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	23C0245				Repor Filed		C	ANDI	DATE	*	C	OMMITTE								
Name of Filing C	ommittee, Cand	lidate or L	obbyis	st:		C. THE	ODOF	RE FR	ITSC	H, JR.											
Street Address:																					
City:								Sta	te:				Zip Code: 18901								
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND F PRIMA		Y PRE-	2.	30 D PRIM		P	POST-	3.		AMENDM REPORT?		Yes]	No	\			
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND F		Y PRE-	- 5. X	30 D	AY CTION		OST-	6.		TERMINA REPORT?		Yes	1	No	\			
report type)	ANNUAL REPOR	₹T 7.	Year	2023					ETHO				PAPER		V	DI	SKETT	E			
Name of Office S	ought by Candi	date:	•			•		DA	TE O	F ELE	CTI	ION	District Number	Office Code	Pa	rty C	ode Co	unty ode			
								МО		DAY	,	YEAR	7 CPJ								
JUDGE OF THE	COURT OF COM	1MON PLE	:AS						11		7	2023		(SEE IN	ISTRUCT	IONS	FOR COD	ES)			
Summary of	•	МО	DA	Υ	YEAR			МО		DAY		YEAR	FO	R OFFI	CE USI	E ON	ILY				
Expenditures	from:		9	19	20)23 1	О		10		23	2023	3								
A. Amount Bro	ught Forward Fi	om Last F	Report				\$	5				0.00									
B. Total Monet	ary Contribution	s And Red	eipts ((From	Sched	lule I)	9	\$				0.00									
C. Total Funds Available (Sum Of Lines A and B) \$ 0.00																					
D. Total Expend	ditures (From S	chedule II	I)				9	\$				600.00									
E. Ending Cash	Balance (Subtr	act Line D	From	Line (C)		9	\$				0.00									
F. Value Of In-	Kind Contribution	ns Receiv	ed (Fr	om So	chedul	e II)		\$				0.00									
G. Unpaid Debt	s And Obligatio	ns (From	Schedu	ule IV)		9	\$				0.00									
					AFFI	[DAV]	T SI	ECT.	ON												
PART I - If this is				_									_								
I swear (or affirm) correct and comple		ncluding th	e attach	ned sch	nedules	filed on	papei	or by	electi	ronic m	ediu	ım, are to	the best of	my kno	wledge	and	belief ,	true			
Sworn to and subs	cribed before me t day of	his	20									Signatur	e of Persor	Submit	ting Re	port		_			
	Signa	ature	_				<u>-</u>						Print	ted Nam	e			_			
My Commission Ex	pires						_		•		Email										
	мо	D	AY		YR					Ar	ea C	ode	Daytim	e Telepi	none Ni	umbe	er				
Part II- If this is	a report of a ca	ındidate's	autho	rized	Comm	ittee, (Candi	date	shall	sign h	ere.										
I swear (or affirm) No 320) as amende		f my knowl	edge ar	nd belie	ef this	political	comr	nittee	has n	ot viola	ted	any provi	provisions of the act of June 3,1937 (P.L. 1333,								
Sworn to and subsc	ribed before me th day of	ıis	20								Signature of Candidate										
			_ 20 _				_						Printe	d Name				<u> </u>			
My Commission Exp	Signatui	<u></u>					_						Emai	il				-			
, ссолоп Ехр							_														
	мо	D	AY		YR					Area	Cod	le	Da	ytime T	elepho	ne N	umber				

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
C. THEODORE FRITSCH, JR.	From:	9/19/202	<u>3</u> To:	10/23/2023
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

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
	•	·			•	•	$\overline{}$	DACE TOTAL

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 o	or Candidate		Rep					
Fro				m:) :		
					DATE		A	MOUNT
Full Name of Contributor				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

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.)

		Fron	1 :		То	:	
			D/	ATE			AMOUNT
			МО	DAY	YEAR		
						\$	0.00
Ziţ	p Code (Plus	4)					
			Occupat	tion			
	City			State		Zip Co	ode (Plus 4)
d Sumn	nary Page,	Section	n 3.				PAGE TOTAL 0.00
		City		Zip Code (Plus 4) Occupat	Zip Code (Plus 4) Occupation City State	Zip Code (Plus 4) Occupation City State	MO DAY YEAR \$ Zip Code (Plus 4) Occupation City State Zip Co

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		АМ	OUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	1	 			1		.	
Enter Grand Total of Part E	on Schedule I. Detailed	l Summary Page	Section	4			PAG	GE TOTAL
Grand I old of Full E	on January 1, Detailed	. January i age,	2001011	••			\$	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 Per	riod	
C. THEODORE FRITSCH, JR.	From:	<u>9/19/2023</u> To:	10/23/2023
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTO	R	
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 Candid	ate		Reporting	g Period			
			From:			То:	
				DATE			AMOUNT
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 S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	те Г		PAGE TOTAL
Section 2.	ciicadic 11, 111 Kii	ia contributions beta	nea Sam	iiiiai y i aş	,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Reporting	Period				
					From:			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

STATEMENT OF EXPENDITURES

Name of Filing Committee or C	andidate		Reporti	ng Period			
C. THEODORE FRITSCH, JR.			From	9/19	9/2023	То:	10/23/2023
		,		AMOUNT			
To Whom Paid BUCKS COUNTY REPUBLICAN (COMMITTEE		МО	DAY	YEAR		
Mailing Address 115 NORTH	I BROAD STREET		4	26	2023	\$	200.00
City DOYLESTOWN State PA 18901				otion of Exp			
To Whom Paid BUCKS COUNTY REPUBLICAN COMMITTEE				DAY	YEAR		
Mailing Address 115 NORTH	I BROAD STREET		9	15	2023	\$	200.00
City DOYLESTOWN	State PA	Zip Code (Plus 4) 18901	1 -	otion of Exp			
To Whom Paid BUCKS COUNTY DEMOCRATIC	COMMITTEE		мо	DAY	YEAR		
Mailing Address 2003 LOWER STATE ROAD BLDG. 100, STE. 121				29	2023	\$	200.00
City DOYLESTOWN State PA Zip Code (Plus 4) 18901				otion of Exp			
Enter Grand Total of Expend).				PAGE TOTAL		

600.00