Campaign Finance Report

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

Filer Identificat	ion 202	20556			Repor		CANDI	DATE	СОМ	MITTEE	✓	LOB	BYIST	
Number : Name of Filing	Committee, Candi	date or l	obbyist:			-	JUSTICE							
Nume of Filing			obbyisti		TRINCL		JUSTICE							
Street Address:														
City:	HARRISBUR	G					State:	PA		Zip Co	de: 17	112		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRID PRIMARY	DAY PRE	- 2.	30 DA PRIM		POST- 3.		AMENDMENT REPORT?		Yes	No	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRID		E- 5.	30 D/ ELEC		POST-	6.	TERMIN REPORT		Yes	V No	
report type)	ANNUAL REPOR	T 7. X	Year 202	3			NG METHO			PAPER		\checkmark	DISKE	TTE
Name of Office	— Sought by Candid	ate:					DATE O			District Number	Code		ty Code	Code
JUDGE OF THE		TH COUR	т				мо	DAY	YEAR	-1	CCJ	REP)	06
							11		7 2023	3	(SEE INS	TRUCTI	ONS FOR (CODES)
	Receipts and	мо	DAY	YEAF	2		мо	DAY	YEAR	F	OR OFFIC	E USE	ONLY	
Expenditure	Ю	12	2	9 202	3									
A. Amount Bro	ought Forward Fro	om Last F	Report			\$			6,013.18	3				
B. Total Monet	tary Contributions	and Rec	ceipts (Fro	om Sche	edule I)	\$			1,325.00)				
C. Total Funds	Available (Sum C	Of Lines A	and B)			\$			7,338.18	3				
D. Total Exper	nditures (From Sc	hedule II	1)			\$			7,338.18	•				
E. Ending Cast	n Balance (Subtra	ct Line D	From Line	eC)		\$			0.00					
F. Value Of In-	-Kind Contribution	ns Receiv	ed (From	Schedu	le II)	\$			0.00					
G. Unpaid Deb	ts And Obligation	s (From	Schedule 1	[V)		\$			0.00					
				AFF	IDAV	IT SE	CTION							
	is a Committee re		_							-				
I swear (or affirm correct and comp	i) that this report, in lete.	cluding th	e attached s	schedule	s filed on	paper	or by elect	ronic me	dium, are to	the best o	of my knov	vledge	and beli	ef , true
Sworn to and sub	scribed before me th day of	is	20						Signatu	re of Perso	on Submitt	ing Rep	oort	
	Signat	ure				_				Prir	nted Name			
My Commission E	-									Ema	ail			
	мо	D	AY	YR		_		Are	a Code	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a ca	ndidate's	authorize	d Comr	nittee, C	Candid	ate shall	sign he	re.					
I swear (or affirm No 320) as amend) that to the best of led.	my knowl	edge and be	elief this	s political	comm	ittee has n	ot violat	ed any provi	sions of th	e act of Ju	ine 3,1	937 (P.L	. 1333,
Sworn to and subs	cribed before me thi	S								Signature	of Candida	ite		
	day of					_				Print	ed Name			
	Signature					_								
My Commission Ex	-	-								Ema	ail			
	мо	D	AY	YF	ł	_		Area C	Code	D	aytime Te	elephor	ie Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** PRINCE FOR JUSTICE From: <u>6/6/2023</u> **To:** 12/29/2023 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 50.00 \$ **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)** 75.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 75.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 0.00 1,200.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 1,200.00 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 \$ 1,325.00 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			Reporting Period					
Fr			From: To:					
		·			DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	4)					
								PAGE TOTAL
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.							\$	0.00

Use this Part to it \$	\$ temize all 50.01 to \$	PART B ER CONTRI 50.01 TO \$250.00 other contributio 250.00 in the rep rom political com) ns w ortii	vith an ng peri	aggrega iod.			rom
Name of Filing Committee or Candid	ate		Rep	porting Po	eriod			
PRINCE FOR JUSTICE			Fro	om:	<u>6/6/2</u>	2023 To	:	<u>12/29/2023</u>
					DATE			AMOUNT
Full Name of Contributor Sandra Levine				мо	DAY	YEAR		
Mailing Address							\$	75.00
City Hatfield	State	Zip Code (Plus	4)	8	7	2023		
	PA	19440						
								PAGE TOTAL
Enter Grand Total of Part A on	Schedule I,	Detailed Summary Pa	ge, S	ection 2	-		\$	75.00

