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 20	220620				port ed B		CAN	DII	DATE		СОМ	4ITTEE	✓	LOBI	BYIST		
Name of Filing C	ommittee, Cand	lidate or L	.obbyist:		FRIE	END	S OF	JUDGE	JO	EL								
Street Address:																		
City:	MECHANIC	SBURG						State:		PA			Zip Cod	le: 17	055			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRII PRIMARY		-	2.	30 DA		P	POST- 3. AMENDMENT Yes REPORT?					N	0	\	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4. X	2ND FRII ELECTIO		E- !	5.	30 DA		P	OST-	6.		TERMINATION REPORT?		Yes	√ N	0	
report type)	ANNUAL REPO	₹T 7.	Year 202	23				NG MET					PAPER		\checkmark	DISK	ETTE	
Name of Office S	ought by Candi	date:						DATE	0	F ELEC	CTIO	N	District Number	Office Code	Par	ty Code	Cour	
JUDGE OF THE	COURT OF COM	AMON DU	- 4.0					МО		DAY	YE	AR	1	CPJ	DEN	1	•	
JUDGE OF THE						11		7	2023		(SEE INS	TRUCTI	ONS FOR	CODES	5)			
Summary of		МО	DAY	YEAR	3			МО		DAY	YE	AR	FO	R OFFIC	E USE	ONLY		
Expenditures	trom:		6	6 2	023	Т	0		9	1	.8	2023						
A. Amount Bro	ught Forward F	om Last F	Report				\$					0.00						
B. Total Moneta	ary Contribution	s And Red	ceipts (Fr	om Sche	dule	: I)	\$					0.00						
C. Total Funds	Available (Sum	Of Lines /	A and B)				\$					0.00						
D. Total Expend	ditures (From S	chedule I	II)				\$					0.00						
E. Ending Cash	Balance (Subtr	act Line D	From Lin	e C)			\$					0.00						
F. Value Of In-	Kind Contribution	ns Receiv	ed (From	Schedu	le II	:)	\$					0.00						
G. Unpaid Debt	s And Obligatio	ns (From	Schedule	IV)			\$					0.00		•				
				AFF	-IDA	\VI	T SE	CTIO	N									
PART I - If this is			_							-								
I swear (or affirm) correct and comple		ncluding th	e attached	schedule	s filed	d on	paper	or by ele	ectr	onic me	dium	, are to t	he best o	f my know	/ledge	and be	ief , tr	ue
Sworn to and subs	cribed before me t	:his	20						•		s	ignature	of Perso	1 Submitt	ing Rep	ort		
	Signa	ature					- -		•				Prin	ted Name				_
My Commission Ex	pires						_		-				Emai	il				
	мо	D	AY	YR						Are	a Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a ca	andidate's	authorize	ed Comn	nitte	e, C	andid	ate sha	all s	ign he	re.							
I swear (or affirm) No 320) as amende		of my knowl	ledge and b	elief this	s polit	tical	comm	ittee ha	s no	t violat	ed an	y provis	ions of the	e act of Ju	ne 3,1	937 (P.	L. 133	з,
Sworn to and subsc		ıis										s	ignature o	of Candida	te			_
	day of						_						Printe	d Name				- J
	Signatu	r e					-		_					-				_
My Commission Exp	ires												Emai	iI				
	мо	С	PAY	YR	2		-			Area	Code		Da	ytime Te	lephor	e Num	ber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period				
FRIENDS OF JUDGE JOEL	From: <u>6/6/2023</u> To:					
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)	\$	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

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candidate			Reporting Period					
			Fron	n:		То	!	
		·			DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					

PAGE TOTAL
0.00

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

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)

(Exclus	de contributions no	in pontical comm	itte	es rep	or teu	ili Pait	~)		
Name of Filing Committee or Candidate Reporting Period									
	From: To:								
		•			DATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4))						
								PAGE TOTAL	

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

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	ame of Filing Committee or Candidate				Reporting Period						
				DA	TE		А	MOUNT			
Full Name of Contributing Committee				мо	DAY	YEAR	\$		0.00		
Mailing Address							7		0.00		
City	State	Zip Cod	e (Plus 4)								
								PAGE TO	TAL		
Enter Grand Total of Part C on Scheo	lule 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.)

Name of Filing Committee or Candidate			Rep	orting Pe	riod				
	Fr					To	То:		
				D	ATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR	\$	0.00	
Mailing Address							1		
City	State	Zip Code (Plu	s 4)						
Employer Name		•		Occupa	tion				
Employer Mailing Address/Principal Pla	ce of Business	City		•	State		Zip C	ode (Plus 4)	
Enter Grand Total of Part C on Scho	dule I, Detailed S	Summary Page,	, Sectio	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	od				
						To:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$	0.00	
Mailing Address		_							
City	State	Zip Code (Plus 4)						
Receipt Description	•	•			•	•			
		_		_				PAGE TOTAL	
Enter Grand Total of Part E on Schedu	lie 1, Detailed Sumn	nary Page,	Section	4.			\$	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		
FRIENDS OF JUDGE JOEL	From:	6/6/2023 To:	9/18/2023
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 Can	Reporting Period							
	From:		To:	То:				
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$	0.0	10
City	State	Zip Code (Plus 4)						
Description of Contribution:	•		•	•				
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detail			led Sun	ımary Pa	ge,		PAGE TOTAL	
Section 2.						\$	0.0	0

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					porting	Period				
	From:						То:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi _l	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Enter Grand Total of Part G on Schedule II, In-Kind Contributions 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	мо	DAY	YEAR				
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
Enter Grand Total of Expenditures o	n Dago 1 Banart C	over Page Item F					PAGE TOTAL
cinei Gianu Total of Expenditures t	m rage 1, Report C	over Page, Item L	, .			\$	0.00