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 202	00435			Rep File			CA	NDI	DATE		COM	AITTEE	V	LOBE	1131	
Name of Filing C	ommittee, Candi	date or L	obbyist:		VOT	ENE	FT										
Street Address:	PO BOX 245	11															
City:	PITTSBURGH	I						State	e:	PA			Zip Co	de: 15	5243		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2	2.	30 DA		P	POST-	3.		AMENDN REPORT		Yes	No	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	<u>-</u> 5	5.	30 DA		P	POST-	6.		TERMINA REPORT		Yes	No	✓
report type)	ANNUAL REPOR	7. X	Year 2023					NG ME					PAPER		\checkmark	DISKE	ГТЕ
Name of Office S	ought by Candid	ate:						DAT	ΈO	F ELEC	CTIC	N	District Number	Office Code	Par	ty Code	County Code
JUDGE OF THE	COMMONWEALT	H COLID	т					МО		DAY	YI	EAR		CCJ	DEM	1	
JODGE OF THE	COMMONWEALT	II COOK	•						11	ļ	7	2023		(SEE IN	STRUCTIO	NS FOR C	ODES)
	Receipts and	МО	DAY	YEAR	2			МО		DAY	ΥI	EAR	FC	OR OFFI	CE USE	ONLY	
Expenditures	from:		6 6	2	023	Т	0		12	3	31	2023					
A. Amount Bro	ught Forward Fro	m Last F	Report				\$				9,4	412.12					
B. Total Moneta	ary Contributions	And Red	eipts (Fron	n Sche	dule	I)	\$					0.00					
C. Total Funds Available (Sum Of Lines A and B)							\$				9,4	412.12					
D. Total Expenditures (From Schedule III)							\$				6,1	179.00					
E. Ending Cash Balance (Subtract Line D From Line C)							\$				3,2	233.12					
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	le II)	\$					0.00					
G. Unpaid Debt	s And Obligation	s (From	Schedule IV	/)			\$				8,8	371.00			1		
				AFF	IDA	VI	T SE	CTI	NC								
	that this report, in	-	_									_		of my kno	wledge a	and belie	ef , true
correct and comple	ete. cribed before me th	:_															
	day of	15	20				_				S	Signature	of Perso	n Submit	ting Rep	ort	
	Signat	ure					-						Prin	ted Name	•		
My Commission Ex	rpires						_						Ema	il			
	МО	D	AY	YR						Are	a Cod	le	Daytin	ne Teleph	one Nu	nber	
Part II- If this is	•					•											
No 320) as amende		•	edge and beli	ief this	polit	ical	comm	ittee i	ias n	ot violat	ed an	y provis	ions of th	e act of J	une 3,19)37 (P.L.	1333,
Sworn to and subsc	ribed before me this day of	5	20									S	ignature	of Candid	ate		
							- -						Printe	ed Name			
My Commission Exp	Signature ires								,				Ema	iil			—
	МО	D	AY	YR			-			Area	Code		D	aytime T	elephon	e Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
VOTENEFT	From:	6/6/202	<u>3</u> To:	12/31/2023
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	J 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	g 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	y Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add ar 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 only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Reporting Period					
		From: To):			
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
	•	·			•	•	$\overline{}$	DACE 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 Filling Committee of Candidate			Reporting Period From: To:					
			l		DATE			AMOUNT
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 Candidate	ne of Filing Committee or Candidate Report		Reporting	Reporting Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary 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	me of Filing Committee or Candidate		Reporting Period					
			Fror	n:		To		
				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		•		Occupa	tion		•	
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 Car	ndidate		Report	ing Perio	od			
			From:			To:		
				D	ATE		А	MOUNT
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 T. Detailed	d Summary Page	Section	4			P	AGE TOTAL
	2, 200 0000		22300				\$	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								
VOTENEFT	From:	<u>6/6/2023</u> To:	12/31/2023						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR									
TOTAL for the Reporting Pe	eriod (1)	\$	0.00						
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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 Candid	ate		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 S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	ле Г		PAGE TOTAL
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	ne 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

STATEMENT OF EXPENDITURES

Name of Filing Committee o	r Candidate		Reporti	ng Period			
VOTENEFT			From	<u>6/6</u>	6/2023	То:	12/31/2023
				DATE			AMOUNT
To Whom Paid Bryan Neft			МО	DAY	YEAR		
Mailing Address 1163 Firwood Ave			10	11	2023	\$	3,590.00
City Pittsburgh	State PA	Zip Code (Plus 4) 15243	Description of Expenditure Debt Repayment				
To Whom Paid Bryan Neft			МО	DAY	YEAR		
Mailing Address 1163 Fire	wood Ave		12	26	2023	\$	2,589.00
City Pittsburgh	State PA	Zip Code (Plus 4) 15243	Description of Expenditure Debt Repayment				
	L	I	1				PAGE TOTAL

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

6,179.00

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					
VOTENEFT			From:		<u>6/6/2023</u>	То:	<u>1</u>	12/31/2023
					DATE			Outstanding Balance of Debt
Name of Creditor Bryan Neft				мо	DAY	YEAR		
Mailing Address 1163 Firwood Ave				12	2	2022	\$	8,871.00
City Pittsburgh	State	Zip Code (Pl	us 4)	Descrip	tion of De	bt	•	
,	PA	15243		Loan				
								PAGE TOTAL
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.					\$	8,871.00		