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 | 30026 | | | Repo | | | CAND | IDATE | | соми | MITTEE | ✓ | LOBI | BYIST | | |
|--|--|-------------------------------------|--------------------------|------|---------|------|----------------|--------------------|-----------|--------|------------|--------------------|----------------|----------|-----------|----------|----------|
| Name of Filing C | Committee, Candi | date or L | obbyist: | - | NANC | CY. | AARO | E FOR J | UDGE | | | | | | | | |
| Street Address: | 2568 NAZAF | ETH ROA | AD | | | | | | | | | | | | | | |
| City: | EASTON | | | | | | | State: | PA | | | Zip Cod | de: 18 | 8045-2 | 713 | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDAY P PRIMARY | RE- | 2 | | 30 DA PRIMA | | POST- | 3. | | AMENDM REPORT | | Yes | No | | / |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDAY I ELECTION | PRE | - 5 | | 30 DA ELECT | | POST- | 6. | | TERMINA REPORT | | Yes | No | | / |
| report type) | ANNUAL REPOR | 7. X | Year 2023 | | | | | NG METH CHECK C | | | | PAPER | | / | DISKE | TTE | |
| Name of Office S | - Sought by Candid | ate: | | | _ | | | DATE (| OF ELE | CTIC | N | District Number | Office Code | Par | ty Code | Coun | |
| | | | | | | | | МО | DAY | ΥI | AR | 3 | CPJ | REP | | 48 | |
| JUDGE OF THE | COURT OF COM | MON PLE | AS | | | | | 1: | L | 7 | 2023 | ┢ | (SEE IN | STRUCTIO | ONS FOR C | ODES) | , |
| | Receipts and | МО | DAY YE | AR | | | | мо | DAY | YI | EAR | FC | R OFFI | CE USE | ONLY | | |
| Expenditures | from: | | 11 26 | 20 |)23 | T | 0 | 12 | 2 | 31 | 2023 | | | | | | |
| A. Amount Bro | ught Forward Fro | m Last R | eport | | | | \$ | | | 2,6 | 571.69 | | | | | | |
| B. Total Moneta | ary Contributions | ions And Receipts (From Schedule I) | | | | | | | 0.00 | | | | | | | | |
| C. Total Funds | Available (Sum (| of Lines A | and B) | | | | \$ | | 2,671.69 | | | | | | | | |
| D. Total Expend | ditures (From Sc | hedule II | I) | | | | \$ | | | 2,6 | 71.69 | | | | | | |
| E. Ending Cash | Balance (Subtra | ct Line D | From Line C) | | | | \$ | | | | 0.00 |] | | | | | |
| F. Value Of In- | Kind Contribution | ns Receiv | ed (From Sche | dul | e II) |) | \$ | | | | 0.00 | | | | | | |
| G. Unpaid Debt | s And Obligation | s (From S | Schedule IV) | | | | \$ | | | | 0.00 | | | | | | |
| | | | А | FF: | IDA' | VI | T SE | CTION | | | | | | | | | |
| PART I - If this is | s a Committee re | port, trea | surer sign her | e. I | f this | s is | a Can | ndidate r | eport, | candi | date sig | gn here. | | | | | |
| I swear (or affirm) correct and comple |) that this report, in ete. | cluding the | e attached sched | ules | filed | on | paper (| or by elec | tronic m | edium | , are to t | the best o | f my knov | wledge | and belie | ef , tru | ıe, |
| Sworn to and subs | cribed before me th day of | is | 20 | | | | | | | S | Signature | e of Perso | n Submitt | ting Rep | ort | | _ |
| | Signat | ure | | | | | - - | | | | | Prin | ted Name | • | | | - |
| My Commission Ex | cpires | | | | | | | | | | | Ema | il | | | | - |
| | мо | D | AY | YR | | | | | Ar | ea Cod | le | Daytim | e Teleph | one Nu | mber | | |
| Part II- If this is | a report of a ca | ndidate's | authorized Co | mm | ittee | e, C | andida | ate shall | sign h | ere. | | | | | | | |
| I swear (or affirm) No 320) as amende | | my knowl | edge and belief t | his | politio | cal | commi | ittee has | not viola | ted an | y provis | ions of th | e act of J | une 3,1 | 937 (P.L | . 1333 | 3, |
| Sworn to and subsc | | 5 | | | | | | | | | s | ignature o | of Candida | ate | | | - |
| | day of ———————————————————————————————————— | | | | | | - | | | | | Printe | ed Name | | | | - |
| | Signature | 1 | | | | | - | | | | | | | | | | _ |
| My Commission Exp | ires | | | | | | | | | | | Ema | il | | | | |
| | МО | D | AY | YR | | | • | | Area | Code | | D | aytime To | elephon | e Numb | er | - |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| Name of Filing Committee or Candidate | Reporting | g Period | | |
|--|-----------|----------|---------------|------------|
| NANCY AAROE FOR JUDGE | From: | 11/26/20 | <u>23</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 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

| Name of Filing Commi | ttee or Candidate | | Reporti | ng Period | | | |
|--------------------------|-------------------|-------------------|---------|-----------|------|----|--------|
| | | | From: | | То | : | |
| | | L | | DATE | | | AMOUNT |
| Full Name of Contributin | g Committee | | МС | 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 |

