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 202	3C0147				Report Filed B		CAND	IDATE	~	CC	MMITTEE		LOB	BYIST		
Name of Filing C	ommittee, Candi	date or L	obbyist	:	S	SALA, P	ETER	J.									
Street Address:																	
City:	_							State:				Zip Code	e: 16	5502			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FR PRIMAR		PRE-	2. X	30 DA		POST-			AMENDME REPORT?	NT	Yes	N	0	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FR ELECTI		PRE-	5.	30 DA		POST-	6.		TERMINAT REPORT?	ΓΙΟΝ	Yes	N	0	\
report type)	ANNUAL REPOR	7.	Year 2	023				NG METH CHECK (PAPER		/	DISK	ETTE	
Name of Office S	ought by Candid	ate:						DATE (OF ELE	CTI	ON	District Number	Office Code	Pai	ty Cod	Cou	
								МО	DAY	•	YEAR	6	CPJ	DEI	М	1	
JUDGE OF THE	COURT OF COM	MON PLE	AS					1	1	7	2023		(SEE IN	STRUCTI	ONS FOR	CODES	5)
Summary of	•	МО	DAY	Ì	YEAR			МО	DAY	,	YEAR	FOF	OFFI	CE USE	ONLY		
Expenditures	from:		3	28	20	23 T	0		5	1	2023						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$		·	(3,	255.04)						
B. Total Monet	ary Contributions	And Rec	eipts (F	rom	Sched	ule I)	\$				0.00						
C. Total Funds	Available (Sum C	of Lines A	and B)				\$			(3,	255.04)						
D. Total Expend	ditures (From Sc	hedule II	I)				\$			3	,473.25						
E. Ending Cash	Balance (Subtra	ct Line D	From L	ine C)		\$			(6,	728.29)						
F. Value Of In-	Kind Contribution	s Receiv	ed (Fro	m Sc	hedule	e II)	\$				0.00						
G. Unpaid Debt	s And Obligation	s (From S	Schedul	e IV)	١		\$				0.00			•			
					AFFI	DAVI	T SE	CTION									
PART I - If this is				_													
I swear (or affirm) correct and comple	that this report, in ete.	cluding the	e attache	d sch	edules f	filed on	paper	or by elec	tronic n	nediu	m, are to	the best of	my kno	wledge	and be	lief , tr	rue
Sworn to and subs	cribed before me th day of	is	20								Signature	e of Person	Submit	ting Re	oort		_
	Signat	ure					<u>-</u>					Printe	ed Name	e			_
My Commission Ex	pires											Email					-
	мо	D	AY		YR				Aı	rea C	ode	Daytime	Teleph	one Nu	mber		
Part II- If this is	a report of a car	ndidate's	authori	zed (Commi	ittee, C	andid	ate shal	l sign h	ere.							
I swear (or affirm) No 320) as amende		my knowl	edge and	belie	f this p	oolitical	comm	ittee has	not viola	ated a	any provis	ions of the	act of J	une 3,1	937 (P.	L. 133	з,
Sworn to and subsc	ribed before me this day of	5	20								S	ignature of	Candid	ate			- $ $
			 				-					Printed	Name				- $ $
My Commission Exp	Signature	ı					-					Email					-
,							_										_
	МО	D	AY		YR				Area	Cod	e	Day	ytime T	elephor	ne Num	ber	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
SALA, PETER J.	From:	<u>3/28/202</u>	<u>3</u> To:	<u>5/1/2023</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g 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	J 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	J Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g 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 Candidat	e	R	Reporting	Period			
		F	rom:		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)

