

# Campaign Finance Report

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

Filer Identification Number : 2023C0092		Report Filed By :		CANDIDATE <input checked="" type="checkbox"/>		COMMITTEE		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: JUDGE PATRICIA MCCULLOUGH											
Street Address:											
City:				State:		Zip Code: 15241					
TYPE OF REPORT  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1. <input checked="" type="checkbox"/>	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No <input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2023	FILING METHOD ( ) CHECK ONE		PAPER <input checked="" type="checkbox"/>		DISKETTE			
Name of Office Sought by Candidate:					DATE OF ELECTION			District Number	Office Code	Party Code	County Code
JUSTICE OF THE SUPREME COURT					MO	DAY	YEAR	-1	SPM	REP	
					11	7	2023	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		1	1	2023		3	27	2023			
A. Amount Brought Forward From Last Report					\$		0.00				
B. Total Monetary Contributions And Receipts (From Schedule I)					\$		0.00				
C. Total Funds Available (Sum Of Lines A and B)					\$		0.00				
D. Total Expenditures (From Schedule III)					\$		1,948.04				
E. Ending Cash Balance (Subtract Line D From Line C)					\$		(1,948.04)				
F. Value Of In-Kind Contributions Received (From Schedule II)					\$		0.00				
G. Unpaid Debts And Obligations (From Schedule IV)					\$		0.00				

## AFFIDAVIT SECTION

**PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.**

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.**

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
**Detailed Summary Page**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
JUDGE PATRICIA MCCULLOUGH	From: <u>1/1/2023</u> To: <u>3/27/2023</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 0.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 0.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 0.00
<b>All Other Contributions (Part D)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 0.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)</b>	\$ 0.00
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Name of Filing Committee or Candidate	Reporting Period
	From: To:

	DATE	AMOUNT
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

<b>PAGE TOTAL</b>	
\$	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)**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>  <b>From:</b> <span style="float: right;"><b>To:</b></span>
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DATE				AMOUNT
<b>Full Name of Contributor</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<div style="text-align: right;">\$ 0.00</div>
<b>Mailing Address</b>				
<b>City</b> <span style="margin-left: 20px;"><b>State</b></span> <span style="margin-left: 20px;"><b>Zip Code (Plus 4)</b></span>				

**Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.**

<b>PAGE TOTAL</b>
\$ 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: <span style="float: right;">To:</span>

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$	0.00
Mailing Address							
City	State	Zip Code (Plus 4)					

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

<b>PAGE TOTAL</b>
\$ 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	Reporting Period
	From: To:

				DATE			AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00	
Mailing Address								
City	State	Zip Code (Plus 4)						
Employer Name				Occupation				
Employer Mailing Address/Principal Place of Business			City		State		Zip Code (Plus 4)	

**Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.**

<b>PAGE 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	Reporting Period  From: <span style="float: right;">To:</span>
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				DATE	AMOUNT		
Full Name				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					
Receipt Description							

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
JUDGE PATRICIA MCCULLOUGH		From: <u>1/1/2023</u> To: <u>3/27/2023</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period		(1)	\$ 0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period		(2)	\$ 0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period		(3)	\$ 0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)			\$ 0.00



**SCHEDULE II**  
**PART F**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OF \$50.01 TO \$250.00**

Name of Filing Committee or Candidate	Reporting Period  From: <span style="float: right;">To:</span>
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						<b>PAGE TOTAL</b>  \$ 0.00

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

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

# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
JUDGE PATRICIA MCCULLOUGH	From <u>1/1/2023</u> To: <u>3/27/2023</u>

