### **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 2	.023C	0087				Repoi Filed	_	CA	NDI	DATE	<b>\</b>	C	MMITTE	COMMITTEE LOBBYIST				
Name of Filing C	ommittee, Car	ndida	te or Lo	bbyis	it:	Α	AROE	, NAN	ICY										
Street Address:																			
City:									Stat	e:				Zip Cod	<b>ie:</b> 18	8020			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1	1.	2ND F PRIMA	RIDAY ARY	PRE-	2.	30 D PRIM		P	POST-	3.		AMENDM REPORT?		Yes	N	0	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION		1.	2ND F		PRE-	5.	30 D ELEC	AY TION	F	POST-	6. 2	X	TERMINA REPORT?		Yes	N	0	<b>\</b>
report type)	ANNUAL REPO	ORT	7.	Year	2023				NG M CHEC					PAPER	PAPER		DISK	ETTE	
Name of Office S	ought by Cand	didate	):				Ī		DAT	ΓΕ Ο	F ELE	СТІ	ON	District Number	Office Code	Pai	ty Code	Code	
JUDGE OF THE	COURT OF CO	OMMC	N PLEA	AS					МО		DAY	`	YEAR	3	CPJ	DEI	М	48	
										11		7	2023		(SEE IN	STRUCTI	ONS FOR	CODES	)
Summary of Expenditures		d	МО	DA		YEAR			МО		DAY		YEAR	FO	R OFFI	CE USE	ONLY	,	
			1	.0	24	20	23	ГО		11	7	27	2023	_					
A. Amount Bro	ught Forward	From	Last Re	eport				\$	;		(1	.07,	978.00)						
B. Total Moneta	ary Contributio	ons A	nd Rece	eipts (	(From	Sched	ule I)	\$	5				0.00						
C. Total Funds Available (Sum Of Lines A and B) \$ (107,978.00)																			
D. Total Expend	ditures (From	Sched	dule III	()				\$	5			23	,000.00						
E. Ending Cash	Balance (Subt	tract	Line D	From	Line C	<b>:</b> )			5		(1	30,9	978.00)						
F. Value Of In-	Kind Contribut	tions	Receive	ed (Fr	om Sc	hedule	e II)	9	5				0.00						
G. Unpaid Debt	s And Obligati	ions (	From S	chedu	ıle IV)	)		9	5				0.00						
						AFFI	DAV:	IT SE	CTI	ON									
PART I - If this is	a Committee	repoi	rt, trea	surer	sign h	ere. If	this i	s a Ca	ndida	te re	port, c	cano	didate si	gn here.					
I swear (or affirm) correct and comple		, inclu	ding the	attach	ned sch	edules	filed or	paper	or by	electi	ronic m	ediu	m, are to	the best o	f my knov	wledge	and be	ief , tr	ue
Sworn to and subs	cribed before me	e this		20									Signatur	e of Perso	n Submit	ing Re	oort		_
	Sig	nature	)	-				_						Prin	ted Name	<b>.</b>			_
My Commission Ex	rpires							_		•				Ema	il				
	МО		DA	Υ		YR					Are	ea C	ode	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a	candi	date's a	autho	rized (	Commi	ittee, (	Candio	late s	hall	sign he	ere.							
I swear (or affirm) No 320) as amende		t of my	knowle	dge an	nd belie	f this p	oolitica	comm	nittee	has n	ot viola	ted a	any provis	ions of the	e act of J	une 3,1	937 (P.	L. 133	3,
Sworn to and subsc	ribed before me day of	this		20									S	ignature o	of Candida	ate			_
				-				_						Printe	d Name				-
	Signat	ure						_						Ema	il				_
My Commission Exp	ires							_							•				_
	мо		DA	LΥ		YR		_			Area	Cod	e	Da	aytime T	elephor	ne Num	ber	_

## SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting Period							
AAROE, NANCY	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)	\$	0.00				
Total Monetary Contributions and Receipts During this Reporting Period (Add ar 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

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 Commit	lame of Filing Committee or Candidate				Reporting Period							
				From:		То	•					
			<b>'</b>		DATE			AMOUNT				
Full Name of Contributin	g Committee			мо	DAY	YEAR						
Mailing Address							\$	0.00				
City	s	itate	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.

(Exclude contributions from political committees reported in Part A)

Name of Filing Committee or Candidate				Reporting Period						
			From: 1			To	<b>)</b> :			
					DATE			AMOUNT		
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus	4)							

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	ame of Filing Committee or Candidate			Period	Reporting Period					
			From:			То:				
				DA	TE		P	AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR		0.00		
Mailing Address							<b>+</b>	0.00		
City	State	Zip Cod	e (Plus 4)							
								PAGE TOTAL		
nter Grand Total of Part C on Schedule I, Detailed Summary			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				Repo	orting Pe	riod				
				Fron	n:		o:	D:		
					D	ATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR		\$	0.00
Mailing Address										
City	State	Zip	Code (Plus	4)						
Employer Name					Occupation					
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip	Code (Plus 4	)
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, So				Section	on 3.			\$	PAGE TOTA	<b>AL</b> 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		Report	ing Peri	od			
			From:			To:		
				E	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Pl	us 4)					
Receipt Description	'							
Futor Coand Total of Dant	Fan Cahadula I Datailad	I Commence Dance C	` <b>!</b>	4			ı	PAGE TOTAL
Enter Grand Total of Part	e on Schedule 1, Detailed	i Summary Page, S	ection	4.			\$	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 Per	riod							
AAROE, NANCY	From:	<u>10/24/2023</u> <b>To:</b>	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 PAR	T 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	ame of Filing Committee or Candidate					Reporting Period				
			From:			То:				
				DATE			AMOUNT			
Full Name of Contributor				DAY	YEAR					
Mailing Address						<b>7</b> \$		0.00		
City	State	Zip Code (Plus 4)								
Description of Contribution:	-	<b>-</b>	•	•	•					
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Details				ailed Summary Page,			PAGE TOTAL			
Section 2.	ection 2.					\$		0.00		

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate				Rep	orting	Period				
				Fro	m:		To:			
						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	′	State	e Zip	Code(Plus 4)	Descr	ript	ion of Contribution	on
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	ontributions De	etaile	ed				PAGE TOT	ΓAL
Summary Page, Section 3.	<b></b>									0.00

### STATEMENT OF EXPENDITURES

Name of Filing Committee or		Reporting Period							
AAROE, NANCY	From	10/24	<u>4/2023</u>	То:	11/27/2023				
				DATE			AMOUNT		
To Whom Paid			МО	DAY	YEAR				
Nancy Aaroe									
Mailing Address				3	2023	\$	23,000.00		
City Bethlehem State Zip Code (Plus 4)				tion of Exp	enditure				

Loan to campaign

18045