Total of Expendit	ures on Page 1, Re	port Cover Page, Item D	).			\$ 84,190.00

		PA	19114	LOAN		
	Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.				PAGE TOTAL	
					\$	84,190.00