DATE				AMOUNT
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
FEDEX				
<b>Mailing Address</b> 1720 WASHINGTON RD. NORMAN CENTER	2	16	2023	\$ 68.48
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>	
			COPIES	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
FEDEX				
<b>Mailing Address</b> 1720 WASHINGTON RD. NORMAN CENTER	2	16	2023	\$ 55.43
<b>City</b> PITTSBURGH	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>	
	PA	15241	COPIES - PC TIME	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
AAA CENTRAL - SOUTH HILLS BRANCH				
<b>Mailing Address</b> 160 FORT COUCH RD.	3	1	2023	\$ 10.00
<b>City</b> PITTSBURGH	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>	
	PA	15241	NOTARY FEES	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
BETHEL PARK PRINTING				
<b>Mailing Address</b> 5237 BRIGHTWOOD	3	3	2023	\$ 122.52
<b>City</b> BETHEL PARK	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>	
	PA	15102	FLIERS	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
FARIFIELD MARRIOTT				
<b>Mailing Address</b> 4 TERMINAL DR.	3	10	2023	\$ 135.42
<b>City</b> MIDDLETOWN	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>	
	PA	17057	LODGING	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
ABBY BARNES				
<b>Mailing Address</b>	3	12	2023	\$ 147.60
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>	

To Whom Paid			MO	DAY	YEAR	\$ 0.52
FEDEX			3	14	2023	
Mailing Address 1720 WASHINGTON RD. NORMAN CENTER			3	14	2023	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15241	Description of Expenditure COPIES			

To Whom Paid			MO	DAY	YEAR	\$ 5.00
AAA CENTRAL - SOUTH HILLS BRANCH			3	14	2023	
Mailing Address 160 FORT COUCH RD.			3	14	2023	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15241	Description of Expenditure NOTARY FEE			

To Whom Paid			MO	DAY	YEAR	\$ 216.14
BETHEL PARK PRINTING			3	15	2023	
Mailing Address 5237 BRIGHTWOOD RD.			3	15	2023	
City BETHEL PARK	State PA	Zip Code (Plus 4) 15102	Description of Expenditure FLIERS			

To Whom Paid			MO	DAY	YEAR	\$ 140.08
MINUTEMAN PRESS			3	17	2023	
Mailing Address 1727 LINCOLN HIGHWAY			3	17	2023	
City NORTH VERSAILLES	State PA	Zip Code (Plus 4) 15137	Description of Expenditure PALM CARDS			

To Whom Paid			MO	DAY	YEAR	\$ 285.69
OFFICE DEPOT			3	18	2023	
Mailing Address 4000 OXFORD DR.			3	18	2023	
City BETHEL PARK	State PA	Zip Code (Plus 4) 15102	Description of Expenditure COPIES AND FLIERS			

To Whom Paid			MO	DAY	YEAR	\$ 303.88
BETHEL PARK PRINTING			3	21	2023	
Mailing Address 5237 BRIGHTWOOD RD.			3	21	2023	
City BETHEL PARK	State PA	Zip Code (Plus 4) 15102	Description of Expenditure RACK CARDS			

To Whom Paid			MO	DAY	YEAR	\$ 106.82
HOLIDAY INN EXPRESS			3	24	2023	
Mailing Address 220 FINLEY AVE			3	24	2023	
City CARNEGIE	State PA	Zip Code (Plus 4) 15106	Description of Expenditure LODGING			

To Whom Paid			MO	DAY	YEAR	\$ 50.00
CHRISTOPHER MEROLA			3	24	2023	
Mailing Address 123 IROQUOIS DR.			3	24	2023	
City BUTLER	State PA	Zip Code (Plus 4) 16001	Description of Expenditure STRATEGIC STATEMENT FOR REPORTER			

<b>To Whom Paid</b> FEDEX			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 2.62
<b>Mailing Address</b> 1720 WASHINGTON RD. NORMAN CENTER			3	24	2023	
<b>City</b> PITTSBURGH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15241	<b>Description of Expenditure</b> COPIES			

<b>To Whom Paid</b> SUNOCO			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 49.00
<b>Mailing Address</b> 120 EAST MCMURRAY RD.			3	25	2023	
<b>City</b> CANONSBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15317	<b>Description of Expenditure</b> FUEL			

<b>To Whom Paid</b> OFFICE DEPOT			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 248.84
<b>Mailing Address</b> 4000 OXFORD DR.			3	26	2023	
<b>City</b> BETHEL PARK	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15102	<b>Description of Expenditure</b> PALM CARDS			

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						<b>\$</b> 1,948.04

