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 :	ion 2023	C0170			Repor Filed		CAND	IDATE	√	co	OMMITTE	E	LOBI	BYIST	
Name of Filing C	Committee, Candid	ate or L	obbyist:		TODD	BROW	N								
Street Address:	Street Address:														
City:							State: Zip Code: 17601								
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 D. PRIM		POST-			AMENDMENT REPORT?		Yes	No	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	5.	30 D. ELEC	AY TION	POST-	POST- 6. X			TERMINATION REPORT?		✓ No	
report type)	ANNUAL REPORT	7.	Year 2023		FILING METH () CHECK O				-				\checkmark	DISKE	TTE
Name of Office S	L Sought by Candida	te:					DATE O	OF ELE	CTI	ON	District Number	Office Code	Par	ty Code	County Code
			46				мо	DAY	Y	EAR	2	CPJ	REP		
JUDGE OF THE	COURT OF COMM	ION PLE	AS				11		7	2023	j	(SEE INS	TRUCTI	ONS FOR (CODES)
	Receipts and	мо	DAY	YEAR	Ł		мо	DAY	Y	EAR	FO	R OFFIC	E USE	ONLY	
Expenditures	s from:		10 24	2	023	Ю	11	L	27	2023					
A. Amount Bro	ught Forward From	n Last R	eport			\$				0.00					
B. Total Monet	ary Contributions	And Rec	eipts (Fron	1 Sche	dule I)	\$	5			133.47					
C. Total Funds	Available (Sum Of	Lines A	and B)			\$;			133.47					
D. Total Expen	ditures (From Sch	edule II	I)			\$	5		5,	000.00]				
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)		\$;		(4,8	66.53)					
F. Value Of In-	Kind Contributions	s Receiv	ed (From S	chedu	le II)	\$;			0.00					
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	()		\$;			0.00					
				AFF	IDAV	IT SE	CTION								
	s a Committee rep														
I swear (or affirm correct and compl) that this report, incl ete.	luding the	e attached sc	hedules	s filed or	i paper	or by elec	tronic m	ediun	n, are to	the best of	my know	ledge	and belie	ef , true
Sworn to and subs	cribed before me this day of	5	20							Signatur	e of Persor	n Submitt	ing Rep	oort	
	Signatu	re				_					Print	ed Name			
My Commission E	xpires					_					Emai	I			
	мо	D	AY	YR				Ar	ea Co	de	Daytim	e Teleph	one Nu	mber	
	a report of a cand that to the best of n ed.				•			-		ny provis	sions of the	e act of Ju	ine 3,1	937 (P.L	. 1333,
Sworn to and subscribed before me this Signature of Candidate															
											Printe	d Name			
My Commission Exp	Signature bires					_					Emai	1			
	мо	D	AY	YR	1	_		Area	Code		Da	ytime Te	lephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** TODD BROWN From: <u>10/24/2023</u> To: <u>11/27/2023</u> 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 133.47 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 133.47 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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 Committee or Candidate				Reporting Period						
				From: To:			1			
		·			DATE			AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4	4)							
								PAGE TOTAL		
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.								0.00		

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 Candidate Reporting Period										
			From: To):				
					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 Schedule I, Detailed Summary Page, Section 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						
				То:					
				DA	TE		A	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR		0.00	
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 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:				m: To						
				D	ATE	АМ	IOUNT			
Full Name of Contributor				мо	DAY	YEAR	\$	0.00		
Mailing Address										
City	State	Zip Code (Pl	ıs 4)							
Employer Name				Occupation						
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)		
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.							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			Reporting Period							
TODD BROWN			From:		<u>10/24/202</u>	<u>3</u> To:		<u>11/27/2023</u>		
					ATE		AMOUNT			
Full Name TODD BROWN FOR JUDGE				мо	DAY	YEAR	\$	133.47		
Mailing Address				11	27	202	3			
City LANCASTER	State	Zip Code (Plus 4)		2,	202				
	PA	17601								
Receipt Description PARTIAL REPAY	MENT OF LOAN									
		_	- ··	_				PAGE TOTAL		
Enter Grand Total of Part E on Schedu	lie I, Detailed St	immary Page,	Section	4.			\$	133.47		

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										
TODD BROWN	From:	<u>10/24/2023</u> то:	<u>11/27/2023</u>								
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER 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			AMOUNT				
Full Name of Contributor				DAY	YEAR			
Mailing Address		_				7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:			1					
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						
						То:				
· · · · ·					DATE		AMOUNT			
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address							\$ 0.00			
City	State	Zip Code(Plus 4)								
Employer of Contributor		•		Occupa	ation					
Employer Mailing Address/Principal Place of Business City			State	e Zip	Code(Plus 4)	Descri	ption of Contribution			
Enter Grand Total of Part G on Scho Summary Page, Section 3.	edule II, In-Kind	d Contributions D	etaile	ed			PAGE TOTAL 0.00			

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or (Candidate			Reporting Period						
TODD BROWN				From <u>10/24/2023</u>			То:	<u>11/27/2023</u>		
				DATE AMOUNT						
To Whom Paid				мо	DAY	YEAR				
RCLC										
Mailing Address				10	30	2023	\$	4,000.00		
City LANCASTER State Zip Code (Plus 4)				Descrip	tion of Exp	enditure				
	PA	1	7601	CONTRIBUTION						
To Whom Paid				мо	DAY	YEAR				
RCLC				MO						
Mailing Address				11	6	2023	\$	1,000.00		
City LANCASTER	State	z	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
PA 17601 CONTRIBUTION										
								PAGE TOTAL		
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.					\$	5,000.00				