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 2019	0341			Rep File			CA	NDI	DATE		COM	AITTEE	Y	LUBB	1131	
Name of Filing C	ommittee, Candid	ate or L	obbyist:	,	HEID	DELE	BAUG	H FO	R A	TTORN	EY G	ENERAI	LINC				
Street Address:	141 WOODHA	VEN DF	RIVE														
City:	PITTSBURGH							State	e:	PA			Zip Co	de: 15	228		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2	2.	30 DA PRIMA		P	POST-	3.		AMENDN REPORT		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5	5.	30 DA		P	POST-	6.		TERMINA REPORT		Yes	No	\
report type)	ANNUAL REPORT	7. X	Year 2023				FILIN	IG ME					PAPER		\checkmark	DISKET	TTE
Name of Office S	ought by Candidat	te:	•		-			DAT	ΈO	F ELE	CTIC	ON	District Number	Office Code	Part	y Code	County Code
								МО		DAY	Y	EAR	-1	-	REP		02
									11		7	2023		(SEE INS	TRUCTIO	NS FOR C	ODES)
Summary of Expenditures	Receipts and	МО	DAY	YEAR			_	МО		DAY	Y	EAR	FC	R OFFIC	E USE	ONLY	
expenditures	irom:		1 1	20	023	T	0		12	;	31	2023					
A. Amount Bro	ught Forward Fron	n Last R	eport				\$				2,	828.19					
B. Total Moneta	ary Contributions /	And Rec	eipts (Fron	n Sche	dule	I)	\$					0.00					
C. Total Funds	Available (Sum Of	Lines A	and B)				\$				2,	828.19					
D. Total Expend	ditures (From Sch	edule II	I)				\$					626.60					
E. Ending Cash	Balance (Subtract	Line D	From Line	C)			\$				2,2	201.59					
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedu	le II))	\$					0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	/)			\$				15,	000.00		•			
				AFF	ΊDΑ	VI	ΓSE	CTI	NC								
I swear (or affirm)	that this report, incl	•	_									_		f my knov	vledge a	nd belie	f , true
Sworn to and subs	ete. cribed before me this											<u> </u>		61			
	day of		20								•	Signature	of Perso	n Submitt	ing Kep	ort	
	Signatu	re					-						Prin	ted Name			
My Commission Ex							_		•				Ema	il			
	МО		AY	YR							ea Co	de	Daytin	ie Teleph	one Nun	nber	
	a report of a cand					•				_			44	+ -f 1.	2 10	27 (0.1	1222
No 320) as amende		iy kilowi	euge and ben	iei tilis	ponti	icai	Commi	ittee i	145 III	ot viola	leu ai	ily provis	ions or th	e act of Ju	ille 3,19	37 (P.L.	1333,
Sworn to and subsc	ribed before me this day of		20									s	ignature (of Candida	ite		
			- —				-						Printe	ed Name			<u> </u>
My Commission Exp	Signature ires						-						Ema	il			—
	МО	D	AY	YR			•			Area	Code		D	aytime Te	elephone	e Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

-				
Name of Filing Committee or Candidate	Reporting	g Period		
HEIDELBAUGH FOR ATTORNEY GENERAL INC	From:	1/1/202	<u>З</u> То:	12/31/2023
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
			1	
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

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	te		Reporting	Period			
			From:		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.

(Exc	lude contributions fro	m political comm				in Part	A)	
Name of Filing Comm	ittee or Candidate		Rep	oorting F	Period			
			Fro	m:		To) :	
					DATE			AMOUNT
Full Name of Contributo	r			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
								PAGE TOTAL
Enter Grand Tota	l of Part A on Schedule I, De	etailed Summary Pag	je, S	ection :	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	Period					
			From:			То:			
				DA	TE		P	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			0.00
Mailing Address							- \$		0.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTA	AL
Enter Grand Total of Part C on Sche	dule I, Detailed Sun	nmary P	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			
			Fror	n:		To):	
				D	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupa	tion			
Employer Mailing Address/Principal Pla	ce of Business	City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Scho	dule I, Detailed S	Summary Page,	, Sectio	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	ing Peri	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plus 4)					
Receipt Description	•	•			•			
Forten Commit Tatal of Boot	F an Cabadala I Batallad	I C B	C					PAGE TOTAL
Enter Grand Total of Part	e on Schedule I, Detalled	summary 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		
HEIDELBAUGH FOR ATTORNEY GENERAL INC	From:	<u>1/1/2023</u> To:	12/31/2023
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	g Period				
			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	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					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				
HEIDELBAUGH FOR ATTORNEY GENERAL INC	From	1/1/2023	То:	12/31/2023	
		DATE		AMOUNT	

				DATE			AMOUNT
To Whom Paid			мо	DAY	YEAR		
Coldspark Media			МО		ILAK		
Mailing Address Three PPG	Place Suite 500		7	20	2023	\$	119.94
City Pittsburgh	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	15222	Online S	Services			
To Whom Paid			МО	DAY	YEAR		
Coldspark Media			МО	DAI	ILAK		
Mailing Address Three PPG	Place Suite 500		4	3	2023	\$	147.40
City Pittsburgh	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	15222	Online S	Services			
To Whom Paid			МО	DAY	YEAR		
Coldspark Media			MO	DAI	ILAK		
Mailing Address Three PPG	Place Suite 500		2	15	2023	\$	147.40
City Pittsburgh	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
PA 15222				Services			
To Whom Paid			МО	DAY	YEAR		
Joel Jukus			140		ILAK		
Mailing Address 4031 Thick	ket Lane		2	22	2023	\$	14.46
City Harrisburg	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA	17110	Shippin	g Reimbur	sement		
To Whom Paid			мо	DAY	YEAR		
Jukus Campaign Finance PLLC			MO	DAT	ILAK		
Mailing Address 4031 Thick	ket Lane		2	7	2023	\$	50.00
City Harrisburg	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	1	
	PA	17110	Account	ing and Co	ompliance	e Service	
To Whom Paid			МО	DAY	YEAR		
Coldspark Media			MO	DAT	ILAK		
Mailing Address Three PPG	Place Suite 500		1	13	2023	\$	147.40
City Pittsburgh	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
<u>-</u>	PA	15222	Online 9	Services			
	•						PAGE TOTAL
Enter Grand Total of Expen	ditures on Page 1, Re	port Cover Page, Item D).			\$	626.60
							020.00

STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate			Reporting Period					
HEIDELBAUGH FOR ATTORNEY GENERAL INC From			From:	<u>1/1/2023</u> To:			<u>1</u>	2/31/2023
				DATE			Outstanding Balance of Debt	
Name of Creditor Heather S Heidelbaugh				мо	DAY	YEAR		
Mailing Address 141 Woodhaven Drive				11	21	2019	\$	15,000.00
City Pittsburgh	State	Zip Code (F	lus 4)	Description of Debt				
	15228		LOAN FROM CANDIDATE					
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.								PAGE TOTAL
							\$	15,000.00