Commonwealth of Pennsylvania

Campaign Finance Statement



File this in lieu of a full report only if aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period.

FILER IDENTIFICATION NUMBER: 2023	C0157 REPORT FILED ON BEHALF OF:			Candidate		
NAME OF FILING COMMITTEE, CANDIDATE OR LOBB	YIST	CHARLES ROSENBAUM				
STREET ADDRESS 173 MARC LANE						
CITY HUNTINGDON VALLEY	STATE	PA	ZIP CODE 19000	5		
TYPE OF REPORT 30-Day Post-Primary						
NAME OF OFFICE SOUGHT BY CANDIDATE	JUDGE OF	THE COURT OF COM	IMON			
DISTRICT CODE 38		PARTY	CODE DEM			
DATE OF ELECTION 11/7/2023						
DATES OF REPORTING PERIOD	5/2/2023	то	6/5/2023	For Office Use Only		
AMENDMENT REPORT? NO	TER	MINATION REPOR	T? NO			
CASH BALANCE AT THE END OF REPORTING PERIOD:		0.00				
TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:		0.00				
	AFFID#	AVIT SECTION				

PART I -

If statement is filed on behalf of a Political Committee or Candidate's Committee, the Treasurer must sign here. If statement is filed on behalf of a Candidate, the Candidate must sign here.

If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.

						REPORTING PERIOD INDICATED ABOVE DID ND BELIEF, TRUE, CORRECT AND COMPLETE.	
SWORN TO AND SUBSCRIBED BEFORE ME THIS							
day of			20				
					SIGNATURE	OF PERSON SUBMITTING REPORT	
SIGNATURE		PRINTED NAME					
MY COMMISION EXPIRES	MO.	DAY	YR.	_	AREA CODE	DAYTIME TELEPHONE NUMBER	

PART II -

If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must sign here.

I SWEAR (OR AFFIRM) THAT TO THE I 3, 1937 (P.L. 1333, No. 320) AS AME		OWLEDGE A	ND BELIEF THIS	POLITICAL COMM	MITTEE HAS NOT VIOL	ATED ANY PROVISIONS OF THE ACT OF JUNE
SWORN TO AND SUBSCRIBED BEFORE ME THIS						
day of			20			
			-		SIGNATURE	OF PERSON SUBMITTING REPORT
	SIGNATURE					PRINTED NAME
MY COMMISION EXPIRES	MO.	DAY	YR.	-	AREA CODE	DAYTIME TELEPHONE NUMBER