#### **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	0245				Repor		CAI	NDIDATE COMMITTEE LOBBYIST										
Name of Filing C	Committee, Car	ndida	te or Lo	bbyist:		C	. THE	DDOR	E FRI	TSC	H, JR.									_
Street Address:																				
City:									State	e:				Zip Co	de: 18	8901				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1	1.	2ND FRI PRIMAR		PRE-	2.	30 DA		Р	OST-	3.		AMENDA REPORT		Yes		No		<b>/</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION		1.	2ND FRI ELECTIO		PRE-	5.	30 DA		Р	OST-	6. TERMINATION REPORT?				Yes	1	No	•	<b>/</b>
report type)	ANNUAL REPO	ORT 7	7. <b>X</b>	Year 20	23				NG ME						PAPER		DI	SKET	TE	
Name of Office S	Sought by Cand	lidate	 e:				•		DAT	ΕO	F ELE	СТІ	ON	District Number	Office Code	Pa	rty (	Code	Coun Code	
									МО		DAY	-	YEAR	7	CPJ				coue	
JUDGE OF THE	COURT OF CO	)MMO	N PLEA	AS						11		7	2023		(SEE IN	ISTRUCT	IONS	FOR CO	DDES)	,
Summary of	•	d	мо	DAY		YEAR			МО		DAY	,	YEAR	FC	R OFFI	CE US	E OI	NLY		
Expenditures	from:		1	.1	28	202	23 <b>T</b>	0		1		1	2024							
A. Amount Bro	ught Forward I	From	Last Re	eport				\$					0.00	1						
B. Total Moneta	ary Contributio	ns A	nd Rece	eipts (Fı	rom	Sched	ule I)	\$					0.00							
C. Total Funds Available (Sum Of Lines A and B) \$ 0.00																				
D. Total Expenditures (From Schedule III)									0.00											
E. Ending Cash Balance (Subtract Line D From Line C)							\$					0.00	]							
F. Value Of In-	Kind Contribut	ions l	Receive	ed (Fron	n Sc	hedule	II)	\$					0.00							
G. Unpaid Debt	s And Obligati	ons (	From S	chedule	IV)	)		\$					0.00			•				
						AFFI	DAVI	T SE	CTIC	NC										
PART I - If this is	s a Committee	repor	rt, treas	surer si	gn h	ere. If	this is	a Caı	ndidat	te re	port, o	cano	didate si	gn here.						
I swear (or affirm) correct and comple		, inclu	ding the	attached	l sch	edules f	filed on	paper	or by e	electr	ronic m	ediu	m, are to	the best o	f my kno	wledge	and	l belief	f , tru	16
Sworn to and subs	cribed before me	this:		20									Signatur	e of Perso	n Submit	ting Re	port	t		-
		nature		_				_						Prin	ted Nam	e				-
My Commission Ex	-	ilatui	·											Ema	il					-
	МО		DA	·Υ		YR				,	Are	ea C	ode	Daytin	ne Telepi	hone N	umb	er		_
Part II- If this is	a report of a	candi	date's a	authoriz	ed (	Commi	ttee, C	andid	ate sh	nall s	sign h	ere.								
I swear (or affirm) No 320) as amende		of my	knowle	dge and	belie	f this p	olitical	comm	ittee h	as no	ot viola	ted	any provis	sions of th	e act of J	lune 3,	1937	' (P.L.	1333	3,
Sworn to and subsc		this											9	ignature (	of Candid	late				-
	day of 							_						Printe	ed Name					-
	Signat	ure						_												_
My Commission Exp	ires													Ema	il					
	мо		DA	ΛΥ		YR		-			Area	Cod	e	D	aytime 1	elepho	ne N	lumbe	r	- ا

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
C. THEODORE FRITSCH, JR.	From:	11/28/20	2 <u>3</u> To:	1/1/2024
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 an 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

	this Part to itemize onl with an aggregate value		\$2		) in the			
Nume of Fining Comm		From:			То	:		
					DATE			AMOUNT
Full Name of Contribut	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	)					
	<b>!</b>	<b>I</b>	!		<u> </u>			DAGE TOTAL

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

PAGE TOTAL	
\$ 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)

Name of Filing Committee or	Candidate		Rep	oorting P	eriod			
			From: To			o:		
					DATE		А	MOUNT
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 Candi	me of Filing Committee or Candidate		Reporting Period					
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary 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	nme of Filing Committee or Candidate		Rep	orting Pe	riod				
			Fror	n:		To	То:		
				D	ATE		А	MOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address  City State Zip Code (Plus 4)							\$	0.00	
City	State	Zip Code (Plu	s 4)						
Employer Name		•		Occupation					
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Coo	de (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary 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		Report	ting Perio	od			
			From:			To:		
				D	ATE		АМ	IOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	•	•		•	•	•	•	
Enter Grand Total of Part E	on Schedule I. Detailed	d Summary Page.	Section	4.			PA	GE TOTAL
Stand 1 stand of 1 are 2		a cammary rage,					\$	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 Peri	od	
C. THEODORE FRITSCH, JR.	From:	11/28/2023 <b>To:</b>	1/1/2024
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTO	र	
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, 1		\$	0.00

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Filing Committee or Candid	ame of Filing Committee or Candidate			g Period			
			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on S	chedule II, In-Kir	nd Contributions Deta	iled Sun	ımary 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	me of Filing Committee or Candidate				Reporting	Period			
					From:		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 Plad Business	ce of	City	Sta	ite	Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, I	n-Kind	Contributions	Deta	ailed				PAGE TOTAL
Summary Page, Section 3.									0.00

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or (	ame of Filing Committee or Candidate					Reporting Period					
			From			То:					
				DATE			AMOUNT				
To Whom Paid	МО	DAY	YEAR								
Mailing Address						\$	0.00				
City	State	Zip Code (Plus 4)	Description of Expenditure								
							PAGE TOTAL				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item			).			\$	0.00				