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	3C0166				eport led B		CAI	NDII	DATE	*	COMMITTEE LOBBYIST							
Name of Filing C	ommittee, Candi	date or L	obbyist:		DA	NIEL	C. M	CCAFI	FER	Y									
Street Address:																			
City:								State	e:				Zip Cod	Zip Code: 19114					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FR PRIMAR	IDAY PR Y	E-	2.	30 DA PRIMA		Р	OST-	3.		AMENDM REPORT?	ENT	Yes	N	lo	\	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FR	IDAY PI ON	RE-		30 DA ELECT		Р	OST-	6.	Х	TERMINA REPORT?	TION	Yes	١	lo	\	
report type)	ANNUAL REPOR	T 7.	Year 20)23				NG ME					PAPER		V	DISK	ETTE		
Name of Office S	ought by Candid	ate:						DAT	ΕO	F ELE	СТІ	ON	District Number	Office Code	Pai	ty Cod	e Cou		
	- ,							МО		DAY	1	YEAR	-1	SPM	DEI	М	1000		
											2023	3	(SEE IN	STRUCTI	ONS FO	R CODES	5)		
Summary of		МО	DAY	YEA	R			МО		DAY		YEAR	FO	R OFFI	CE USE	ONL	7		
Expenditures	from:		10	24	2023	3 T (0		11	:	27	2023	3						
A. Amount Bro	ught Forward Fro	om Last R	eport				\$					0.00							
B. Total Monet	ary Contributions	And Rec	eipts (F	rom Sch	edul	le I)	\$					862.05	5						
C. Total Funds Available (Sum Of Lines A and B) \$ 862.05																			
D. Total Expenditures (From Schedule III) \$ 862.05																			
E. Ending Cash Balance (Subtract Line D From Line C) \$ 0.00																			
F. Value Of In-	Kind Contributio	ns Receiv	ed (Fror	n Sched	ule I	II)	\$					0.00							
G. Unpaid Debt	s And Obligation	s (From	Schedule	e IV)			\$					0.00							
				AF	FID	AVIT	ΓSE	CTIC	NC										
PART I - If this is	a Committee re	port, trea	surer si	gn here	. If t	his is	a Car	ndidat	te re	port, o	can	didate si	gn here.						
I swear (or affirm) correct and comple	that this report, in ete.	cluding th	e attached	d schedul	es file	ed on p	paper (or by e	electr	ronic m	ediu	ım, are to	the best of	my kno	wledge	and be	lief , tr	rue	
Sworn to and subs	cribed before me th day of	nis	20						•			Signatu	re of Person	Submit	ting Re	ort		-	
	Signat	ture					-						Print	ed Name	•			_	
My Commission Ex	_	uic							•				Emai	<u> </u>				-	
	мо	D	AY	Υ	R		-		,	Ar	ea C	ode	Daytime	e Teleph	one Nu	mber			
Part II- If this is	a report of a ca	ndidate's	authoriz	zed Com	mitt	ee, Ca	andid	ate sl	nall s	sign h	ere.								
I swear (or affirm) No 320) as amende		my knowl	edge and	belief th	is pol	litical	comm	ittee h	as no	ot viola	ted	any provi	sions of the	act of J	une 3,1	937 (P	.L. 133	з,	
Sworn to and subsc		s											Signature o	f Candid	ate			-	
	day of ————————————————————————————————————						-						Printe	d Name				_	
	Signature	<u> </u>					-											_	
My Commission Exp	_												Emai	1					
	мо	D	AY	Y	R		•			Area	Cod	le	Da	ytime T	elephor	ne Num	ber	_	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
DANIEL C. MCCAFFERY	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)	\$	862.05
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			\$	862.05

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 C	eporting	Period					
		F	rom:		То	:	
		·		DATE			AMOUNT
Full Name of Contributing Comm	nittee		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.

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)

(Exclude cont		r ponticui conni		.03 .01	Joi tea	in i di c	~,	
Name of Filing Committee or Cand	idate		Rep	oorting P	eriod			
			Fro	m:		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.

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		0.0
Mailing Address							- \$	0.0
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule I, Detailed Sun	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			Rep	orting Pe	riod					
					From:			То:		
				D	ATE			AMOUNT		
Full Name of Contributor				МО	DAY	YEAR	\$	0.00		
Mailing Address										
City	State	Zip Code (Plus	s 4)							
Employer Name				Occupat	tion					
Employer Mailing Address/Principal Plac	e of Business	City		•	State		Zip	Code (Plus 4)		
Enter Grand Total of Part C on Schee	dule I, Detailed Su	ımmary Page,	Section	on 3.			\$	PAGE TOTAL 0.00		
							т	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	idate Reporting Period					
DANIEL C. MCCAFFERY	From:	10/24/2023 To:	11/27/2023			

			D	ATE		AMOUN	т		
Full Name				DAY	VEAD				
MCCAFFERY FOR SUPREME COURT			МО	DAY	YEAR	\$	862.05		
Mailing Address 1518 WALNUT STREET SUITE 702				7	2023				
City PHILADELPHIA	State	Zip Code (Plus 4)	11						
	PA	19102							
Receipt Description REIMBURSEMENT FOR TRAVEL AND PHONE									

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

PAGE TOTAL \$ 862.05

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 Peri	od	
DANIEL C. MCCAFFERY	From:	<u>10/24/2023</u> To:	11/27/2023
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTO	₹	
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 Car	Reporting Period							
	From: To:							
				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 o	n Schedule II, In-Ki	nd Contributions Detai	led Sun	mary Pa	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			
	F						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

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period					
DANIEL C. MCCAFFERY	From	10/24/2023	То:	11/27/2023		

				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
AMERICAN EXPRESS			1-10		ILAK		
Mailing Address 200 VESEY STREET			11	6	2023	\$	862.50
City NEW YORK	State	Zip Code (Plus 4)	Description of Expenditure				
	NY	10285	PHONE AND TRAVEL COSTS				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
						\$	862.50