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	3C0023			Rep File			CANI	DIE	DATE	COMMITTEE LOBBYIST							
Name of Filing C	ommittee, Candid	late or L	obbyist:	•	KAY	YU												
Street Address:																		
City:								State:					Zip Cod	e: 19	017			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2	2.	30 DA PRIMA		P	OST-	3. X		AMENDME REPORT?	ENT	Yes		No	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDATELECTION	Y PRE	- 5	j.	30 DA ELECT		P	OST-	6.		TERMINAT REPORT?	TION	Yes		No	\
report type)	ANNUAL REPORT	7.	Year 2023					IG MET					PAPER		\	DIS	ETTE	
Name of Office S	ought by Candida	ite:	-		-			DATE	OF	ELE	CTIO	N	District Number	Office Code	Pai	ty Cod	le Cou	
								МО		DAY	YE	AR		CPJ	DEI	1	51	
JUDGE OF THE	COURT OF COMM	10N PLE	AS					1	11		7	2023		(SEE IN	STRUCTI	ONS FO	R CODES	5)
Summary of	•	МО	DAY	YEAR	1			МО		DAY	YI	AR	FOI	OFFI	CE USE	ONL	Y	
Expenditures	from:		5 2	2	023	T	0		6		5	2023						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$	-			0.00							
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule	I)	\$				0.00							
C. Total Funds	Available (Sum O	f Lines A	and B)				\$					0.00						
D. Total Expend	ditures (From Sch	edule II	I)				\$				ϵ	31.52						
E. Ending Cash	Balance (Subtrac	t Line D	From Line (C)			\$				(63	31.52)						
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	le II))	\$					0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$					0.00						
				AFF	IDA	VI	ΓSE	CTIOI	V									
	a Committee rep		_									_						
I swear (or affirm) correct and comple	that this report, inc ete.	luding the	e attached scl	hedules	filed	on	paper (or by ele	ectr	onic me	edium	, are to t	he best of	my knov	wledge	and be	elief , tı	rue
Sworn to and subs	cribed before me thi day of	S	20						-		S	ignature	of Person	Submit	ting Re	ort		
	Signatu	ıre					-		-				Print	ed Name	•			_
My Commission Ex	-								Email								_	
	мо	D	AY	YR					_	Are	ea Coc	le	Daytime	Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized	Comn	nittee	e, Ca	andida	ate sha	ll s	ign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of i	ny knowle	edge and beli	ef this	politi	ical	commi	ittee has	s no	t viola	ted an	y provis	ions of the	act of J	une 3,1	937 (F	.L. 133	з,
Sworn to and subsc	ribed before me this											s	ignature of	Candid	ate			-
	day of 						-						Printed	l Name				- $ $
	Signature						-		_									_
My Commission Exp	ires												Email					
	мо	D.	AY	YR			•			Area	Code		Da	ytime T	elephor	ne Nun	nber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
KAY YU	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) 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

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
	•	·			•	•	$\overline{}$	DACE TOTAL

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 C	Candidate		Rep	porting P	eriod			
			Fro	om:		To):	
					DATE		AMOUN	IT.
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 Can	ne of Filing Committee or Candidate				orting Pe	riod				
				Froi	m:		То	То:		
					D	ATE		AN	MOUNT	
Full Name of Contributor					МО	DAY	YEAR			
Mailing Address								\$	0.00	
City	State	Zi	p Code (Plus	4)						
Employer Name	•	,			Occupa	tion	•	•		
Employer Mailing Address/Princi Business	pal Place of		City		•	State		Zip Code	e (Plus 4)	
Enter Grand Total of Part C o	n Schedule I, Deta	iled Sumr	mary Page,	Section	on 3.			P	AGE 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 Car	ndidate		Report	ing Perio	od			
			From:			To:		
				D	ATE		А	MOUNT
Full Name				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	·		•			•	
Enter Grand Total of Part E on	Schedule T. Detailed	l Summary Page.	Section	4.			P	AGE TOTAL
	2, 2000		22300				\$	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		
KAY YU	From:	<u>5/2/2023</u> To:	6/5/2023
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER 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, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidat	:e		Reporting	g Period				
			From:			To:		
				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 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 Candidat	ame of Filing Committee or Candidate					porting P	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	etaile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	andidate		Reporti	ng Period			
KAY YU			From	<u>5/2</u>	2/2023	То:	6/5/2023
				DATE			AMOUNT
To Whom Paid MINUTEMAN PRESS OF PHILAD	ELPHIA		МО	DAY	YEAR		
Mailing Address 932 E HUNT	ING PARK AVE		5	17	2023	\$	421.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191244807	Descri T SHIR	otion of Exp	penditure		
To Whom Paid BUBBLE FISH			МО	DAY	YEAR		
Mailing Address 909 ARCH ST			5	10	2023	\$	139.79
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191072404		otion of Exp EXPENSE	penditure		
To Whom Paid PHILADELPHIA NOW	·		МО	DAY	YEAR		
Mailing Address 1211 CHEST	TNUT ST		5	7	2023	\$	50.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191074113	ı	otion of Exp	penditure		
To Whom Paid GOOGLE			МО	DAY	YEAR		
Mailing Address 1600 AMPH	ITHEATRE PKWY		5	17	2023	\$	20.73
State Zip Code (Plus 4) CA 940431351			ı	otion of Exp LE WORKSI			
	I	I	1				PAGE TOTAL

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

631.52