(Exclus	de contributions no	in pontical comm	itte	es rep	or teu	ili Pait	~)	
Name of Filing Committee	e or Candidate		Rep	orting P	eriod			
			Fro	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	e of Filing Committee or Candidate		Reporting Period						
			From:			То:			
				DA	TE		P	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			0.00
Mailing Address							- \$		0.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTA	AL
Enter Grand Total of Part C on Sche	dule I, Detailed Sun	nmary P	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				Reporting Period					
				Fron	n:		To):	
					D	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR	\$	0.00
Mailing Address									
City	State	Zi	p Code (Plus	s 4)					
Employer Name		•			Occupa	tion			
Employer Mailing Address/Principal Pl	ace of Business		City			State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detaile	ed Sumn	nary 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:		
		'			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	'	1					<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 Perio	od							
SALA, PETER J.	From:	3/28/2023 To :	5/1/2023						
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	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				Re	porting	Period				
				Fro	m:		To:			
						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	′	Stat	e Zip	Code(Plus 4)	Desci	ript	ion of Contribution	on
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	ontributions De	etaile	ed				PAGE TO	ΓAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period						
SALA, PETER J.	From	3/28/2023	То:	<u>5/1/2023</u>			

					DATE			AMOUNT
To Whom Paid				мо	DAY	YEAR		
WE CREATE LLC				140		ILAK		
Mailing Address	1001 STATE STREET	SUITE #103		1	5	2023	\$	2,530.00
City ERIE		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	16501	ADVERT	ΓISING/WE	BSITE		
To Whom Paid				мо	DAY	YEAR		
UNITED STATES	POSTAL SERVICE			140		ILAK		
Mailing Address	1401 STATE STREET	SUITE #100		1	11	2023	\$	188.69
City ERIE		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	16501	FUNDRA	AISING/PO	STAGE		
To Whom Paid				мо	DAY	YEAR		
UNITED STATES	POSTAL SERVICE			М		ILAK		
Mailing Address	1401 STATES STREE	1401 STATES STREET SUITE #100				2023	\$	131.84
City ERIE		State Zip Code (Plus 4)				enditure		
		PA	16501	FUNDRA	AISING/PO	STAGE		
To Whom Paid				мо	DAY	YEAR		
BIG BAR				1-10		1 Z/ux		
Mailing Address	14 EAST 10TH STRE	ET		1	12	2023	\$	183.50
City ERIE		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	16501	CAMPAI	GN EVENT			
To Whom Paid				мо	DAY	YEAR		
WE CREATE, LLC								
Mailing Address	1001 STATE STREET	SUITE #103		2	13	2023	\$	34.95
City ERIE		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	16501	ADVERT	ΓISING/WE	BSITE		
To Whom Paid				мо	DAY	YEAR		
UNITED STATES	POSTAL SERVICE					ILAK		
Mailing Address	1401 STATE STREET	SUITE #100		2	15	2023	\$	8.37
City ERIE	ERIE State Zip Code (Plus 4)		4) Description of Expenditure					
		PA	16501	ADVERI	SING/POS	TAGE		
-			-	-				

					1		
To Whom Paid			мо	DAY	YEAR		
COMMONWEALTH OF PENNSYLVANIA							
Mailing Address 500 NORTH OFFICE BUILDING			3	3	2023	\$	200.00
City HARRISBURG	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	17120	PETITION FILING FEES				
To Whom Paid			мо	DAY	YEAR		
UNITED STATES POSTAL SERVICE			140		ILAK		
Mailing Address 1401 STATE STREET SUITE #100			3	14	2023	\$	126.00
City ERIE	State	Zip Code (Plus 4)	Description of Expenditure ADVERTISING/POSTAGE				
	PA	16501					
To Whom Paid			мо	DAY	YEAR		
WE CREATE, LLC			1410	DAI	ILAK		
Mailing Address 1001 STATE STREET SUITE #103		3	14	2023	\$	34.95	
City ERIE	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	16501	ADVERTISING/WEBSITE				
To Whom Paid			мо	DAY	YEAR		
WE CREATE, LLC			МО	DAI	ILAK		
Mailing Address 1001 STATE STREET SUITE #103			4	13	2023	\$	34.95
City ERIE	State	Zip Code (Plus 4)	Descrip	Description of Expenditure			
	PA	16501	ADVERTISING/WEBSITE				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
Enter Grand Total of Expenditures	on Page 1, Repo	rt Cover Page, Item D	-			\$	3,473.25