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 8300	021			Report		CANDI	DATE		соми	1ITTEE	✓	LOBI	BYIST			
Name of Filing C	Committee, Candid	ate or L	obbyist:	Α	CBA JU	JDICI	AL EXCE	LLENCE	E CON	4MITTE	<u> </u>						
Street Address:	400 KOPPERS	BUILD	ING,436 SE	VENTH	I AVEN	UE											
City:	PITTSBURGH						State:	PA			Zip Cod	ie: 15	5219				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	2.	30 DA		POST-	3. X		AMENDM REPORT?		Yes	No	/		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE-	5.	30 DA		POST-	6.		TERMINA REPORT		Yes	No	~		
report type)	ANNUAL REPORT	7.	Year 2023				NG METHO				PAPER	DISKE	ГТЕ				
Name of Office S	Sought by Candida	te:	-				DATE 0	F ELE	CTIO	N	District Number						
							МО	DAY	YE	AR		10000	<u> </u>		Code		
							11		7	2023		(SEE IN	STRUCTI	ONS FOR C	ODES)		
	Receipts and	МО	DAY	YEAR			МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY			
Expenditures	s trom:		5 2	20	23 T	0	6		5	2023							
A. Amount Bro	ught Forward Fron	n Last R	eport			\$			5,5	54.91							
B. Total Monet	ary Contributions	And Rec	eipts (From	Sched	ule I)	\$				18.79							
C. Total Funds	Available (Sum Of	Lines A	and B)			\$			5,5	73.70							
D. Total Expen	ditures (From Sch	edule II	I)			\$			3	77.76							
E. Ending Cash	Balance (Subtract	Line D	From Line C	:)		\$			5,1	95.94							
F. Value Of In-	Kind Contributions	Receiv	ed (From Sc	hedule	e II)	\$				0.00							
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)		\$				0.00							
				AFFI	DAVI	T SE	CTION										
PART I - If this is	s a Committee rep	ort, trea	surer sign h	ere. If	this is	a Car	ndidate re	eport, c	andio	date sig	ın here.						
I swear (or affirm) correct and comple) that this report, incl ete.	uding the	attached sch	edules 1	filed on	paper	or by elect	ronic m	edium,	, are to t	he best o	f my kno	wledge	and belie	f , true		
Sworn to and subs	cribed before me this day of	•	20						s	ignature	of Perso	n Submit	ting Rep	ort			
	- Cianatu					- -					Prin	ted Name	e				
My Commission Ex	Signatu cpires										Ema	il					
	мо	D	AY	YR		-		Are	ea Cod	e	Daytim	e Teleph	none Nu	mber			
Part II- If this is	a report of a cand	lidate's	authorized (Commi	ittee, C	andid	ate shall	sign he	ere.								
I swear (or affirm) No 320) as amende		ny knowle	edge and belie	f this p	oolitical	comm	ittee has n	ot viola	ted an	y provis	isions of the act of June 3,1937 (P.L. 1333,						
Sworn to and subsc	ribed before me this									s	Signature of Candidate						
	day of		_ 20			_					Printed Name						
	Signature					-											
My Commission Exp	_										Ema	il					
	МО	D	AY	YR		-		Area	Code		Da	aytime T	elephon	e Numbe	er		

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
ACBA JUDICIAL EXCELLENCE COMMITTEE	From:	<u>5/2/202</u>	<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)			\$	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)			\$	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	J Period	(4)	\$	18.79
			I	
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			\$	18.79

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize only with an aggregate valu							
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		-			DATE			AMOUNT
Full Name of Contribution	ng 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.

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 Filing Committee or	ame of rining committee of candidate			oorting P				
			Fro	m:		To	:	
					DATE		А	MOUNT
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 Candi	date		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary 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 Committee or Candidate			Rep	orting Pe	riod			
			Fror	n:		To) :	
				D	ATE		А	MOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupa	tion		•	
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Coo	de (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary 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 Perio	d			
ACBA JUDICIAL EXCELLENCE COMMITT	EE		From:		5/2/202	<u>3</u> To:	6/5/202	<u>23</u>
				D	ATE		AMOUNT	
Full Name					DAY	YEAR		
DOLLAR BANK				МО	DAY	TEAR		
Mailing Address 225 FORBES AVENU	E			_			\$	1.91
City PITTSBURGH	State	Zip Code (Plus 4)	5	31	2023		
	PA	15222						
Receipt Description INTEREST		•						
Full Name								
CHARLES SCHWAB				МО	DAY	YEAR		
Mailing Address 1600 WASHINGTON	ROAD SUITE B						\$	16.88
City PITTSBURGH	State	Zip Code (Plus 4)	5	31	2023		
	PA	15228						
Receipt Description INTEREST								

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL \$ 18.79

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		
ACBA JUDICIAL EXCELLENCE COMMITTEE	From:	<u>5/2/2023</u> To:	<u>6/5/2023</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	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 Candi	date		Reportin	g 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 Section 2.	Schedule II, In-Kir	nd Contributions Deta	iled Sum	ımary Pag	ge,		PAGE TOTAL
5551511 21						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidat	e				Re	porting F	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor			•			Occupa	tion		•	
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, I	In-Kind	Contributi	ons De	taile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or C	andidate		Reporti	ng Period			
ACBA JUDICIAL EXCELLENCE	COMMITTEE		From	<u>5/2</u>	2/2023	То:	6/5/2023
				DATE			AMOUNT
To Whom Paid FRANK, GALE, BAILS & Po	OCRASS, P.C.		МО	DAY	YEAR		
Mailing Address 707 GRANT	STREET 33RD FLR.		5	15	2023	\$	150.00
City GULF TOWER	State	Zip Code (Plus 4)	Descrip	tion of Exp	penditure	:	
	PA	15219	1	SSIONAL S			
To Whom Paid ACBA			мо	DAY	YEAR		
Mailing Address 400 KOPPE	RS BLDG. 436 SEVENTH	H AVENUE	5	31	2023	\$	19.26
City PITTSBURGH	State	Zip Code (Plus 4)	Descrip	tion of Exp	penditure		
	PA	15219	MNTHL	Y JUDICIA	L VOTE 2	2023 WEBS	SITE
To Whom Paid FRANK, GALE, BAILS & Po	OCRASS, P.C.	·	МО	DAY	YEAR		
Mailing Address 707 GRANT	STREET 33RD FLR.		5	31	2023	\$	208.50
City GULF TOWER	State	Zip Code (Plus 4)	Descrir	tion of Exp	nenditura	<u> </u>	
- GOLI TOWER	PA	15219		SSIONAL S			
	I	L	ı				PAGE TOTAL
Enter Grand Total of Expend	ditures on Page 1, Re	port Cover Page, Item D).			•	277.76

377.76