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 :	i on 2016	0255			Report Filed B		CANDI	DATE	СО	MMITTEE	✓	LOBI	BYIST	
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		PIRIT (-	76							
Street Address:	3031A WALTO	on Roai	D, SUITE 2	01										
City:	PLYMOUTH MI	EETING					State:	PA		Zip Co	de: 19	462		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.				30 DA PRIM		POST- 3.			AMENDMENT REPORT?		No	· 🗸
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.					AY F TION	POST-	6.		TERMINATION REPORT?		No	· 🗸
report type)	ANNUAL REPORT	7.	Year 2023				NG METHO			PAPER		\checkmark	DISKE	TTE
Name of Office S	L Sought by Candida	te:					DATE O	F ELEC	TION	District Number		Par	ty Code	County Code
							мо	DAY	YEAR					
							11		7 202	23	(SEE INS	STRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR			мо	DAY	YEAR	F	OR OFFIC	E USE	ONLY	
Expenditures	s from:		9 19	203	23 T	0	10	2	3 202	23				
A. Amount Bro	ught Forward From	n Last R	eport			\$		2	40,440.0	0				
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sched	ule I)	\$			0.0	0				
C. Total Funds	Available (Sum Of	Lines A	and B)			\$		2	40,440.0	0				
D. Total Expen	ditures (From Sch	edule II	[)			\$			50,000.0	0				
E. Ending Cash	Balance (Subtract	t Line D	From Line	C)		\$		19	90,440.0	0				
F. Value Of In-	Kind Contributions	Receive	ed (From S	chedule	e II)	\$			0.0	0				
G. Unpaid Debt	ts And Obligations	(From S	chedule IV	()		\$			0.0	0	·			
				AFFI	DAVI	Γ SE	CTION							
	s a Committee rep		-					• •		-				
I swear (or affirm correct and comple) that this report, incl ete.	uding the	attached sc	hedules 1	filed on	paper	or by elect	ronic me	dium, are i	o the best (of my knov	vledge	and beli	ef, true
Sworn to and subs	cribed before me this day of	5	20						Signat	ure of Perso	on Submitt	ing Rep	oort	
	Signatu	re				-				Prii	nted Name			
My Commission Ex	xpires					_				Ema	ail			
	мо	D/	AY	YR				Area	a Code	Daytir	ne Teleph	one Nu	mber	
Part II- If this is	a report of a cano	lidate's	authorized	Commi	ittee, Ca	andid	ate shall	sign he	re.					
No 320) as amende		ny knowle	dge and beli	ef this p	olitical	comm	ittee has n	ot violate	ed any pro	isions of t/	ne act of Ju	ine 3,1	937 (P.I	1333,
Sworn to and subso	ribed before me this day of		20							Signature	of Candida	ite		
						-				Print	ed Name			
My Commission Exp	Signature bires					-				Ema	ail			
	мо	DA	AY	YR				Area C	ode	C	Daytime Te	elephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** SPIRIT OF 1776 From: <u>9/19/2023</u> To: 10/23/2023 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 0.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

PAGE 3

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					
Fro			From:	From: To:				
					DATE			AMOUNT
Full Name of Contributing Committee			М	ю	DAY	YEAR		
Mailing Address							\$	0.00
City State Zip Code (Plus 4)								
							Γ	PAGE TOTAL

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

0.00

\$

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 Candidat	e		Rep	orting P	eriod			
	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 S	Schedule I, Detai	led Summary Pag	je, Se	ection 2	2.		\$	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					
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committe	e			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C on S	chedule I, Detai	led Summary Pa	age, Sectio	n 3.			\$	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:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

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			Report	ting Perio	od				
				From: To:					
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$	i	0.00
City	State	Zip Code (Plus 4)						
Receipt Description					1	1			
Enter Grand Total of Part E	on Schodulo I. Dotailog		Section	4				PAGE TOT	AL
		i Suillilai y Page,	Section	-			\$		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		
SPIRIT OF 1776	From:	<u>9/19/2023</u> то:	<u>10/23/2023</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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 Candidate			Reporting Period					
	From:			То:				
				DATE		АМС	DUNT	
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 Schedule II, In-Kind Contributions Detail Section 2.			iled Sum	mary Pag	je,	PAGE	TOTAL	
					4	5	0.00	

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

Name of Filing Committee or Candidate				Reporting Period						
					Fro	From: To:				
					DATE AMO					AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor						Occupat	tion			
Employer Mailing Address/Principal Place of City State Business					Zip 4)	Code(Plus	Descri	ption o	f Contribution	

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed	PAGE TOTAL
Summary Page, Section 3.	0.00
	1

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate				Reporting Period					
SPIRIT OF 1776				<u>9/19</u>	То:	<u>10/23/2023</u>				
	DATE AMO									
To Whom Paid Pennsylvanians for Judicial Fairness				DAY	YEAR					
Mailing Address 1735 Market St Ste	A 503		9	20	2023	\$	50,000.00			
CityPhiladelphiaStateZip Code (Plus 4)PA19130				Description of Expenditure Contribution						
							PAGE TOTAL			
Enter Grand Total of Expenditures (Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.					\$	50,000.00			