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	2023	C0037				port		CAI	NDI	DATE	√	/ CC	MMITTEE		LOBBYIST		
Name of Filing C	Committe	e, Candida	ate or Lo	obbyist:		GAI	RCIA	, DAN	1ARIS	L	•							
Street Address:																		
City:									State	:				Zip Code	Zip Code: 19103			
TYPE OF REPORT	6TH TUES		1.	2ND FRIDA PRIMARY	Y PRE	-	2.	30 DA		Р	OST-	3.		AMENDME REPORT?				
(place X to the right of								30 DA		Р	POST- 6. X			TERMINATION Yes REPORT?				
report type)	ANNUAL	REPORT	7.	Year 2023					NG ME CHECI					PAPER		DISKE	TTE	
Name of Office S	nme of Office Sought by Candidate:								District Number	Office Code	Party Code	County Code						
JUDGE OF THE	COURT	DE COMM	ON DIE	AC DUTLA	DEI DI	⊔T∧			МО		DAY	'	YEAR	1	CPJP	DEM	51	
JODGE OF THE	COURT	JE COMM	ON PLL	AS - PIIILA	DLLFI	шА				11		7	2023		(SEE IN	STRUCTIONS FOR (CODES)	
Summary of		and	МО	DAY	YEAR	R.			МО		DAY	•	YEAR	FOF	OFFIC	E USE ONLY		
Expenditures	from:			6 6	2	023	Т	0		11	2	27	2023					
A. Amount Bro	ught Forv	ward Fron	ı Last R	eport				\$			(17,	000.00)					
B. Total Moneta	ary Contr	ibutions <i>l</i>	And Rec	eipts (From	Sche	dule	e I)	\$				17	7,000.00					
C. Total Funds	Available	(Sum Of	Lines A	and B)				\$					0.00					
D. Total Expend	ditures (I	From Sche	edule II	I)				\$					0.00					
E. Ending Cash	Balance	(Subtract	Line D	From Line	C)			\$					0.00	-				
F. Value Of In-	Kind Con	tributions	Receive	ed (From S	chedu	le I	I)	\$					0.00					
G. Unpaid Debt	s And Ob	ligations	(From S	chedule IV)			\$					0.00					
					AFF	ID	AVI	T SE	CTIC	N								
PART I - If this is	s a Comm	ittee repo	ort, trea	surer sign	here.	If th	nis is	a Caı	ndidat	e re	port, c	cano	didate sig	jn here.				
I swear (or affirm) correct and comple		report, incl	uding the	attached scl	hedule	s file	ed on	paper	or by e	lecti	ronic me	ediu	ım, are to t	the best of	my knov	vledge and beli	ef , true	
Sworn to and subs	cribed befo	ore me this		20									Signature	of Person	Submitt	ing Report		
	_	Signatur	·e					- -						Printe	ed Name	1		
My Commission Ex	cpires	_						_		•				Email				
		МО	DA	ΑY	YR						Are	ea C	ode	Daytime	Teleph	one Number		
Part II- If this is	a report	of a cand	lidate's	authorized	Comn	nitte	ee, C	andid	ate sh	all :	sign he	ere.						
I swear (or affirm) No 320) as amende		e best of m	y knowle	edge and beli	ef this	poli	itical	comm	ittee h	as n	ot violat	ted a	any provis	ions of the	act of Ju	ıne 3,1937 (P.L	. 1333,	
Sworn to and subsc		re me this								Signature of Candidate								
	day of —							-						Printed	Name			
		Signature						-										
My Commission Exp	ires													Email				
	_	МО	D	AY	YR	1		-			Area	Cod	e	Day	time To	elephone Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	J Period		
GARCIA, DAMARIS L	From:	6/6/202	<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)			\$	14,253.28
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	14,253.28
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	2,746.72
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			\$	17,000.00

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 Committee or Candida	e	R	eporting	Period			
		F	rom:		То	:	
		,		DATE			AMOUNT
Full Name of Contributing Committee			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.

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						
			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.

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	Reporting Per	iod		
GARCIA, DAMARIS L	From:	6/6/2023	То:	11/27/2023

DATE AMOUNT

Full Name of Contributing Committee					DAY	YEAR		
DAMA	DAMARIS L GARCIA FOR JUDGE					ILAK	\$ 14	1,253.28
Mailin	Mailing Address				26	2023	•	,
City	PHILADELPHIA	State	Zip Code (Plus 4)	11	20	2023		
		PA	19103-8280					

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL \$ 14,253.28

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				
				Fron	n:		To) :	
					D	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR	\$	0.00
Mailing Address									
City	State	Zi	p Code (Plus	(4)					
Employer Name	•				Occupa	tion	-	-	
Employer Mailing Address/Principal Pl	ace of Business		City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detaile	ed Sumr	mary 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	Reporting Perio	od	
GARCIA, DAMARIS L	From:	<u>6/6/2023</u> To:	11/27/2023

			D	ATE		AM	IOUNT		
Full Name			МО	DAY	VEAD		2 746 72		
Damaris Garcia			МО	DAY	YEAR	\$	2,746.72		
Mailing Address			11	26	2023				
City Philadelphia	State	Zip Code (Plus 4)		20	2023				
	PA	19103							
Receipt Description Forgiveness of outstanding loan balance									

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

PAGE TOTAL \$ 2,746.72

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		
GARCIA, DAMARIS L	From:	<u>6/6/2023</u> To:	11/27/2023
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	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				Reporting Period					
F				From: To:					
				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 Sche Section 2.	dule II, In-Kind (Contributions Detai	iled Sum	mary Pag	je,		PAGE TOTAL		
						\$	(0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Rep	porting	g Period				
				Fro	m:			То:		
						DATE				AMOUNT
Full Name of Contributor					мо	DAY	Y	/EAR		
Mailing Address				-					\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occu	pation				
Employer Mailing Address/Principal Plac	e of Business	Cit	ty	State	e Zi	ip Code(Plus 4) 1	Descrip	otion (of Contribution
Enter Grand Total of Part G on Sch	edule II, In-Kir	nd (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				
			From		То:		
			DATE				AMOUNT
To Whom Paid			мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)	Description of Expenditure				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
						\$	0.00