#### **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 202	23C0264				Report		CAI	NDII	IDATE COMMITTEE LOBBYIST							ST	
Name of Filing C	ommittee, Candi	date or L	obbyist	:	C	OYLE,	ANNE	MAR	RIE B									
Street Address:																		
City:	_							State	e:				Zip Cod	le:				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FR PRIMAR		PRE-	2.	30 DA		Р	OST-	3.		AMENDMENT Yes REPORT?					<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FR ELECTI		PRE-	5.	30 DA		Р	OST-	6. 2	x	TERMINA REPORT?		Yes		No	<b>\</b>
report type)	ANNUAL REPOR	<b>T</b> 7.	Year 2	023					IETHOD PAPER CK ONE					DIS	SKETTE			
Name of Office S	ought by Candid	ate:						DAT	ATE OF ELECTION District Office Number Code						ode Co			
								МО		DAY	•	YEAR	1	CPJP	-		51	
JUDGE OF THE	COURT OF COM	MON PLE	AS - PH	IILAI	DELPHI	ΙA			11		7	202	3	(SEE IN	ISTRUCT	ONS I	FOR CODE	ES)
Summary of		МО	DAY	,	YEAR			МО		DAY	,	YEAR	FO	R OFFI	CE USE	ON	LY	
Expenditures	from:		10	24	202	23 <b>T</b>	0		11		27	202	3					
A. Amount Bro	ught Forward Fro	om Last R	eport				\$				(3,	390.00	)					
B. Total Monet	ary Contributions	And Rec	eipts (F	rom	Sched	ule I)	\$					0.0	)					
C. Total Funds Available (Sum Of Lines A and B) \$ (:								(3,	390.00	)								
D. Total Expend	ditures (From Sc	hedule II	I)				\$					0.00	)					
E. Ending Cash Balance (Subtract Line D From Line C)							\$				(3,3	390.00	)					
F. Value Of In-	Kind Contribution	ns Receiv	ed (Fro	m Sc	hedule	e II)	\$					0.00	)					
G. Unpaid Debt	s And Obligation	s (From S	Schedul	e IV)	)		\$					0.00			1			
					AFFI	DAVI	T SE	CTIC	NC									
PART I - If this is		• ,																
I swear (or affirm) correct and comple	that this report, in ete.	cluding the	e attache	d sch	edules f	filed on	paper	or by e	electr	ronic m	ediu	m, are to	the best o	f my kno	wledge	and	belief ,	true
Sworn to and subs	cribed before me th day of	ıis	20									Signatu	re of Perso	n Submit	ting Re	port		_
	Signat	ture					- -						Prin	ted Nam	e			_
My Commission Ex	pires						_		•				Ema	il				
	мо	D	AY		YR					Ar	ea C	ode	Daytim	e Telep	hone Nu	ımbe	r	
Part II- If this is	a report of a ca	ndidate's	authori	zed (	Commi	ttee, C	andid	ate sl	nall s	sign h	ere.							
I swear (or affirm) No 320) as amende		my knowl	edge and	belie	ef this p	olitical	comm	ittee h	as no	ot viola	ted a	any prov	isions of the	e act of J	lune 3,1	.937	(P.L. 13	33,
Sworn to and subsc	ribed before me thi day of	s	20										Signature o	of Candid	late			- $ $
							-						Printe	d Name				<b>-</b>
My Commission Exp	Signature	2					-						Ema	il				-
, ссолоп Ехр							_											_
	мо	D	AY		YR					Area	Cod	e	Da	aytime 1	Telepho	ne Nı	umber	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
COYLE, ANNE MARIE B	From:	10/24/202	<u>3</u> To:	11/27/2023
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	) Period	(4)	\$	0.00
			1	
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

	nis Part to itemize onl vith an aggregate valu							
Name of Filing Committee or Candidate			Re	porting				
			Fre	om:		То	:	
		<u>.</u>			DATE			AMOUNT
Full Name of Contributing	g Committee			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

### 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			AMOUNT		
Full Name of Contributor				МО	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4)	1							

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.

lame of Filing Committee or Candidate Reportin					ng 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	ame of Filing Committee or Candidate			Reporting Period						
			From:				То:			
				D	ATE		A	AMOUNT		
Full Name of Contributor				МО	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus	s <b>4</b> )							
Employer Name				Occupat	tion					
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Co	de (Plus 4)		
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			1	PAGE TOTAL		
							<b>\$</b>	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				Reporting Period						
			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 Peri	od	
COYLE, ANNE MARIE B	From:	<u>10/24/2023</u> <b>To:</b>	11/27/2023
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER 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 Candid	Name of Filing Committee or Candidate					Reporting Period					
	From:			То:							
				DATE			AMOUNT				
Full Name of Contributor			МО	DAY	YEAR						
Mailing Address						<b>\$</b>	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						
					Fro	om:		To:	То:		
							DATE			AMOUNT	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address									\$	0.00	
City	State		Zip Code(F	Plus 4)							
Employer of Contributor	•		•			Occupa	tion				
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution	
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, i	In-Kind	Contributi	ons De	etaile	ed				<b>PAGE TOTAL</b> 0.00	

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporti						
	From			То:			
				DATE			AMOUNT
To Whom Paid				DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)	Description of Expenditure				
							PAGE TOTAL
Enter Grand Total of Expenditures	on Page 1, Report C	over Page, Item I	<b>).</b>			\$	0.00