

# Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification Number :				2023C0092		Report Filed By :		CANDIDATE		✓		COMMITTEE		LOBBYIST	
Name of Filing Committee, Candidate or Lobbyist: PATRICIA MCCULLOUGH															
Street Address:															
City:								State:				Zip Code: 15241			
TYPE OF REPORT  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY PRIMARY	POST-	3.	AMENDMENT REPORT?	Yes	✓	No				
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6.	TERMINATION REPORT?	Yes		No	✓			
	ANNUAL REPORT	7.	Year 2023		FILING METHOD ( ) CHECK ONE			PAPER	✓	DISKETTE					
Name of Office Sought by Candidate:  JUSTICE OF THE SUPREME COURT								DATE OF ELECTION			District Number	Office Code	Party Code	County Code	
								MO	DAY	YEAR	-1	SPM	REP		
								11	7	2023		(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY						
		3	28	2023		5	1	2023							
A. Amount Brought Forward From Last Report						\$ (1,984.04)									
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 0.00									
C. Total Funds Available (Sum Of Lines A and B)						\$ (1,948.04)									
D. Total Expenditures (From Schedule III)						\$ (5,443.02)									
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 0.00									
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ (7,391.06)									
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 0.00									

## AFFIDAVIT SECTION

**PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.**

**I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief , true, correct and complete.**

**Sworn to and subscribed before me this**

day of 20

**Signature of Person Submitting Report**

**Signature**

### My Commission Expires

MO DAY YR

Printed Name \_\_\_\_\_

Email

Area Code	Daytime Telephone Number
214	214-750-7000
214	214-750-7001
214	214-750-7002
214	214-750-7003
214	214-750-7004
214	214-750-7005
214	214-750-7006
214	214-750-7007
214	214-750-7008
214	214-750-7009
214	214-750-7010
214	214-750-7011
214	214-750-7012
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214</	

**Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.**

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

**Sworn to and subscribed before me this**

day of 20

**Signature of Candidate**

Printed Name \_\_\_\_\_

**Signature**

## My Commission Expires

MO DAY YR

Area Code	Daytime Telephone Number
214	951-1111
214	951-1112
214	951-1113
214	951-1114
214	951-1115
214	951-1116
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214	951-1120
214	951-1121
214	951-1122
214	951-1123
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214	951-1244
214	951-1245

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
Detailed Summary Page

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
PATRICIA MCCULLOUGH	From: <u>3/28/2023</u> To: <u>5/1/2023</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 0.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 0.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 0.00
<b>All Other Contributions (Part D)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 0.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)</b>	\$ 0.00
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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
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Full Name of Contributor			MO	DAY	YEAR	\$0.00
Mailing Address						
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	Reporting Period	
	From:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

<b>PAGE TOTAL</b>
\$ 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
	From: <span style="float: right;">To:</span>

				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)		

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

<b>PAGE TOTAL</b>
\$ 0.00

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: To:

				DATE	AMOUNT	
Full Name			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Receipt Description						

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

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
PATRICIA MCCULLOUGH		From: <u>3/28/2023</u> To: <u>5/1/2023</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period		(1)	\$ 0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period		(2)	\$ 0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period		(3)	\$ 0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)			\$ 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: <span style="float: right;">To:</span>
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						<b>PAGE TOTAL</b>  \$ 0.00

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

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description 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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
PATRICIA MCCULLOUGH	From <u>3/28/2023</u> To: <u>5/1/2023</u>

