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	0007			Rep File			CA	NDI	DATE		COM	MITTEE	~	LOB	D1131	
Name of Filing C	ommittee, Candida	ate or L	obbyist:	•	THE	BIP	ARTI	SAN (СОМ	IMITTE	Е ТО	ELECT	BRIAN	PANEL	LA		
Street Address:	2940 WILLIAN	1 PENN	HIGHWAY														
City:	EASTON							State	e:	PA			Zip Co	de: 1	8045		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2		30 DA PRIMA		P	POST-	3.		AMENDI REPORT		Yes	No	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5		30 DA		P	POST-	6.		TERMIN. REPORT		Yes	No	
report type)	ANNUAL REPORT	7. X	Year 2023					NG ME					PAPER		\	DISKE	TTE
Name of Office S	ought by Candidat	te:						DAT	ΈΟ	F ELEC	CTIO	N	District Number		Pa	rty Code	County Code
JUDGE OF THE	COURT OF COMM	ON PLF	AS					МО		DAY	YE	AR	3	CPJ	DE	М	48
									11		7	2023		(SEE I	NSTRUCT	ONS FOR	CODES)
Summary of Expenditures		МО	DAY	YEAR	1			МО		DAY	YI	EAR	FC	OR OFF	CE USI	ONLY	
			12 7	20	023	T	0		12	3	31	2023					
A. Amount Brought Forward From Last Report \$							12,6	575.66									
B. Total Monetary Contributions And Receipts (From Schedule					dule	I)	\$	\$ 0.00									
C. Total Funds Available (Sum Of Lines A and B)						\$				12,6	575.66						
D. Total Expenditures (From Schedule III)						\$				12,6	75.66						
E. Ending Cash	Balance (Subtract	Line D	From Line	C)			\$					0.00					
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	')			\$					0.00			'		
				AFF	IDA	VI	ΓSE	CTI	NC								
	that this report, incl	-	_									_			owledae	and beli	ef . true
correct and comple	ete.	-					•	•				,		•			
Sworn to and subs	cribed before me this day of —		20				-				S	Signature	e of Perso	n Submi	tting Re	port	
	Signatu	re					-						Prin	nted Nam	ie		
My Commission Ex	pires						_		,				Ema	nil			
	МО	D	AY	YR						Are	a Cod	le	Daytin	ne Telep	hone Nu	ımber	
	a report of a cand											_					
No 320) as amende		iy knowle	edge and beli	ef this	politi	cal	comm	ittee r	ias n	ot violat	ed an	y provis	ions of th	e act of	June 3,1	.937 (P.L	1333,
Sworn to and subsc	ribed before me this day of		20									S	ignature	of Candi	date		
			_				• •						Printe	ed Name			
My Commission Exp	Signature ires												Ema	ail			
	МО	D	AY	YR			•			Area	Code		D	aytime	Telepho	ne Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Detailed Summary Lag	-			
Name of Filing Committee or Candidate	Reporting	Period		
THE BIPARTISAN COMMITTEE TO ELECT BRIAN PANELLA	From:	12/7/202	<u>3</u> To:	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
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

	this Part to itemize only with an aggregate valu								
Name of Filing Comm	nittee or Candidate		Re	porting	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			Re _l	oorting P m:				
					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			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.)

			orting Pe	ilou			
		Fron	n:		То	:	
			D/	ATE		АМ	OUNT
			МО	DAY	YEAR		
						\$	0.00
State	Zip Code (Plus	s 4)					
			Occupat	tion			
e of	City			State		Zip Code	(Plus 4)
dule I, Detailed Su	ımmary Page,	Section	on 3.				GE TOTAL 0.00
	e of	e of City	State Zip Code (Plus 4)	State Zip Code (Plus 4) Occupat	State Zip Code (Plus 4) Occupation Other State	State Zip Code (Plus 4) Occupation Occupation Other State Occupation Output Outp	DATE AM MO DAY YEAR \$ State Zip Code (Plus 4) Occupation City State Zip Code

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 Co	andidate		Report	ting Perio	bd			
			From:			То:		
				D	ATE		AN	10UNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	•						
Enter Grand Total of Part E or	Schedule T Detaile	d Summary Page	Section	4			PA	GE TOTAL
Lines Grana Fotal of Fair 2 of	r benedule 1/ betanet	z Sammary r age,	Section	••			\$	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	l	
THE BIPARTISAN COMMITTEE TO ELECT BRIAN PANELLA	From:	<u>12/7/2023</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 Candidat	:e		Reporting	g Period			
			From:			То:	
				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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candida	te				Re	porting	Period				
					Fro	m:		То	:		
					<u> </u>		DATE				AMOUNT
Full Name of Contributor						мо	DAY	YEAR	1		
Mailing Address										\$	0.00
City	State		Zip Code(F	Plus 4)							
Employer of Contributor	•		•			Occupa	ation				
Employer Mailing Address/Principal P Business	lace of	City		State		Zip 4)	Code(Plus	Desc	ripti	on of C	ontribution
Enter Grand Total of Part G on S	chedule II, I	In-Kind	Contributi	ons De	taile	ed					PAGE TOTAL
Summary Page, Section 3.											0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting P	Period		
THE BIPARTISAN COMMITTEE TO ELECT BRIAN PANELLA	From	12/7/2023	То:	12/31/2023

				DATE			AMOUNT
To Whom Paid Brian Panella				DAY	YEAR		
Mailing Address 905 Iron Lane				22	2023	\$	12,675.66
City Easton	State PA	Zip Code (Plus 4) 18040	1 -	otion of Exp			
							PAGE TOTAL
nter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							12,675.66