Campaign Finance Report

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

Filer Identification 2023C0085 Number :							port ed B		CAND	IDAT	E	√	CON	OMMITTEE		LOBBYIST			
Name of Filing C	ommittee,	Candida	ate or Lo	obbyist:		PAN	NELL	A, BR	IAN			•							
Street Address:																			
City:									State:					Zip Code	: 18	040			
TYPE OF REPORT	6TH TUESD PRE-PRIMA		1.	2ND FRIDAY PRIMARY	PRE-	-	2. X	30 DA PRIMA		POST	- 3	3.		AMENDME REPORT?	NT	Yes	No		\
(place X to the right of	6TH TUESD PRE-ELECT		4.	2ND FRIDAY ELECTION	' PRE	-	5.	30 DA ELECT		POST	POST- 6.			TERMINAT REPORT?	ION	Yes	No		\
report type)	ANNUAL R	REPORT	7.	Year 2023					IG METH CHECK (PAPER		√	DISKE	TTE	
Name of Office S	ought by C	Candidat	:e:		DATE OF				OF EI	EC	TION		District Number	Office Code	Par	ty Code	Coun		
				_					МО	DA	Y	YEAR		3	СРЈ	DEN	1	48	
JUDGE OF THE	COURT OF	COMM	ON PLE	AS					1	1	-	7 202	23	(SEE INSTRUCTIONS FOR CODES))	
Summary of	•	and	МО	DAY	YEAR	l		- 1	МО	DA	Y	YEAR		FOR	OFFIC	E USE	ONLY		
Expenditures	enditures from: 1 1 2023 TO 5 1 202								23										
A. Amount Bro	ught Forwa	ard From	ı Last R	eport				\$				0.0	00						
B. Total Moneta	ary Contrib	utions A	and Rec	eipts (From	Sche	dule	e I)	\$				33,371.8	86						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$				33,371.8	86						
D. Total Expend	ditures (Fr	om Sche	dule II	[)				\$				33,371.8	36						
E. Ending Cash	Balance (S	Subtract	Line D	From Line C	:)			\$				0.0	00						
F. Value Of In-	Kind Contri	ibutions	Receive	ed (From Sc	hedu	le I	I)	\$				0.0	00						
G. Unpaid Debt	s And Obli	gations	(From S	chedule IV))			\$				0.0	00						
					AFF	ΊD	AVI	T SE	CTION										
PART I - If this is	a Commit	tee repo	ort, trea	surer sign h	iere. I	[f th	nis is	a Can	didate	repor	t, ca	ndidate	sign	n here.					
I swear (or affirm) correct and comple		port, incl	uding the	attached sch	edules	file	ed on	paper o	or by elec	tronic	med	dium, are t	to th	e best of r	ny know	/ledge	and beli	ef , tr	ue.
Sworn to and subs	cribed before day of	e me this		20								Signat	ture (of Person S	Submitti	ing Rep	ort		_
		Signatur						- -						Printe	d Name				_
My Commission Ex	pires	oigilatu.												Email					-
	М	0	DA	4Y	YR						Area	Code		Daytime	Telepho	one Nu	mber		
Part II- If this is	a report o	f a cand	idate's	authorized (Comn	nitte	ee, C	andida	ate shal	l sign	her	re.							
I swear (or affirm) No 320) as amende		best of m	y knowle	dge and belie	f this	poli	itical	commi	ittee has	not vi	olate	ed any pro	visio	ons of the a	act of Ju	ne 3,1	937 (P.L	. 1333	3,
Sworn to and subsc		me this											Sig	nature of	Candida	te			-
	day of — —			_ 20				-						Printed	Name				-
	Sig	gnature						-											_
My Commission Exp	ires													Email					
		мо	D/	AY	YR			-		Ar	Area Code Daytime Telephone Number								

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
PANELLA, BRIAN	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)			\$	33,371.86
TOTAL for the Reporting	Period	(3)	\$	33,371.86
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 and totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page			\$	33,371.86

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Reporting Period					
			From: To			:		
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
	•	·			•	•	$\overline{}$	DACE TOTAL

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

PAGE TOTAL\$ 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 Filling Committee of Candidate			Reporting Period From: To:					
			l		DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						

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

PAGE TOTAL \$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		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule 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 Co	Name of Filing Committee or Candidate Re					eporting Period					
PANELLA, BRIAI	N				Fron	n:	1/1/2	023 T e	o:	5/1/2023	
						D/	ATE		AN	OUNT	
Full Name of Con	tributor					МО	DAY	YEAR			
Brian Panella											
Mailing Address	905 Iron Lane								\$	50.88	
City Easton		State	Zi	p Code (Plus	i 4)	1	7	2023	3		
		PA	18040								
Employer Name	Goudsouzian & Associ					Occupat	ion A	ttorney	/		
Employer Mailing Business	Address/Principal Plac	e of		City			State		Zip Cod	e (Plus 4)	
2940 William Penn Highway Easton					PA		18045				
Full Name of Con	tributor						DAY	VEAD			
Brian Panella				МО	DAY	YEAR					
Mailing Address	905 Iron Lane								\$	1,624.98	
City Easton		State	Zi	p Code (Plus	i 4)	4	28	2023	3		
		PA	18	3040							
Employer Name	Goudsouzian & Associ	ates				Occupation Attorney					
Employer Mailing Business	Address/Principal Plac	e of		City			State		Zip Code	e (Plus 4)	
2940 William Pe	nn Highway			Easton			PA		18045		
Full Name of Con	tributor										
Brian Panella						МО	DAY	YEAR			
Mailing Address	905 Iron Lane								\$	10,000.00	
City Easton		State	Zi	p Code (Plus	4)	4	18	2023	3		
		PA	18	3040							
Employer Name Goudsouzian & Associates				Occupation Attorney							
Employer Mailing Address/Principal Place of Business City					State		Zip Cod	e (Plus 4)			
2940 William Penn Highway Easton			PA 18045								