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			Reporting	Period				
			From:			То:		
				DA	TE		A	MOUNT
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 Sched	lule I, Detailed Sun	nmary 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				Repo	orting Pe	riod				
PRINCE FOR JUSTICE				From	From: <u>6/6/2023</u>			To: <u>12/29/2023</u>		
					D	ATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR	\$	750.00	
Martha O'Bryant						DAT		_ ₹	/50.00	
Mailing Address					6	19	2023			
City Orrtanna	State	Zij	p Code (Plus	4)	Ű	19				
	PA	l 17	'353					I		
Employer Name Retired				Occupat	tion	Retired				
Employer Mailing Address/Principal Pla	ce of Business		City			State		Zip C	Code (Plus 4)	
			Orrtanna			PA		1735	53	
Full Name of Contributor					мо	DAY	YEAR			
Jeanne White					MO	DAT	TEAR	\$	450.00	
Mailing Address					8	7	2023	7		
City North Wales	State	Zij	p Code (Plus	4)	0	,				
	PA	19	9454							
Employer Name Requested					Occupat	tion	Request	ed		
Employer Mailing Address/Principal Pla	ce of Business		City			State		Zip C	Code (Plus 4)	
			North Wal	es		PA		1945	54	
						-	Г		PAGE TOTAL	
Enter Grand Total of Part C on Sche	dule I, Detailed S	umn	nary Page,	Sectio	on 3.				-	
								5	1,200.00	

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 Perio	d			
			From:			To:		
				D	ATE		AMOUNT	
Full Name				мо	DAY	YEAR	\$ 0.0	00
Mailing Address								
City	State	Zip Code (Plus 4)					
Receipt Description	·							
		_	.				PAGE TOTAL	
Enter Grand Total of Part E on Schedu	lie 1, Detailed Sumn	nary Page,	Section	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 Period		
PRINCE FOR JUSTICE	From:	<u>6/6/2023</u> то:	<u>12/29/2023</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	ΓF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, I		\$	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			
			From:			То:	
				DATE		A	MOUNT
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address						1 \$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	le,	P/	AGE TOTAL
					:	\$	0.00

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

Name of Filing Committee or Candidate			Rep	porting I	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		•		Occupa	ation		
Employer Mailing Address/Principal Plac	e of Business	City	State	e Zip	Code(Plus 4)	Descri	ption of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-Kind	d Contributions D	etaile	d			PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candida	e		Reporti	ng Period					
PRINCE FOR JUSTICE			From	<u>6/0</u>	<u>6/2023</u>	То:	<u>12/29/2023</u>		
				DATE			AMOUNT		
To Whom Paid			мо	DAY	YEAR				
Rightway Compliance LLC									
Mailing Address			6	14	2023	\$	150.00		
City Harrisburg	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	РА	17106	Account	ting and Co	ompliance	e Service			
To Whom Paid Gettysburg Times LLC			мо	DAY	YEAR				
Mailing Address			6	21	2023	\$	750.00		
City Gettysburg	State	Zip Code (Plus 4)	Descrip	l tion of Exp	l enditure				
PA 17325			Debt Pa						
To Whom Paid WinRed Technical Services LLC			мо	DAY	YEAR				
Mailing Address			6	21	2023	\$	1.97		
City Arlington	State	Zip Code (Plus 4)	Descrip	L tion of Exp	ı enditure				
	VA	22219	Processing Fee						
To Whom Paid			мо	DAY	YEAR				
UPS Store			no						
Mailing Address			6	16	2023	\$	24.58		
City Harrisburg	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	PA	17112	Printing	and Shipp	oing				
To Whom Paid			мо	DAY	YEAR				
McClure and Associates LLC							F 962 19		
Mailing Address	-		6	16	2023	\$	5,863.18		
City Camp Hill	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	PA	17011	Debt Pa	yment: Ca	impaign	Managem	ent Services		
To Whom Paid			мо	DAY	YEAR				
Landis Truck Graphics									
Mailing Address			8 9 2023 \$ 530.00						
City Souderton	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	PA	18964	Signs	Signs					

To Whom Paid			мо	DAY	YEAR			
Checkmate Strategies LLC					TEAR			
Mailing Address			8	9	2023	\$	1.87	
City Red bank State Zip Code (Plus 4)			Description of Expenditure					
	NJ	07701	Text Me	ssage Adv	ertising			
To Whom Paid			мо	DAY	YEAR			
Rightway Compliance LLC			MO		TEAR			
Mailing Address			12	20	2023	\$	16.58	
City Harrisburg	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
	PA	17106	Account	ing and Co	ompliance	e Service	e	
							PAGE TOTAL	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							7,338.18	