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 :	ion 2023	C0201			Report Filed B		CANDI	DATE	✓	co	OMMITTE		LOBE	BYIST	
	Committee, Candid	ate or Lo	obbyist:			-	OR JUDG	iΕ							
Street Address:	Street Address:														
City:							State:	Zip Code: 19107							
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2. X	30 DA PRIMA		POST-	3.		AMENDMI REPORT?	ENT	Yes	No	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 DA ELEC		POST- 6.		TERMINATION REPORT?		Yes	No	\checkmark	
report type)	ANNUAL REPORT	7.	Year 2023				FILING METHOD () CHECK ONE				PAPER	\checkmark	DISKE	TTE	
Name of Office S	L Sought by Candidat	te:					DATE O	FELE	CTION		District Number	Office Code	Par	ty Code	County Code
	COURT OF COMM		A.C.				мо	DAY	YEA	R	1	CPJ	DEN	1	
JUDGE OF THE			45				11		7	2023]	(SEE INS	TRUCTIO	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR			мо	DAY	YE/	AR	FOI		E USE	ONLY	
Expenditures	s from:		3 28	20)23 T	0	5		1	2023					
A. Amount Bro	ught Forward From	n Last R	eport			\$			2	26.88					
B. Total Monet	ary Contributions	And Rec	eipts (From	n Sched	dule I)	\$			1,00	00.00					
C. Total Funds	Available (Sum Of	Lines A	and B)			\$			1,02	26.88					
D. Total Expen	ditures (From Sch	edule II	I)			\$				0.00					
E. Ending Cash	Balance (Subtract	t Line D	From Line	C)		\$			1,02	6.88					
F. Value Of In-	Kind Contributions	s Receivo	ed (From S	chedul	e II)	\$				0.00					
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	')		\$				0.00					
				AFF	IDAVI	T SE	CTION								
	s a Committee rep	•	-					• •			-				
I swear (or affirm correct and compl) that this report, incl ete.	luding the	e attached sc	hedules	filed on	paper	or by elect	ronic m	edium, a	are to	the best of	my know	vledge	and beli	ef , true
Sworn to and subs	scribed before me this day of	5	20						Sig	gnatur	e of Person	Submitt	ing Rep	ort	
	Signatu	re				-					Print	ed Name			
My Commission E	xpires					_					Email				
	мо	D/	AY	YR		_		Ar	ea Code		Daytime	e Teleph	one Nu	mber	
Part II- If this is	a report of a cand	didate's	authorized	Comm	ittee, C	andid	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amend) that to the best of n ed.	ny knowle	edge and beli	ef this	political	comm	ittee has n	ot viola	ted any	provis	ions of the	act of Ju	ine 3,19	937 (P.L	. 1333,
Sworn to and subso	cribed before me this day of		20							S	ignature of	f Candida	ite		
						-		Printed Name							
My Commission Exp	Signature					-					Email				
	мо		AY	YR		-		Area	Code		Da	ytime Te	lephon	e Numb	er
		וט		ſĸ							Da	,			

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** JOE GREEN FOR JUDGE 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 1,000.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 1,000.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 1,000.00 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				Reporting Period						
				From: To:						
		·			DATE			AMOUNT		
Full Name of Contributing Committee			м	10	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.								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)										
Name of Filing Committee or Candidate Reporting Period										
			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 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						
				То:					
				DA	TE		ŀ	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR		0.00	
Mailing Address							- \$	0.00	
City	State	Zip Cod	e (Plus 4)						
					PAGE TOTAL				
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 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 Period						
JOE GREEN FOR JUDGE			Fron	n:	<u>3/28/2023</u> T		0:	<u>5/1/2023</u>		
				DA	TE		AMOUNT			
Full Name of Co RICHARD HARF					мо	DAY	YEAR	\$	1,000.00	
Mailing Address	6909 SHERWOOD	RD			4	28	2023			
City PHILAD	ELPHIA	State	Zip Code (Plus	54)		20				
		РА	19151							
Employer Name	SELF				Occupation SELF					
Employer Mailir	ng Address/Principal Pla	ce of Business	City			State		Zip (Code (Plus 4)	
21 S 11TH STS	STE 512							191	07	
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, S				Sectio	on 3.		Γ		PAGE TOTAL	
								\$	1,000.00	

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:			То:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (Plus 4)						
Receipt Description	·	•					•		
		_						PAGE TO	TAL
Enter Grand Total of Part E on Sched	ule 1, Detailed Sumn	nary Page,	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 REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THING

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period										
JOE GREEN FOR JUDGE	From:	<u>3/28/2023</u> To:	<u>5/1/2023</u>								
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	TF)										
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, 1		\$	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:			То:			
				DATE			AMOUNT		
Full Name of Contributor				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 Detailed Summary P Section 2.						PAGE TOTAL			
						\$	0.00		

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

Name of Filing Committee or Candidate				Reporting Period					
				From:					
					DATE		AMOUNT		
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$ 0.00		
City	State	Zip Code(Plus 4)							
Employer of Contributor		•		Occupation					
Employer Mailing Address/Principal Place of Business City			State	e Zip	Code(Plus 4)	Descri	ption 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

Name of Filing Committee or Candidate			Reporting Period						
				From			То:		
		DATE		AMOUNT					
To Whom Paid	мо	DAY	YEAR						
Mailing Address						\$	0.00		
City	City State Zip Code (Plus 4) Description of Expenditure								
Enter Grand Total of Exponditures	`				PAGE TOTAL				
	Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.					\$	0.00		