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 Cand | idate | | Rep | oorting P | eriod | | | |
|----------------------------------|-------|------------------|-----|-----------|-------|------|----|------|
| | | | Fro | m: | | To |): | |
| | | | | | DATE | | АМ | OUNT |
| 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.)

| Name of Filing Committee or Candidate | | | Rep | orting Pe | riod | | | |
|---|---------------------|---------------|---------|-----------|-------|------|----------|----------------------|
| | | | Fron | n: | | То | : | |
| | | | | D | ATE | | АМО | DUNT |
| Full Name of Contributor | | | | МО | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Code (Plu | s 4) | | | | | |
| Employer Name | | | | Occupat | tion | | | |
| Employer Mailing Address/Principal Plac Business | e of | City | | | State | | Zip Code | (Plus 4) |
| Enter Grand Total of Part C on Sche | dule I, Detailed Su | ummary Page, | Section | on 3. | | | PAG | GE 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 | | A | 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 Peri | od | |
|--|----------------|------------------------------|------------|
| NANCY AAROE FOR JUDGE | From: | <u>11/26/2023</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, 1 | | \$ | 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 Candi | date | | | | Re | porting F | Period | | | |
|---|--------------|---------|------------|---------|--------|-----------|-----------|-------|----------|-----------------|
| | | | | | Fro | om: | | To: | | |
| | | | | | | | DATE | | | AMOUNT |
| Full Name of Contributor | | | | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | | | \$ | 0.00 |
| City | State | | Zip Code(F | Plus 4) | | | | | | |
| Employer of Contributor | | | 1 | | | Occupa | tion | | 1 | |
| Employer Mailing Address/Principa Business | l Place of | City | | State | | Zip 4) | Code(Plus | Descr | iption (| of Contribution |
| Enter Grand Total of Part G on | Schedule II, | In-Kind | Contributi | ons De | etaile | ed | | | | PAGE TOTAL |
| Summary Page, Section 3. | , | | | | | | | | | 0.00 |

STATEMENT OF EXPENDITURES

| Name of Filing Committee or Can | didate | | Reporti | ng Period | | | |
|---|--------------------|-------------------|---------|-------------|----------|-----|------------|
| NANCY AAROE FOR JUDGE | | | From | 11/2 | 5/2023 | То: | 12/31/2023 |
| | | | | DATE | | | AMOUNT |
| To Whom Paid Facebook | | | мо | DAY | YEAR | | |
| Mailing Address 1 Hacker Way | , | | 12 | 4 | 2023 | \$ | 1.82 |
| City Menlo Park | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | |
| | CA | 94025 | Media | | | | |
| To Whom Paid Rumble Up | • | · | мо | DAY | YEAR | | |
| Mailing Address 2001 K St NW | I | | 12 | 5 | 2023 | \$ | 19.00 |
| City Washington | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | |
| Ç | DC | 20006 | Media | | | | |
| To Whom Paid PA Innovation Leadership Fund | | | МО | DAY | YEAR | | |
| Mailing Address . P.O. Box 53 | 5. , 18091 | | 12 | 5 | 2023 | \$ | 458.00 |
| City Wind Gap | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | l | |
| a sup | PA | 18091 | event | | | | |
| To Whom Paid Wix | | · | мо | DAY | YEAR | | |
| Mailing Address 500 Terry A F | rancois Boulevard. | Sixth Floor | 12 | 26 | 2023 | \$ | 159.00 |
| City San Francisco | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | ı | |
| 22 | CA | 94158 | Websit | | | | |
| To Whom Paid | | | МО | DAY | YEAR | | |
| Andres Weller | | | | | | 1 | |
| Mailing Address 109 Seem St | | | 12 | 26 | 2023 | \$ | 119.66 |

18049

Reimbursement

PΑ

| To Whom Paid Andres Weller | | | МО | DAY | YEAR | | |
|---|-----------------------|-----------------------------------|--|-----|------|----|------------|
| Mailing Address 109 Seem St | | | 12 | 27 | 2023 | \$ | 203.52 |
| City Emmaus | State PA | Zip Code (Plus 4) 18049 | Description of Expenditure Reimbursement | | | | |
| To Whom Paid Nancy Aaroe | | | МО | DAY | YEAR | | |
| Mailing Address 3582 Ironsto | one Rd | | 12 | 27 | 2023 | \$ | 388.47 |
| City Bethlehem | State PA | Zip Code (Plus 4) 18020 | Description of Expenditure loan payback | | | | |
| To Whom Paid Nancy Aaroe | | | МО | DAY | YEAR | | |
| Mailing Address 3582 Ironstone Rd | | | 12 | 31 | 2023 | \$ | 1,322.22 |
| City Bethlehem | State PA | Zip Code (Plus 4) 18020 | Description of Expenditure loan payback | | | | |
| Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. | | | | | | | PAGE TOTAL |
| Lines Grand Total of Expend | itu. es on i age 1, K | cport dover I age, Item D | • | | | \$ | 2,671.69 |