Campaign Finance Report

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

Filer Identificat	ion	2023(C0166			Repor Filed E		CANDI	DATE	✓	co	OMMITTEE		LOBE	BYIST	
Name of Filing (Committee	e, Candida	ate or Lo	obbyist:			-	DANIEL	D							
Street Address:																
City:								State:				Zip Cod	e: 19	114		
TYPE OF REPORT	6TH TUES PRE-PRIM		1.	2ND FRIDA PRIMARY	Y PRE	- 2. X	30 D/ PRIM		POST-	3.		AMENDME REPORT?	AMENDMENT REPORT?		No	°
(place X to the right of	6TH TUES PRE-ELEC		4.	2ND FRIDA ELECTION				AY F TION	POST-	6.		TERMINA [®] REPORT?	TION	Yes	No	· 🗸
report type)	ANNUAL	REPORT	7.	Year 2023				NG METHO CHECK O				PAPER		\checkmark	DISKE	TTE
Name of Office S	Sought by	Candidat	te:					DATE O	F ELE	CTION		District Number	Office Code	Par	ty Code	County
								мо	DAY	YEA	R	-1	SPM	DEN	1	coue
JUSTICE OF THE SUPREME COURT								11		7	2023	 	(SEE INS	TRUCTIO	ONS FOR	CODES)
Summary of		and	мо	DAY	YEAR	2		мо	DAY	YEA	AR	FOI	R OFFIC	E USE	ONLY	
Expenditures	s from:			3 28	2	023 T	0	5		1	2023					
A. Amount Bro	ught Forv	vard From	1 Last R	eport	•		\$				0.00					
B. Total Monet	ary Contr	ibutions A	And Rec	eipts (From	Sche	dule I)	\$	\$ 1,203.14								
C. Total Funds	Available	(Sum Of	Lines A	and B)			\$			1,20)3.14					
D. Total Expen	ditures (F	rom Sche	dule II	1)			\$			1,20	3.14					
E. Ending Cash	Balance	(Subtract	: Line D	From Line	C)		\$				0.00					
F. Value Of In-	Kind Con	tributions	Receive	ed (From S	chedu	le II)	\$				0.00					
G. Unpaid Deb	ts And Ob	ligations	(From S	Schedule IV)		\$	•			0.00					
					AFF	IDAVI	T SE	CTION								
PART I - If this i																
I swear (or affirm correct and compl		report, inclu	uding the	e attached sc	hedules	s filed on	paper	or by elect	ronic m	edium, a	are to	the best of	my know	/ledge	and beli	ef , true
Sworn to and subs	scribed befo day of	ore me this		20			_			Sig	gnatur	e of Person	Submitt	ing Rep	ort	
		Signatur	re				_					Printe	ed Name			
My Commission E	xpires						_					Email				
		мо	DA	AY	YR				Ar	ea Code		Daytime	e Telepho	one Nu	mber	
Part II- If this is	a report	of a cand	lidate's	authorized	Comn	nittee, C	Candid	late shall	sign h	ere.						
I swear (or affirm) No 320) as amend	ed.		ıy knowle	edge and beli	ef this	political	comm	iittee has n	ot viola	ted any	provis	ions of the	act of Ju	ine 3,19	937 (P.I	1333,
Sworn to and subso	cribed befor day of	re me this		20							s	ignature of	^F Candida	te		
							_					Printed	l Name			
My Commission Exp		Signature					_					Email				
	-	мо	D	AY	YR		-		Area	Code		Da	ytime Te	lephon	e Numt	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** MCCAFFERY, DANIEL D From: <u>3/28/2023</u> To: <u>5/1/2023</u> 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 1,203.14 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 1,203.14 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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 Candidate			Re	porting I	Period			
F			Fre	From: To:				
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
							Γ	PAGE TOTAL

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

0.00

\$

PAGE 3

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)								
Name of Filing Committee or Candidat	e		Rep	orting P	eriod			
From: 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 S	Schedule I, Detail	led Summary Pag	je, Se	ection 2	-		\$	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 Committe	e			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C on S	chedule I, Detai	led Summary Pa	age, Sectio	n 3.			\$	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 I		
	From:		То:
		DATE	AMOUNT

			D	ATE		АМС	DUNT
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
Employer Name			Occupat	tion			
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip Code ((Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detailed S	ummary Page, Sectio	on 3.		\$		бе тота L 0.00

I

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 Report			Report	ing Perio	d				
MCCAFFERY, DANIEL D			From:	From: <u>3/28/2023</u> To			<u>5/1/2023</u>		
				D	ATE			AMOUNT	
Full Name MCCAFFERY FOR SUPREME CO	DURT			мо	DAY	YEAR			
Mailing Address 305 PROSPECT AVENUE							\$	1,203.14	
City BETHLEHEM	State PA	Zip Code (18018	Plus 4)	3	30	2023			
Receipt Description EXPE	NSE REIMBURSEMENT								
Enter Grand Total of Part E o	n Schedule I. Detailed	Summary Page	Section	4		[PAGE TOTAL	
		cannal y r ugo,					\$	1,203.14	

SCHEDULE II IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS

SE 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		
MCCAFFERY, DANIEL D	From:	<u>3/28/2023</u> то:	<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	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate R			Reporting	g Period			
	From:			То:			
				DATE		АМО	UNT
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 Schedule II, In-Kind Contributions Detaile Section 2.			iled Sum	mary Pag	je,	PAGE	TOTAL
					4	6	0.00

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

Name of Filing Committee or Candidate				Rej	porting P	eriod				
					Fro	From: To:				
					I		DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(P	Plus 4)						
Employer of Contributor					Occupat	tion				
Employer Mailing Address/Principal Place of City State Business				Zip Code(Plus Descript 4)			otion of	Contribution		

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed	PAGE TOTAL
Summary Page, Section 3.	0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate				Reporting Period						
MCCAFFERY, DANIEL D	From	<u>3/28</u>	<u>5/1/2023</u>							
		DATE			AMOUNT					
To Whom Paid AMERICAN EXPRESS				DAY	YEAR					
Mailing Address 200 VESEY ST	TREET		4	2	2023	\$	1,203.14			
City PHILADELPHIA	State PA	Zip Code (Plus 4) 10285	-	otion of Exp L EXPENSE						
							PAGE TOTAL			
Enter Grand Total of Expendit	ures on Page 1, Re	port Cover Page, Item I).			\$	1,203.14			