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	10098			Rep File			CA	NDII	DATE		СОМ	4ITTEE	✓	LOBI	BYIST		
Name of Filing C	ommittee, Candi	date or L	obbyist:		FRIE	ND	S OF	TIFFA	NY	ТНОМ	AS-S	MITH P	AC					
Street Address:	8 GREEN RI	DGE ROA	۷D															
City:	YARDLEY							State	:	PA			Zip Cod	ie: 19	067-3	050		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE- 2. PRIMARY				30 DA						AMENDM REPORT	Yes	N	0	√	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	<u>-</u> 5	5.	30 DA		Р	OST-	6. X		TERMINA REPORT		Yes	N	0	√
report type)	ANNUAL REPOR	T 7.	Year 2023						METHOD ECK ONE				PAPER		√	DISK	ETTE	
Name of Office S	ought by Candid	ate:			•			DAT	ΕO	F ELE	CTIC	ON	District Number	Office Code	Par	ty Cod	Code	
JUDGE OF THE	COURT OF COM	MON PI F	AS					МО		DAY	Y	EAR	7	CPJ	DEN	1	09	
				_					11		7	2023		(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of Expenditures		МО	DAY	YEAR	1			МО		DAY	Y	EAR	FO	R OFFIC	E USE	ONLY	,	
			1 1	. 2	023	Т	0		11	:	27	2023						
A. Amount Bro	ught Forward Fro	om Last F	Report				\$				1,	604.42						
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 0.00																		
C. Total Funds Available (Sum Of Lines A and B) \$ 1,604.42																		
D. Total Expenditures (From Schedule III)						\$					558.44							
E. Ending Cash Balance (Subtract Line D From Line C)							\$				1,0)45.98						
F. Value Of In-	Kind Contributio	ns Receiv	ed (From S	chedu	le II)	\$					0.00						
G. Unpaid Debt	s And Obligation	s (From	Schedule IV	/)			\$				1,	045.98						
				AFF	IDA	VI	T SE	CTIC	NC									
PART I - If this is		•								•								
I swear (or affirm) correct and comple		cluding th	e attached sc	hedules	s filed	l on	paper	or by e	electr	onic m	ediun	i, are to t	he best o	f my knov	vledge	and be	ief , tr	ue
Sworn to and subs	cribed before me th day of	nis	20						,		:	Signature	of Perso	n Submitt	ing Rep	ort		_
	Signat	ture					- -						Prin	ted Name				_
My Commission Ex	pires						_		•				Ema	il				
	МО	D	AY	YR						Are	ea Co	de	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a ca	ndidate's	authorized	Comn	nitte	e, C	andid	ate sl	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende		my knowl	edge and beli	ief this	polit	ical	comm	ittee h	as no	ot viola	ted aı	ny provis	ions of th	e act of Ju	ine 3,1	937 (P.	L. 133	3,
Sworn to and subsc	ribed before me thi day of	s	20									s	ignature o	of Candida	ite			_
							-						Printe	d Name				-
	Signature	e					-							:•				_
My Commission Exp	ires												Ema					
	мо	D	AY	YR			-			Area Code Daytime Telephone N					e Num	ber	-	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

-				
Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF TIFFANY THOMAS-SMITH PAC	From:	1/1/202	<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	\$	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
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

	this Part to itemize only with an aggregate valu								
Name of Filing Committee or Candidate			Re	Reporting Period					
			From: To) :			
		<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 Fining Committee of Candidate			Rep Fro					
					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.

Name of Filing Committee or Candidate			Reporting Period						
			From:			То:			
				DA	TE		A	MOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on Scheo	dule I, Detailed Sum	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		Reporting Period							
			Fron	n:		То	То:		
				D	ATE		АМО	DUNT	
Full Name of Contributor					DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plu	s 4)						
Employer Name				Occupation					
Employer Mailing Address/Principal Place of Business City					State		Zip Code	(Plus 4)	
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3							PAG	GE TOTAL 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 Co	Name of Filing Committee or Candidate			Reporting Period							
			From:			То:					
				D	ATE		AN	10UNT			
Full Name				мо	DAY	YEAR					
Mailing Address							\$	0.00			
City	State	Zip Code (Plus 4)								
Receipt Description	·	•									
Enter Grand Total of Part E or	Schedule T Detaile	d Summary Page	Section	4			PA	GE TOTAL			
Lines Grana Fotal of Fair 2 of	r benedule 1/ betanet	z Summary r uge,	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								
FRIENDS OF TIFFANY THOMAS-SMITH PAC	From:	<u>1/1/2023</u> To:	11/27/2023						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR									
TOTAL for the Reporting Pe	eriod (1)	\$	0.00						
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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 Candidate				Reporting Period					
	Fr					То:			
				DATE			AMOUNT		
Full Name of Contributor				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	ле Г		PAGE TOTAL		
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	, ,		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	•		•			Occupation					
Employer Mailing Address/Principal Place of Business City				State		Zip Code(Plus Descr			cription of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.							PAGE TOTAL 0.00				

STATEMENT OF EXPENDITURES

Name of Filing Co	ommittee or Candidate			Reporti	ng Period						
FRIENDS OF TIF	FANY THOMAS-SMITH	PAC		From	From <u>1/1/2023</u> To: <u>11/</u>						
			-		DATE						
To Whom Paid				МО	DAY	YEAR					
Bank of American	า										
Mailing Address 2894 S Eagle Road					27	2023	\$	59.90			
City Newtown State Zip Code (Plus 4)					Description of Expenditure						
PA 18940					ees						
To Whom Paid				МО	DAY	YEAR					
Squarespace											
Mailing Address	225 Varick St FL 12			11	27	2023	\$	128.79			
City New York		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
		NY	10014	Website	e hosting						
To Whom Paid Paragon Solution	s			мо	DAY	YEAR					
Mailing Address 1 Solution Way Ste 200			11	27	2023	\$	369.75				
City Waynesbo	oro	State	Zip Code (Plus 4)	us 4) Description of Expenditure							
		VA	22980	Online payment merchant fees							

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL

558.44

\$

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 Candida	ame of Filing Committee or Candidate							
FRIENDS OF TIFFANY THOMAS-SMIT	TH PAC		From:		1/1/2023	То:	<u>1</u>	1/27/2023
					DATE			Outstanding Balance of Debt
Name of Creditor Tiffany Thomas Smith	мо	DAY	YEAR					
Mailing Address 8 Green Ridge I	Road			11	27	2023	\$	1,045.98
City Yardley	Descrip Contrib	otion of Del	bt	•				
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.								PAGE TOTAL 1,045.98
							\$	1,043.96