#### **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	3C0148			Rep File			CAND	NDIDATE /			со	MMITTEE		LOB	BYIST		
Name of Filing C	ommittee, Candid	late or L	obbyist:		HAR	RY S	SMAIL	_										
Street Address:																		
City:								State:					Zip Code	e: 15	601			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2	2.	30 DA PRIMA		POST	Γ- :	3. <b>X</b>		AMENDMENT REPORT?		Yes	N	0	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDATELECTION	Y PRE	- 5	5.	30 DA		POST	Γ- (	5.		TERMINATION REPORT?		Yes	N	0	<b>\</b>
report type)	ANNUAL REPORT	7.	<b>Year</b> 2023						METHOD ECK ONE						<b>V</b>	DISK	ETTE	
Name of Office S	ought by Candida		_					DATE	OF E	LEC	TION		District Number	Office Code	Pai	ty Cod	Code	
	J ,							МО	DA	Υ	YEAR	2	-1	SPR	REF	)	1000.	
JUDGE OF THE	SUPERIOR COUR	π						1	1		7 2	023		(SEE IN	STRUCTI	ONS FOR	CODES	5)
Summary of		МО	DAY	YEAR				МО	DA	Υ	YEAR	2	FOF	OFFIC	CE USE	ONLY		
Expenditures	from:		5 2	2	023	T	0		6		5 2	023						
A. Amount Bro	ught Forward Fro	m Last R	eport		•		\$	•	•		C	0.00						
B. Total Moneta	ary Contributions	And Rec	eipts (From	Sche	dule	I)	\$				C	0.00						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$				O	0.00						
D. Total Expend	ditures (From Sch	edule II	I)				\$				8,334	.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line (	C)			\$				0	.00						
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	CTION										
	a Committee rep		_						-	-		_						
I swear (or affirm) correct and complete	that this report, inc ete.	luding the	e attached scl	hedules	filed	l on	paper (	or by ele	ctronic	c me	dium, ar	e to t	he best of	my knov	wledge	and be	lief , tr	ue
Sworn to and subs	cribed before me thi day of	s	20						_		Sign	ature	of Person	Submitt	ting Re	oort		_
	Signati	ıre					-						Printe	ed Name	•			-
My Commission Ex	pires						_						Email					
	МО	D	AY	YR						Area	Code		Daytime	Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized	Comn	nitte	e, C	andida	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	ef this	politi	ical	commi	ittee has	not vi	olate	ed any p	rovisi	ons of the	act of J	une 3,1	937 (P	L. 133	3,
Sworn to and subsc	ribed before me this day of		20									Si	gnature of	Candida	ate			_
							-		_				Printed	Name				-
My Commission Exp	Signature						-						Email					-
																		_
	МО	D	AY	YR					Ar	rea C	ode		Day	time T	elephor	ne Num	ber	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
HARRY SMAIL	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

	nis Part to itemize onl vith an aggregate valu								
Name of Filing Commit	tee or Candidate		Re	porting	Period				
			From: To				<b>)</b> :		
		<u>.</u>			DATE			AMOUNT	
Full Name of Contributing	g 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 Candi	date			Reporting Period					
			From: T				o:		
						DATE			AMOUNT
Full Name of Contributor					МО	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus 4)						
								$\overline{}$	

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	me of Filing Committee or Candidate			orting Pe	riod			
			Fron	n:		To	<b>)</b> :	
				D	ATE		ı	AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupa	tion			
Employer Mailing Address/Principal Pla Business	ce of	City			State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Scho	edule I, Detailed Su	ımmary 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	ting Perio	od			
			From:			To:		
				D	ATE		AM	OUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	•	•		•	•			
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			PA	GE TOTAL
	,,,	. Junimary 1 ago,	5000.011				\$	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		
HARRY SMAIL	From:	<u>5/2/2023</u> <b>To:</b>	<u>6/5/2023</u>
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,		\$	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	Reporting Period				
			From:			То:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						<b>\$</b>	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 Candida	ame of Filing Committee or Candidate				Re	porting	Period					
					Fro	m:		То	:			
					<u> </u>		DATE				AMOUNT	
Full Name of Contributor						мо	DAY	YEAR	1			
Mailing Address										\$		0.00
City	State		Zip Code(F	Plus 4)								
Employer of Contributor	•		•			Occupa	ation					
Employer Mailing Address/Principal P Business	lace of	City		State		Zip 4)	Code(Plus	Desc	cripti	ion of (	Contributio	on
Enter Grand Total of Part G on S	chedule II, I	In-Kind	Contributi	ons De	taile	ed					PAGE TOT	ΓAL
Summary Page, Section 3.												0.00

### STATEMENT OF EXPENDITURES

Name of Filing Committee or Candida	ame of Filing Committee or Candidate					Reporting Period							
HARRY SMAIL				<u>5/2</u>	То:	<u>6/5/2023</u>							
				DATE			AMOUNT						
To Whom Paid FRIENDS OF JUDGE HARRY SMAIL			МО	DAY	YEAR								
Mailing Address P.O. BOX 11732			5	30	2023	\$	8,334.00						
City HARRISBURG State Zip Code (Plus 4)			Descrip	tion of Exp	enditure	• •							
	PΔ	17108	LOAN										

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

PAGE TOTAL

\$ 8,334.00