DATE				AMOUNT		
To Whom Paid VISTA PRINT			MO	DAY	YEAR	\$ 835.63
Mailing Address VISTAPRINT.COM			3	27	2023	
City	State	Zip Code (Plus 4)	Description of Expenditure POST CARD & RACK CARDS			
To Whom Paid PA LEADERSHIP CONFERENCE			MO	DAY	YEAR	\$ 135.00
Mailing Address WWW.PALEADERSHIPCONFERENCE.ORG			3	30	2023	
City	State	Zip Code (Plus 4)	Description of Expenditure ATTENDANCE AT CONFERENCE			
To Whom Paid MINUTEMAN PRESS			MO	DAY	YEAR	\$ 781.41
Mailing Address 2352 NOBLESTOWN RD. SUITE 10			3	30	2023	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15205	Description of Expenditure PALM CARDS			
To Whom Paid VISTA PRINT			MO	DAY	YEAR	\$ 545.41
Mailing Address VISTAPRINT.COM			4	3	2023	
City	State	Zip Code (Plus 4)	Description of Expenditure RACK CARDS			
To Whom Paid VISTA PRINT			MO	DAY	YEAR	\$ 604.79
Mailing Address VISTAPRINT.COM			4	4	2023	
City	State	Zip Code (Plus 4)	Description of Expenditure RACK CARDS			

<b>To Whom Paid</b> RCAC - REPUBLICAN COMMITTEE OF ALLEGHENY COUNTY			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 150.00
<b>Mailing Address</b> 100 FLEET ST. SUITE 205			4	8	2023	
<b>City</b> PITTSBURGH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15220	<b>Description of Expenditure</b> 1 DINNER TICKET			

<b>To Whom Paid</b> RCAC - REPUBLICAN COMMITTEE OF ALLEGHENY COUNTY			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 150.00
<b>Mailing Address</b> 100 FLEET ST. SUITE 205			4	10	2023	
<b>City</b> PITTSBURGH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15220	<b>Description of Expenditure</b> 1 DINNER TICKET			

<b>To Whom Paid</b> RCAC - REPUBLICAN COMMITTEE OF ALLEGHENY COUNTY			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 300.00
<b>Mailing Address</b> 100 FLEET ST. SUITE 205			4	12	2023	
<b>City</b> PITTSBURGH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15229	<b>Description of Expenditure</b> 2 DINNER TICKETS			

<b>To Whom Paid</b> MINUTEMAN PRESS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 733.92
<b>Mailing Address</b> 2352 NOBLESTOWN RD. SUITE 10			4	13	2023	
<b>City</b> CRANBERRY	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15205	<b>Description of Expenditure</b> RACK CARDS & CARDS FOR ENVELOPES			

<b>To Whom Paid</b> COMMUNITY ACCESS MEDIA			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 50.00
<b>Mailing Address</b>			4	14	2023	
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>			

<b>To Whom Paid</b> SHEETZ			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 48.45
<b>Mailing Address</b> 3189 WASHINGTON PIKE			4	14	2023	
<b>City</b> BRIDGEVILLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15017	<b>Description of Expenditure</b> GAS			

<b>To Whom Paid</b> SHEETZ			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 499 EVANS CITY RD.			4	15	2023	
<b>City</b> BUTLER	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16881	<b>Description of Expenditure</b> GAS			

  

<b>To Whom Paid</b> WARREN COUNTY REPUBLICAN COMMITTEE			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> <a href="https://gopwarrenpa.com/">HTTPS://GOPWARRENPA.COM/</a>			4	20	2023	
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b> FUND RAISER FEE			

  

<b>To Whom Paid</b> HOLIDAY INN EXPRESS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 221 SINGH DR.			4	21	2023	
<b>City</b> CRANBERRY	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16319	<b>Description of Expenditure</b> LODGING			

  

<b>To Whom Paid</b> VISTA PRINT			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 1150 VISTAPRINT.COM			4	25	2023	
<b>City</b> CAMP HILL	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17011	<b>Description of Expenditure</b> LODGING			

  

<b>To Whom Paid</b> PENN HARRIS HOTEL			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 1150 CAMP HILL BYPASS			4	28	2023	
<b>City</b> CAMP HILL	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17011	<b>Description of Expenditure</b> LODGING			

  

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 22,145.31

