Campaign Finance Report

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

Filer Identificat Number :	ion 202	23C0278			Repor Filed I		CANDI	DATE	✓	CC	OMMITTE	E	LOBI	BYIST	
Name of Filing (Committee, Cand	idate or L	obbyist:		MARVI	N L. W	/ILLIAMS								
Street Address:															
City:							State:				Zip Cod	e: 19	144-3	104	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2.	30 D/ PRIM		POST-	3.		AMENDM REPORT?		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA	Y PRE	- 5. X	30 D/ ELEC		POST-	6.		TERMINA REPORT?		Yes	No	~
report type)	ANNUAL REPOR	RT 7.	Year 2023				NG METHO CHECK O				PAPER		\checkmark	DISKE	TTE
Name of Office	- Sought by Candio	late:			-		DATE O	F ELE	стіоі	N	District Number	Office Code	Par	ty Code	County Code
	MUNICIPAL CO	прт					мо	DAY	YE	AR	1	MCJ	DEN	1	
JUDGE OF THE	MUNICIPAL CO	UKI					11		7	2023]	(SEE INS	TRUCTI	ONS FOR (CODES)
	Receipts and	мо	DAY	YEAR	1		мо	DAY	YE	AR	FO	R OFFIC	E USE	ONLY	
Expenditures	s from:		9 19	2	023 1	0	10		23	2023					
A. Amount Bro	ught Forward Fr	om Last R	eport			\$				0.00					
B. Total Monet	ary Contribution	s And Rec	eipts (Fron	n Sche	dule I)	\$	5	0.00							
C. Total Funds	Available (Sum	Of Lines A	and B)			\$	5			0.00					
D. Total Expen	ditures (From So	chedule II	I)			\$;			0.00]				
E. Ending Cash	Balance (Subtra	act Line D	From Line	C)		\$;			0.00]				
F. Value Of In-	Kind Contributio	ons Receiv	ed (From S	chedu	le II)	\$	5			0.00	_				
G. Unpaid Deb	ts And Obligation	ns (From S	Schedule I\	/)		\$;			0.00					
				AFF	IDAVI	T SE	CTION								
PART I - If this i															
I swear (or affirm correct and compl) that this report, in ete.	ncluding the	e attached so	hedules	s filed on	paper	or by elect	ronic m	edium,	are to	the best of	my know	ledge	and beli	ef , true
Sworn to and sub	scribed before me t day of	his	20						Si	gnatur	e of Persor	ı Submitti	ing Rep	ort	
	Signa	ture				_					Print	ed Name			
My Commission E	xpires					_					Emai	I			
	МО	D	AY	YR				Are	ea Code		Daytime	e Telepho	one Nu	mber	
Part II- If this is I swear (or affirm) No 320) as amend) that to the best o							-		provis	sions of the	e act of Ju	ine 3,1	937 (P.L	. 1333,
Sworn to and subse		is								S	ignature o	f Candida	te		
	day of 					_					Printe	d Name			
My Commission Exp	Signatur	e				-					Emai	1			
,						_									
	МО	D	AY	YR				Area	Code		Da	ytime Te	lephon	e Numb	er

SCHEDULE I **CONTRIBUTIONS AND RECEIPTS**

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
MARVIN L. WILLIAMS	<u>9/19/202</u>	<u>3</u> To:	<u>10/23/2023</u>	
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

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 Commit	Reporting Period						
			From:	i cirioù	То		
			From:		10	•	
				DATE			AMOUNT
Full Name of Contributing) Committee		мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
						Г	PAGE TOTAL
Enter Grand Total of Pa	art A on Schedule I, Detail	ed Summary Page, Sec	tion 2.			\$	0.00

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

\$

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		-	orting P	eriod			
			Fro	m:		Тс):	
					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, Detail	ed 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 Period						
			From:			То:			
				DA	TE		А	MOUNT	
Full Name of Contributing Comm	ittee			мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
						ſ		PAGE TOTAL	
Enter Grand Total of Part C or	n Schedule I, Detaile	ed 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		AMO	UNT
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
Employer Name			Occupa	tion		•	
Employer Mailing Address/ Business	Principal Place of	City	•	State		Zip Code (Plus 4)
Enter Grand Total of Par	t C on Schedule I, Detail	ed Summary Page, Sect	ion 3.			PAG	E TOTAL
						\$	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	Name of Filing Committee or Candidate				Reporting Period						
			From:			То:					
				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		
MARVIN L. WILLIAMS	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		АМО	UNT
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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL
					4	6	0.00

0.00

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

Name of Filing Committee or Candidate				Reporting Period						
					Fro	om:		То:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor	I					Occupat	tion	-		
Employer Mailing Address/Principa Business	I Place of	City		State		Zip 4)	Code(Plus	Descri	ption o	f Contribution
				_		_				PAGE TOTAL

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

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)	Description of Expenditure				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
						\$	0.00

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