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 2	2023c0	0179			Rep File			CAN	DIC	DATE	\	C C	ТТІММС	EE	Ш	LOBI	BYIS	Т	
Name of Filing C	ommittee, Car	ndidat	te or Lo	obbyist:		SWE	ENI	EY, PA	ATRIC	〈 AL	LEN									
Street Address:																				
City:	_								State:	ł				Zip Co	ode	: 152	212			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1	l.	2ND FRIDA PRIMARY	Y PRE	- 2	2. X	30 DA			OST-	3.			AMENDMENT REPORT?		Yes		No	\
(place X to the right of	6TH TUESDAY PRE-ELECTION		1.	2ND FRIDA ELECTION	y pre	- [5.	30 DA		P	OST-	6.		TERMIN REPOR		ION	Yes		No	\
report type)	ANNUAL REPO	ORT 7	7.	Year 2023					NG MET					PAPER	2		/	DIS	KETTE	
Name of Office S	ought by Can	didate	:						DATE	OF	F ELE	СТІ	ON	District Numbe		Office Code	Par	ty Co	ode Cou Cod	
JUDGE OF THE	COURT OF CO	ОММС	N PLE	AS - ALLEG	HENY				МО		DAY		YEAR	5		CPJA	DEN	1	02	
				I	I					11		7	2023			`			OR CODE	S)
Summary of Expenditures		d	МО	1 1	YEAR	023	т	0	МО	5	DAY	1	YEAR 2023		OR	OFFIC	E USE	ON	.Y	
A. Amount Bro	ught Forward	From	Last Ro			023				J			0.00	-						
B. Total Moneta				-	Sche	dule	I)	\$					0.00	4						
C. Total Funds	Available (Sur	n Of L	ines A	and B)				\$					0.00							
D. Total Expend	ditures (From	Sched	dule II	[)				\$				41	,896.43	1						
E. Ending Cash	Balance (Sub	tract l	Line D	From Line	C)			\$			('	41,	896.43)]						
F. Value Of In-	Kind Contribut	tions I	Receive	ed (From S	chedu	le II)	\$					0.00							
G. Unpaid Debt	s And Obligati	ions (From S	chedule IV)			\$					0.00							
					AFF	IDA	VI	T SE	CTIO	N										
PART I - If this is	a Committee	repor	rt, trea	surer sign	here. 1	[f thi	is is	a Car	ndidate	e re	port, c	and	didate si	gn here						
I swear (or affirm) correct and comple		, includ	ding the	attached sc	hedules	filed	l on	paper	or by el	ectr	onic m	ediu	ım, are to	the best	of r	ny know	ledge	and I	elief , t	rue
Sworn to and subs	cribed before me day of	e this		20						-			Signatur	e of Pers	on :	Submitti	ng Rep	ort		_
	Sig	nature	1					- -		-				Pri	inte	d Name				
My Commission Ex	cpires							_		-				Em	ail					
	МО		DA	ΛΥ	YR						Are	ea C	ode	Dayti	me	Telepho	one Nu	mbei		
Part II- If this is	a report of a	candi	date's	authorized	Comn	nitte	e, C	andid	ate sha	all s	ign he	ere.								
I swear (or affirm) No 320) as amende		t of my	knowle	dge and beli	ef this	polit	ical	comm	ittee ha	s no	t viola	ted	any provi	sions of t	he a	act of Ju	ne 3,1	937 (P.L. 13	33,
Sworn to and subsc	ribed before me day of	this		20										Signature	of	Candida	te			_
	<u> </u>							-						Prin	ted	Name				-
My Commission Exp	Signat	ure						-		-				Em	ail					- $ $
•								-				_								_
	МО	,	DA	NΥ	YR						Area	Cod	е	ı	Day	time Te	lephor	ie Nu	mber	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	Period		
SWEENEY, PATRICK ALLEN	From:	1/1/202	<u>3</u> To:	5/1/2023
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 Page			\$	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	1	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.

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 Committ	tee or Candidate		Rep	orting P	eriod			
			Froi	m:		To):	
					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.

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		A	MOUNT
Full Name of Contributing Committee				МО	DAY	YEAR	\$	0.00
Mailing Address							7 *	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	lule 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			
			Fror	n:		To):	
				D	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupa	tion			
Employer Mailing Address/Principal Pla	ce of Business	City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Scho	dule I, Detailed S	Summary Page,	, Sectio	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:		
		'			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	'						<u> </u>	
	- C		. .:	_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	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 Period	d	
SWEENEY, PATRICK ALLEN	From:	<u>1/1/2023</u> To:	5/1/2023
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,		\$	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:			To:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	-	-	•	•	•			
Enter Grand Total of Part F on Sche	dule II, In-Kind	d Contributions Deta	iled Sum	mary Pag	ge,		PAGE TOTA	L
Section 2.						\$		0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Rep	porting	Period			
				Fro	m:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address				-				\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occup	ation			
Employer Mailing Address/Principal Plac	e of Business	City	у	State	e Zip	Code(Plus 4)	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, In-Kin	nd C	Contributions D	etaile	ed				PAGE TOTAL
Summary Page, Section 3.									0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Per	iod		
SWEENEY, PATRICK ALLEN	From	1/1/2023	То:	<u>5/1/2023</u>

			I					
					DATE			AMOUNT
To Wh	nom Paid			МО	DAY	YEAR		
Patric	k Sweeney for Judge							
Mailin	g Address			1	10	2023	\$	2,500.00
City	Pittsburgh	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	15212	Campai	gn Loan			
To Wh	nom Paid			мо	DAY	YEAR		
Patric	k Sweeney for Judge			140		ILAK		
Mailin	g Address			1	24	2023	\$	5,000.00
City	Pittsburgh	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	15212	Campai	gn Loan			
To Wh	nom Paid			МО	DAY	YEAR		
Patric	k Sweeney for Judge			MO	DAI	ILAK		
Mailin	g Address			2	5	2023	\$	8,000.00
City	Pittsburgh	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	-	PA 15212						
To Wh	nom Paid			Mo	DAY	YEAR		
Patric	k Sweeney for Judge			МО	DAT	TEAR		
Mailin	g Address			4	19	2023	\$	15,000.00
City	Pittsburgh	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	15212	Campaign Loan				
To Wh	nom Paid			МО	DAY	YEAR		
Alex F	Rose			МО	DAT	TEAR		
Mailin	g Address			1	1	2023	\$	2,000.00
City	Pittsburgh	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	-	PA	15203	Staff Co	mpensatio	n		
To Wh	nom Paid			MC	DAY	VEAD		
	and Copy Center			МО	DAT	YEAR		
Print a							٠ ـ	1 000 45
	g Address			2	27	2023	\$	1,896.43
	g Address Verona	State	Zip Code (Plus 4)		27 tion of Exp		*	1,896.43

To Whom Paid			МО	DAY	YEAR		
Mosaic Communications Mailing Address			МО	DAT	YEAR		
			4	6	2023	\$	7,500.00
City Arlington	State	Zip Code (Plus 4)	Description of Expenditure				
	l va	22207	Ad Buy				
	• • • • • • • • • • • • • • • • • • • •	LLLU,	,				
	•	•					PAGE TOTAL
nter Grand Total of Exp	•	eport Cover Page, Item D				\$	
nter Grand Total of Exp	•	•				\$	
Enter Grand Total of Exp	•	•				\$	
Enter Grand Total of Exp	•	•				\$	
Enter Grand Total of Exp	•	•				\$	PAGE TOTAL 41,896.43
Enter Grand Total of Exp	•	•				\$	