Campaign Finance Report

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

Filer Identificat Number :	ion 2023	C0245			Repo Filed		CANDI	DATE	✓	СС	OMMITTEI	1	LOB	BYIST	
	Committee, Candida	ate or Lo	obbvist:			-	E FRITSC								
Street Address:								,							
City:							State:				Zip Cod	e: 18	901		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 D/ PRIM		POST-	3.		AMENDMI REPORT?	ENT	Yes	No	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	E- 5.	30 D/ ELEC		POST-	6. X		TERMINA REPORT?	TION	Yes	🗸 No	
report type)	ANNUAL REPORT	AL REPORT 7. Year 2023 FILING METHOD () CHECK ONE						PAPER		\checkmark	DISKE	TTE			
Name of Office	Sought by Candidat	te:					DATE O)F ELE(CTION		District Number	Office Code	Par	ty Code	County Code
JUDGE OF THE	COURT OF COMM	ON PLEA	AS				мо	DAY	YEA	R	7	CPJ			
							11		7	2023		(SEE INS	TRUCTI	ONS FOR (CODES)
	Receipts and	мо	DAY	YEAR		_	мо	DAY	YEA	R	FO	R OFFIC	EUSE	ONLY	
Expenditures from: 10 24 2023						то	11	. 2	27 2	2023					
A. Amount Bro	ought Forward Fron	n Last Ro	eport			\$				0.00	_				
B. Total Monet	ary Contributions A	And Rece	eipts (From	1 Sche	dule I)	\$;			0.00	-				
C. Total Funds	Available (Sum Of	Lines A	and B)			\$;			0.00					
D. Total Expen	ditures (From Sche	edule III	[)			\$;			0.00					
E. Ending Cash	n Balance (Subtract	Line D	From Line (C)		\$			(0.00	-				
F. Value Of In-	-Kind Contributions	Receive	ed (From S	chedu	le II)	\$;		(0.00					
G. Unpaid Deb	ts And Obligations	(From S	chedule IV	')		\$	\$ 0.00								
				AFF	IDAV	IT SE	CTION								
	s a Committee repo		-							-	-				
I swear (or affirm correct and comp) that this report, incl lete.	uding the	attached scl	hedule	s filed o	n paper	or by elect	ronic me	edium, a	re to i	the best of	my know	vledge	and beli	ef , true
Sworn to and sub	scribed before me this day of		20						Sig	naturo	e of Person	Submitt	ing Rej	port	
	Signatu	re				_					Print	ed Name			
My Commission E	xpires										Email				
	МО	DA	AY	YR				Are	ea Code		Daytime	e Telepho	one Nu	mber	
	a report of a cand) that to the best of m ed.							-		provis	ions of the	act of Ju	ıne 3,1	937 (P.L	. 1333,
Sworn to and subs	cribed before me this									s	ignature o	f Candida	ite		
	day of 										Printed	l Name			
My Commission Ex	Signature										Emai				
	мо	DA	AY	YR	Ł			Area	Code		Da	ytime Te	elephor	ne Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** C. THEODORE FRITSCH, JR. 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) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 0.00 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			Re	porting I	Period			
			Fre	om:		То	:	
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
							Γ	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 Candidat	e			orting P	eriod				
			Fro	m:		Тс):		
					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 S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	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 Cano	didate		Reporting) Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Commi	ittee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C on	Schedule I, Detaile	ed Summary Pa	age, Sectio	n 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:	То:

				D	ATE		АМС	DUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion	-		
Employer Mailing Address/Principal Business	Place of		City		State		Zip Code ((Plus 4)
Enter Grand Total of Part C on S	chedule I, Deta	iled Sumr	nary Page, Secti	on 3.			PAG	GE TOTAL
							\$	0.00

I

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		Report	ing Peri	od			
			From:			То:		
				D	ATE		AMOUNT	
Full Name				мо	DAY	YEAR		
Mailing Address							\$ i	0.00
City	State	Zip Code (Plus 4)					
Receipt Description				I	1			
Enter Grand Total of Part E o	n Schodulo I. Dotailor		Section	4			PAGE TO	TAL
	m Schedule 1, Detailet	i Suillilai y Page,	Section	-7.			\$	0.00

SCHEDULE II IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS

E THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THING DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Perio	od	
C. THEODORE FRITSCH, JR.	From:	<u>10/24/2023</u> To:	<u>11/27/2023</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
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, 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					
	F					То:		
				DATE		АМС	DUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address	Mailing Address					\$	0.00	
City	State	Zip Code (Plus 4)						
Description of Contribution:								
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detail Section 2.				mary Pag	je,	PAGE	TOTAL	
					4	5	0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate	•				Re	porting P	eriod			
					Fro	From: To:				
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occupat	tion	1	1		
Employer Mailing Address/Principal Place of City State Business				Zip 4)	Code(Plus	Descri	ption of	Contribution		

Enter Grand Total of Part G on Schedule II, In	-Kind Contributio	ons Detailed	PAGE TOTAL
Summary Page, Section 3.			0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period					
F						То:			
				DATE A					
To Whom Paid				DAY	YEAR				
Mailing Address						\$	0.00		
City	State	Zip Code (Plus 4)	Descrij	otion of Exp	penditure				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL		
	on Page 1, Report C	over Page, Item L				\$	0.00		