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 2022	20620			Rep File			CANDI	NDIDATE COMMITTEE V LOBBYIST							
Name of Filing C	Committee, Candid	late or L	obbyist:	İ	FRIE	ND:	S OF :	JUDGE JO	DEL							
Street Address:	C/O PATRICK	CAWLE	Y,555 GETTY	′SBU	RG F	PIKE	E, SUI	TE B200								
City:	MECHANICSE	BURG						State:	PA			Zip Cod	de: 17	7055		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	. 2	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT	No	~		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4. X	2ND FRIDAY ELECTION						POST-	6.		TERMINA REPORT		Yes	No	
report type)	ANNUAL REPORT	7.	Year 2023					IG METHO							DISKE	TE
Name of Office S	- Sought by Candida	ite:			_			DATE 0	F ELE	CTIO	N	District Number	Office Code	Part	y Code	County Code
	- <i>.</i>							мо	DAY	YE	AR	1	СРЈ	DEM		
JUDGE OF THE	COURT OF COMM	10N PLE	AS					11		7	2023		(SEE IN	STRUCTIO	NS FOR C	ODES)
	Receipts and	МО	DAY Y	/EAR				МО	DAY	YE	AR	FC	R OFFI	CE USE	ONLY	
Expenditures	from:		6 6	20	023	Т	0	9		18	2023					
A. Amount Bro	ught Forward Fro	m Last R	eport				\$				0.00					
B. Total Moneta	ary Contributions	And Rec	eipts (From S	Sche	dule	I)	\$				0.00	1				
C. Total Funds	Available (Sum O	f Lines A	and B)				\$				0.00					
D. Total Expend	ditures (From Sch	edule II	I)				\$				0.00					
E. Ending Cash	Balance (Subtrac	t Line D	From Line C))			\$				0.00					
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	nedul	e II)	\$				0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$				0.00					
			,	AFF:	IDA	VI	T SE	CTION								
PART I - If this is	s a Committee rep	ort, trea	surer sign he	ere. I	f thi	is is	a Can	didate re	port, c	candio	date sig	jn here.				
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	attached sche	dules	filed	l on	paper o	or by elect	ronic m	edium	, are to t	the best o	f my kno	wledge a	ınd belie	f , true
Sworn to and subs	cribed before me thi day of	s	20							S	ignature	of Perso	n Submit	ting Rep	ort	
	Signati	ıre					- -					Prin	ted Name	e		
My Commission Ex	cpires											Ema	il			
	мо	D	AY	YR					Arc	ea Cod	e	Daytim	e Teleph	one Nur	nber	
Part II- If this is	a report of a can	didate's	authorized C	omm	itte	e, C	andida	ate shall	sign he	ere.						
I swear (or affirm) No 320) as amende	that to the best of e	my knowle	edge and belief	this	politi	ical	commi	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,19	37 (P.L.	1333,
Sworn to and subsc	ribed before me this										s	ignature o	of Candid	ate		
	day of —— ————						-					Printe	ed Name			
	Signature						-									
My Commission Exp	ires											Ema	il			
	мо	D	AY	YR			-		Area	Code		D	aytime T	elephon	e Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period						
FRIENDS OF JUDGE JOEL	From:	6/6/202	<u>3</u> To:	9/18/2023			
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor							
TOTAL for the Reporting	g 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	g 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	g Period	(3)	\$	0.00			
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)							
TOTAL for the Reporting	g Period	(4)	\$	0.00			
Total Monetary Contributions and Receipts During this Reporting Period (Add ar 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

		ly contributions r lue from \$50.01 t			•			
Name of Filing Committee or (Candidate		Re	porting	Period			
			Fr	om:		То	:	
					DATE			AMOUNT
Full Name of Contributing Comm	nittee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
							$\overline{}$	PAGE TOTAL

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

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 of Candidate					Reporting Period From: To:					
					DATE		ı	AMOUNT		
Full Name of Contributor				МО	DAY	YEAR				
Mailing Address							\$	0	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 Candidate Repo			Reporting	Reporting Period						
			From:			То:				
				DA	TE		А	MOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Cod	e (Plus 4)							
								PAGE TOTAL		
Enter Grand Total of Part C on Scho	edule 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				Reporting Period						
						From: To:				
				D/	ATE		АМ	OUNT		
Full Name of Contributor				МО	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus	s 4)							
Employer Name				Occupat	tion					
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	(Plus 4)		
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page,	Section	on 3.			PA \$	GE 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	Name of Filing Committee or Candidate				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 o	on Schedule I. Detailed	l Summary Page	Section	4			P/	AGE TOTAL
	Juliana 1/ Butanet	. January rage,		••			\$	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,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate Re				g Period			
	From:						
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address	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 Candidate					Reporting Period						
								То:			
						DAT	E			AMOUNT	
Full Name of Contributor					мо	DAY	,	YEAR			
Mailing Address									\$	0.00	
City	State		Zip Code(Plus	4)							
Employer of Contributor					Оссир	ation					
Employer Mailing Address/Principal Plad Business	ce of	City	Sta	ite	Zi 4)	p Code(Pl)	us	Descri	ption	of Contribution	
Enter Grand Total of Part G on Sch	edule II, I	n-Kind	Contributions	Deta	ailed					PAGE TOTAL	
Summary Page, Section 3.										0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporti	ng Period					
	From			То:			
				DATE			AMOUNT
To Whom Paid	мо	DAY	YEAR				
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)	Descri	otion of Ex	penditure		
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D							PAGE TOTAL
Lines Grand Total Of Expenditures	on rage 1, Ke	eport Cover Page, Item D	•			\$	0.00