									•
Full Name of Cor Brian Panella							YEAR		
Mailing Address	905 Iron Lane							\$	1,696.00
City Easton		State	Zi	p Code (Plus 4)	4	17	2023	3	
		PA	18	3040					
Employer Name Goudsouzian & Associates					Occupat	tion A	ttorne	/	
Employer Mailing Address/Principal Place of Business City				•	State		Zip Code (Plus 4)	
2940 William Penn Highway Easton				PA			18045		
Full Name of Contributor Brian Panella					МО	DAY	YEAR		
Mailing Address	905 Iron Lane							\$	20,000.00
City Easton		State	Zi	p Code (Plus 4)	1	24	2023	3	
		PA	18	3040					
Employer Name	Goudsouzian & Assoc	ciates			Occupat	tion A	ttorne	/	
Employer Mailing Address/Principal Place of City Business			City	1	State		Zip Code (Plus 4)	
2940 William Penn Highway Easton				PA		18045			
Enter Grand To	otal of Part C on Sche	edule I. Detailed S	umr	narv Page, Secti	on 3.		Γ	PAG	E TOTAL
			J	,				\$	33,371.86

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 Co	andidate		Report	ting Perio	bd			
			From:			То:		
				D	ATE		AN	10UNT
Full Name				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	•						
Enter Grand Total of Part E or	Schedule T Detaile	d Summary Page	Section	4			PA	GE TOTAL
Lines Grana Fotal of Fair 2 of	r benedule 1/ betanet	z Sammary r age,	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	Reporting Period	d	
PANELLA, BRIAN	From:	<u>1/1/2023</u> To:	<u>5/1/2023</u>
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 Candid	ame of Filing Committee or Candidate			Reporting Period					
	From:			То:					
				DATE			AMOUNT		
Full Name of Contributor			МО	DAY	YEAR				
Mailing Address						\$	0.00		
City	State	Zip Code (Plus 4)							
Description of Contribution:									
Enter Grand Total of Part F on S	chedule II, In-Kir	nd Contributions Deta	iled Sun	nmary Pag	je,		PAGE TOTAL		
Section 2.						\$	0.00		

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	lame of Filing Committee or Candidate				Re	porting l	Period			
					Fro	om:		To:		
					•		DATE			AMOUNT
Full Name of Contributor						МО	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupa	ition		•	
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iption	of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, I	in-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee	or Candidate		Reporti	ng Period					
PANELLA, BRIAN			From	1/	1/2023	То:	5/1/2023		
				DATE			AMOUNT		
To Whom Paid Lehigh Valley Printing			МО	DAY	YEAR				
Mailing Address 4140 A	Airport Road		1	7	2023	\$	50.88		
City Allentown	State	Zip Code (Plus 4)	Descrir	Description of Expenditure					
Allelitowii	PA	18109		Campaigr			Materials		
To Whom Paid The Bipartisan Committee	to Elect Brian Panella		МО	DAY	YEAR				
Mailing Address 2940 V	- 2940 William Felli Highway				2023	\$	20,000.00		
City Easton	State	Zip Code (Plus 4)	Descrip	tion of Exp	penditure	<u>'</u>			
	PA	18045	1	Campaigr					
To Whom Paid The Bipartisan Committee to Elect Brian Panella			МО	DAY	YEAR				
Mailing Address 2940 V	William Penn Highway		4	18	2023	\$	10,000.00		
City Easton	State	Zip Code (Plus 4)	Descrip	otion of Exp	penditure	:			
	PA	18045	Loan to Campaign						
To Whom Paid Lehigh Valley Printing			МО	DAY	YEAR				
Mailing Address 4140 A	Airport Road		4	17	2023	\$	1,696.00		
City Allentown	State PA	Zip Code (Plus 4) 18109		otion of Exp Campaign			Materials		
To Whom Paid Adams Outdoor GP, LLC	-		МО	DAY	YEAR				
Mailing Address 2176 Avenue C			4	28	2023	\$	1,624.98		
City Bethlehem	State	Zip Code (Plus 4)	Descrip	tion of Ex	l penditure	<u> </u>			
PA 18017			Description of Expenditure Loan to Campaign/Payment for Advertising						
	· -						PAGE TOTAL		
nter Grand Total of Expenditures on Page 1, Report Cover Page, Item D						\$	33,371.86		