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 2023	3C0127			Repo			CAND	IDAT	Έ	✓	COMMITTEE LOBBYIST						
Name of Filing C	ommittee, Candid	late or L	obbyist:		PRIN	CE,	JOSI	HUA GA	RET			_						
Street Address:																		
City:								State:					Zip Code	e: 18	8011			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2		30 DA PRIMA		POST	Γ-	3. X		AMENDME REPORT?	NT	Yes	N	lo	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE				AY ΓΙΟΝ	POST	Ī-	6.		TERMINAT REPORT?	ΓΙΟΝ	Yes	١	lo	\
report type)	ANNUAL REPORT	7.	Year 2023						METHOD PAPER HECK ONE				~	DISK	ETTE			
Name of Office S	ought by Candida	ite:	•		•			DATE	OF E	LEC	TION		District Number	Office Code	Pai	ty Cod	e Cou	
JUDGE OF THE	COMMONIMENT	II COUD	-					МО	DA	Y	YEAF	2	-1	CCJ	REF)	06	
JUDGE OF THE	COMMONWEALTI	1 COURT		_				1	1		7 2	023		(SEE IN:	STRUCTI	ONS FO	R CODES	5)
Summary of Expenditures	•	МО	DAY	YEAR		_	_	МО						ONL	7			
		<u> </u>	5 2	20	023	T	1		6			2023						
	ught Forward Fro		•	. 6 -1			\$				(150	0.00						
B. Total Monetary Contributions And Receipts (From Schedule I)							\$											
C. Total Funds Available (Sum Of Lines A and B)						\$				(150								
D. Total Expenditures (From Schedule III)						\$					0.00							
E. Ending Cash Balance (Subtract Line D From Line C)							\$				(150.	00)						
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	le II)		\$				C	0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	/)			\$		0.00									
				AFF	'IDA'	VI٦	ΓSE	CTION										
	a Committee rep	-	_						=			_						
I swear (or affirm) correct and comple	that this report, inc ete.	luding the	e attached sc	hedules	s filed	on p	paper (or by elec	tronic	me	dium, aı	e to t	he best of	my knov	wledge	and be	lief , tr	rue
Sworn to and subs	cribed before me thi day of	s	20								Sigr	ature	of Person	Submitt	ting Re	ort		_
	Signati						-						Printe	ed Name	.			_
My Commission Ex	_												Email					-
	МО	D	AY	YR			-			Are	a Code		Daytime	Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized	Comn	nittee	e, Ca	andid	ate shal	l sign	he	re.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowle	edge and beli	ief this	politio	cal	comm	ittee has	not vi	olat	ed any p	rovisi	ons of the	act of J	une 3,1	937 (P	.L. 133	з,
Sworn to and subsc	ribed before me this								_			Si	gnature of	Candida	ate			- $ $
	day of 						-		_				Printed	Name				_
	Signature						-											_
My Commission Exp	ires												Email					
	МО	Di	AY	YR					Ar	ea C	Code		Day	time T	elephor	ne Num	ber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period					
PRINCE, JOSHUA GARET	From:	5/2/202	<u>3</u> To:	6/5/2023			
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) \$							
All Other Contributions (Part B)	\$	0.00					
TOTAL for the Reporting	\$	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 ar 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

Name of Filing Committee or Candidate			Reporting Period						
			From: To			:			
		L		DATE			AMOUNT		
Full Name of Contributing	Committee		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.

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			Rep	Reporting Period						
				m:	То:					
					DATE		АМ	OUNT		
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 Reportin			Reporting	g 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.)

eporting Period					
NT					
0.00					
Occupation					
us 4)					
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 Co	Name of Filing Committee or Candidate			Reporting Period						
			From:			То:				
				D	ATE		AM	10UNT		
Full Name					DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4)							
Receipt Description	·	•								
Enter Grand Total of Part E or	Schedule T. Detailer	d Summary Page	Section	4			PA	GE TOTAL		
Lines Grana Fotal of Fair 2 of	r benedule 1/ betanet	z Summary r uge,	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									
PRINCE, JOSHUA GARET	From:	<u>5/2/2023</u> To:	<u>6/5/2023</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 PART 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 Candidat	lame of Filing Committee or Candidate				Reporting Period					
	Fr					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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL			
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		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:			То:			
						DAT	E			AMOUNT	
Full Name of Contributor					мо	DAY	,	YEAR			
Mailing Address									\$	0.00	
City	State		Zip Code(Plus 4)								
Employer of Contributor					Оссир	Occupation					
Employer Mailing Address/Principal Plad Business	ce of	City	Sta	ite	Zi 4)	p Code(Pl)	us	Descri	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					
	From		То:						
		_		DATE		AMOUNT			
To Whom Paid				DAY	YEAR				
Mailing Address						\$	0.00		
City	State	Zip Code (Plus 4)	Description of Expenditure						
Forting Council Table 1 of Francis distance	P 1 P1 C						PAGE TOTAL		
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item						\$	0.00		