Campaign Finance Report

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

Filer Identification	on	20230	C0170				eport led B		CAI	NDII	DATE	√	CC	MMITTEE		LOBE	BYIST			
Name of Filing C	ommittee,	Candida	ate or Lo	obbyist:		TOI	DD B	BROWI	N											
Street Address:																				
City:									State	:				Zip Code	: 17	601				
TYPE OF REPORT	6TH TUESD PRE-PRIMA		1.	2ND FRIDAY PRIMARY	Y PRE	-	2.	30 DA PRIMA		Р	POST-	3.		AMENDME REPORT?	NT	Yes	No	~		
(place X to the right of	6TH TUESD PRE-ELECT		4.	2ND FRIDAY ELECTION	Y PRE	≣-	5.	30 DA		Р	POST-	6. X		TERMINAT REPORT?	TERMINATION Yes No REPORT?					
report type)	ANNUAL R	REPORT	7.	Year 2023					NG ME CHECI					PAPER	PAPER DISKE					
Name of Office S	Sought by (Candidat	te:				,		DAT	E O	F ELEC	СТІО	N	District Number	Office Code	Par	ty Code	County Code		
				_					МО		DAY	YE	AR	2	СРЈ	REP	,			
JUDGE OF THE	COURT OF	- COMM	ON PLEA	AS						11		7	2023	 	(SEE INS	TRUCTIO	ONS FOR C	ODES)		
Summary of I	•	and	МО	DAY	YEAR	2			МО		DAY	YE	AR	FOR	FOR OFFICE USE ONLY					
Expenditures	; from:		1	10 24	2	2023	₹	О		11	2	27	2023							
A. Amount Bro	ught Forwa	ard From	ı Last R	eport				\$					0.00							
B. Total Moneta	ary Contrib	utions A	and Rec	eipts (From	Sche	dule	e I)	\$				1	33.47							
C. Total Funds	Available ((Sum Of	Lines A	and B)				\$				1	33.47							
D. Total Expend	ditures (Fr	om Sche	dule II	1)				\$				5,0	00.00							
E. Ending Cash	Balance (S	Subtract	Line D	From Line (C)			\$				(4,86	6.53)]						
F. Value Of In-l	Kind Contri	ibutions	Receive	ed (From So	chedu	le I	I)	\$					0.00							
G. Unpaid Debt	s And Obli	gations	(From S	Schedule IV)			\$					0.00		'					
					AFF	:ID/	AVI	T SE	CTIC	N										
PART I - If this is	s a Commit	tee repo	ort, trea	surer sign l	nere.	If th	nis is	a Can	ıdidat	e re	port, c	andid	late sig	gn here.						
I swear (or affirm) correct and comple		port, inclu	uding the	attached sch	1edules	s file	ed on	paper o	or by e	lectr	ronic me	edium,	are to	the best of	my knov	vledge	and belie	ef , true		
Sworn to and subs	scribed before day of	e me this		20						,		Si	gnature	e of Person	Submitt	ing Rep	ort			
		C'atuu				_		- -						Printe	d Name					
My Commission Ex	крires	Signatur	е											Email						
	м	10	D/	AY	YR						Are	ea Code	e	Daytime	Teleph	one Nu	mber			
Part II- If this is	a report o	of a cand	lidate's	authorized	Comr	nitte	ee, C	andid	ate sh	all	sign he	ere.								
I swear (or affirm) No 320) as amende		best of m	ıy knowle	edge and belic	ef this	; poli	itical	commi	ittee h	as no	ot violat	ted any	/ provis	ions of the	act of Ju	ıne 3,1	937 (P.L.	. 1333,		
Sworn to and subsc		me this											s	ignature of	Candida	ite				
	day of —— —							_						Printed	Name					
	Si	ignature				—		-												
My Commission Exp	_	3.								-				Email						
		мо	Di	AY	YR			-			Area	Code		Day	time Te	elephon	e Numbe	er		

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
TODD BROWN	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)	\$	133.47
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			\$	133.47

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 Candidat	e		Reporting	Period			
		1	From:		То	:	
				DATE			AMOUNT
Full Name of Contributing Committee			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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

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.

Name of Filing Comm	ittee or Candidate	Repo	rting P	eriod			
		From	:		To	o:	
		I		DATE			AMOUNT
Full Name of Contributo)r		мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
	State	Zip Code (Plus 4)				*	
, 							PAGE TOTAL

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		P	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			0.00
Mailing Address							- \$		0.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTA	AL
Enter Grand Total of Part C on Sche	dule I, Detailed Sun	nmary P	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	1			Repo	orting Pe	riod			
				Fron	n:		To):	
					D	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR	\$	0.00
Mailing Address									
City	State	Zi	p Code (Plus	s 4)					
Employer Name		•			Occupa	tion			
Employer Mailing Address/Principal Pl	ace of Business		City			State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detaile	ed Sumn	nary Page,	Section	on 3.			\$	PAGE 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 Candidate	Reporting P	Period				
TODD BROWN	From:	10/24/2023 To:	11/27/2023			

			D	ATE		AMOUN	IT
Full Name			мо	DAY	YEAR	_	122.47
TODD BROWN FOR JUDGE			МО	DAT	TEAR	\$	133.47
Mailing Address 1076 OLDE FORGE CROSSING		11	27	2023			
City LANCASTER	State	Zip Code (Plus 4)			2020		
	PA	17601					
Receipt Description PARTIAL REPAYN	TENT OF LOAN	•					

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

PAGE TOTAL \$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 Pe	riod	
TODD BROWN	From:	10/24/2023 To :	11/27/2023
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	DR .	
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
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 Candi	idate		Reporting Period					
			From:			То:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$	0.00	
City	State	Zip Code (Plus 4)						
Description of Contribution:	•		•	•	•			
Enter Grand Total of Part F on	Schedule II, In-Ki	nd Contributions Detai	led Sum	mary Pag	ge,		PAGE TOTAL	
Section 2.						\$	0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Rep	porting	Period			
				Fro	m:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address				-				\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occup	ation			
Employer Mailing Address/Principal Plac	e of Business	City	у	State	e Zip	Code(Plus 4)	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, In-Kin	nd C	Contributions D	etaile	ed				PAGE TOTAL
Summary Page, Section 3.									0.00

5,000.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or C	Candidate		Reporti	ng Period				
TODD BROWN			From	10/24	4/2023	То:	11/27/2023	
			DATE AMO					
To Whom Paid			МО	DAY	YEAR			
RCLC								
Mailing Address 2260 ERIN COURT				30	2023	\$	4,000.00	
City LANCASTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	17601	CONTRIBUTION					
To Whom Paid			МО	DAY	YEAR			
RCLC			HO		LAK			
Mailing Address 2260 ERIN	COURT		11	6	2023	\$	1,000.00	
City LANCASTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	17601	CONTR	IBUTION				
							PAGE TOTAL	
Enter Grand Total of Expen	ditures on Page 1, Re	port Cover Page, Item D).			١.		