

Campaign Finance Report

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

Filer Identification Number : 20220603		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF COLLEEN MCINTYRE OSBORNE											
Street Address: PO BOX 22352											
City: PHILADELPHIA					State: PA		Zip Code: 19110				
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	<input checked="" type="checkbox"/> No		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6. X	TERMINATION REPORT?	Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2023	FILING METHOD () CHECK ONE			PAPER <input checked="" type="checkbox"/>	DISKETTE			
Name of Office Sought by Candidate:					DATE OF ELECTION			District Number	Office Code	Party Code	County Code
JUDGE OF THE MUNICIPAL COURT					MO	DAY	YEAR	1	MCJ	DEM	51
					11	7	2023	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		10	24	2023		11	27	2023			
A. Amount Brought Forward From Last Report					\$		(11,989.00)				
B. Total Monetary Contributions And Receipts (From Schedule I)					\$		11,080.00				
C. Total Funds Available (Sum Of Lines A and B)					\$		(909.00)				
D. Total Expenditures (From Schedule III)					\$		7,323.28				
E. Ending Cash Balance (Subtract Line D From Line C)					\$		(8,232.28)				
F. Value Of In-Kind Contributions Received (From Schedule II)					\$		0.00				
G. Unpaid Debts And Obligations (From Schedule IV)					\$		8,270.00				

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF COLLEEN MCINTYRE OSBORNE	From: <u>10/24/2023</u> To: <u>11/27/2023</u>

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)	\$ 4,000.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 4,000.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 7,080.00

Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 11,080.00
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Name of Filing Committee or Candidate	Reporting Period
	From: To:

	DATE	AMOUNT
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

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 FRIENDS OF COLLEEN MCINTYRE OSBORNE	Reporting Period From: <u>10/24/2023</u> To: <u>11/27/2023</u>
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				DATE			AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$	500.00
Gas Workers Employees union				11	3	2023		
Mailing Address 9190 Marshall st								
City Philadelphia,	State PA	Zip Code (Plus 4) 19114						
Full Name of Contributing Committee				MO	DAY	YEAR	\$	2,500.00
CARPENTERS PAC OF PHILA & VICINITY				10	28	2023		
Mailing Address 1803 SPRING GARDEN ST								
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19130-0391						
Full Name of Contributing Committee				MO	DAY	YEAR	\$	1,000.00
Operating Engineers local 542				10	30	2023		
Mailing Address 1375 Virginia Drive								
City Ft Washington	State PA	Zip Code (Plus 4) 19034						

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 4,000.00

			DATE			AMOUNT	
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					
Employer Name			Occupation				
Employer Mailing Address/Principal Place of Business		City		State		Zip Code (Plus 4)	

PAGE 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 Candidate FRIENDS OF COLLEEN MCINTYRE OSBORNE	Reporting Period From: <u>10/24/2023</u> To: <u>11/27/2023</u>
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				DATE		AMOUNT	
Full Name				MO	DAY	YEAR	\$ 4,080.00
colleen McIntyre Osborne							
Mailing Address 10830 Ellicott RD							
City Philadelphia		State PA	Zip Code (Plus 4) 19154				
Receipt Description debt repayment							
Full Name				MO	DAY	YEAR	\$ 3,000.00
james McIntyre							
Mailing Address 15 Virginia lane							
City Horsham		State PA	Zip Code (Plus 4) 19044				
Receipt Description debt repayment							

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL	
\$	7,080.00

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 COLLEEN MCINTYRE OSBORNE		From: <u>10/24/2023</u> To: <u>11/27/2023</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period (1)		\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period (2)		\$	0.00
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period (3)		\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)		\$	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: To:
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						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:		To:	
				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF COLLEEN MCINTYRE OSBORNE	From <u>10/24/2023</u> To: <u>11/27/2023</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
james McIntyre				
Mailing Address 15 Virginia Lane	10	30	2023	\$ 2,000.00
City Horsham	State PA	Zip Code (Plus 4) 19044	Description of Expenditure debt repayment	
To Whom Paid	MO	DAY	YEAR	
Colleen McIntyre Osborne				
Mailing Address 10830 Ellicott St	11	2	2023	\$ 2,500.00
City Philadelphia	State PA	Zip Code (Plus 4) 19154	Description of Expenditure loan repayment	
To Whom Paid	MO	DAY	YEAR	
Philadelphia FOP				
Mailing Address 11630 Caroline Road	11	3	2023	\$ 150.00
City Philadelphia	State PA	Zip Code (Plus 4) 19154	Description of Expenditure fundraiser	
To Whom Paid	MO	DAY	YEAR	
chelenham printing				
Mailing Address 518 Ryers Ave	11	3	2023	\$ 93.28
City Cheltenham	State PA	Zip Code (Plus 4) 19102	Description of Expenditure campaign literature	
To Whom Paid	MO	DAY	YEAR	
Colleen McIntyre				
Mailing Address 10830 Ellicott St	11	19	2023	\$ 1,580.00
City philadelphia	State PA	Zip Code (Plus 4) 19154	Description of Expenditure repaid campaign loan	
To Whom Paid	MO	DAY	YEAR	
james McIntyre				
Mailing Address 15 Virginia Lane	11	19	2023	\$ 1,000.00
City Horsham	State PA	Zip Code (Plus 4) 19044	Description of Expenditure repaid campaign debt	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.				PAGE TOTAL
				\$ 7,323.28

SCHEDULE IV
STATEMENT OF UNPAID DEBTS
 Use this Section to itemize all unpaid debts and obligations
 which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate FRIENDS OF COLLEEN MCINTYRE OSBORNE	Reporting Period From: <u>10/24/2023</u> To: <u>11/27/2023</u>
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				DATE		Outstanding Balance of Debt	
Name of Creditor colleen mcintyre osborne				MO	DAY	YEAR	\$ 6,420.00
Mailing Address 10830 Ellicott				11	14	2023	
City Philadelphia		State PA	Zip Code (Plus 4) 19154	Description of Debt debt repayment			
Name of Creditor james McIntyre				MO	DAY	YEAR	\$ 1,850.00
Mailing Address 15 Virginia lane				11	14	2023	
City Horsham		State PA	Zip Code (Plus 4) 19044	Description of Debt debt repayment			
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL \$ 8,270.00