Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificat	ion 2023	3C0278			Repo Filed		CAN	NDIC	DATE	✓	СС	OMMITTEI		LOB	BYIST		
Name of Filing (Committee, Candid	late or L	obbyist:		MARV	[N L. V	VILLIA	MS									
Street Address:																	
City:							State	:				Zip Cod	Zip Code: 19144				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 D PRIM	DAY 1ARY	P	POST- 3.		AMENDMENT REPORT?		Yes	No	\checkmark		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRI	30 D ELEC	DAY CTION	P	OST-	6.		TERMINATION REPORT?		Yes	✓ No			
report type)	ANNUAL REPORT	7. X	Year 2023			FILING METHOD () CHECK ONE						PAPER		\checkmark	DISKE	TTE	
Name of Office Sought by Candidate:							DAT	E OF	F ELEC	TION		District Number	Office Code	Pai	ty Code	County Code	
JUDGE OF THE	MUNICIPAL COU	RT					мо		DAY	YEA		1	MCJ				
								11		7 2	2023		(SEE INS	TRUCTI	ONS FOR	CODES)	
Summary of Expenditures	Receipts and	мо	DAY	YEAF			мо		DAY	YEA	R	FO		E USE	ONLY		
			11 28	2	023	то		12	3	1	2023						
	ught Forward Fro		-				\$				0.00						
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sche	dule I)) (\$		1,500.00								
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			1,50	0.00						
D. Total Expen	ditures (From Sch	edule II	I)			9	\$			1,50	0.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)			\$			(0.00						
	Kind Contribution		•		le II)		\$			(0.00						
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	/)		5	\$			(0.00						
				AFF	IDAV	IT S	ECTIC	ΟN									
	s a Committee rep) that this report, inc															6	
correct and compl		iuaing the	e attached sc	neaule	s filed o	п рареі	rorbye	lectro	onic me	dium, a	reto	the best of	ту кпом	/leage	and bell	er, true	
Sworn to and subs	scribed before me thi day of 	S	20					-		Sig	nature	e of Person	Submitt	ing Re	port		
	Signatu	ire						-				Print	ed Name				
My Commission E	xpires							-				Email	l				
	МО	D	AY	YR					Are	a Code		Daytime	e Telepho	one Nu	mber		
	a report of a can) that to the best of r ed.								-		provis	ions of the	act of Ju	ine 3,1	937 (P.L	. 1333,	
Sworn to and subso	cribed before me this										s	ignature o	f Candida	te			
	day of 											Printed	l Name				
	Signature							_									
My Commission Exp	pires											Emai	l 				
	МО	D	AY	YF	ł				Area (Code		Da	ytime Te	lephor	ne Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** MARVIN L. WILLIAMS From: <u>11/28/2023</u> To: <u>12/31/2023</u> 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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 1,500.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 1,500.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 1,500.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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 Candidate				Reporting Period						
Fr				From: T			То:			
					DATE			AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus	4)							
							Γ	PAGE TOTAL		

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

\$

0.00

PART B 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 Candidat	e			orting P	eriod			
	From: To:							
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						
								PAGE TOTAL
Enter Grand Total of Part A on S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	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 Ca	Name of Filing Committee or Candidate) Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Com	mittee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C o	on Schedule I, Detaile	ed Summary Pa	age, Sectio	n 3.			\$	0.00

PART D 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					Reporting Period						
MARVIN L. WILLI	MARVIN L. WILLIAMS					<u>11/28/2</u>	<u>023</u> To	To: <u>12/31/2023</u>			
					DA	ATE		AMOUNT			
Full Name of Contr MARVIN L. WILLIA					мо	DAY	YEAR				
Mailing 349 WEST DUVAL ST Address						_		\$ 1,500.00			
City PHILA		State PA	Zip Code (Plus	: 4)	11	2	2023				
Employer Name	FIRST JUDICIAL DIST			Occupation MC JUDGE							
Employer Mailing A Business	ddress/Principal Place	e of	City			State		Zip Code (Plus 4)			
Enter Grand Tota	al of Part C on Scheo	dule I, Detailed Su	immary Page,	Sectio	on 3.		4	PAGE TOTAL 5 1,500.00			

PART E **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 Perio	od				
Fror					rom: To:				
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$		0.00
City	State	Zip Code (Plus 4)						
Receipt Description	•								
Enter Grand Total of Part E on Schedu	ule T. Detailed Summ	nary Page	Section	4				PAGE TO	ſAL
		iiai y i uge,	Section				\$		0.00

SCHEDULE II IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS

E THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THING DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Perio	d	
MARVIN L. WILLIAMS	From:	<u>11/28/2023</u> то:	<u>12/31/2023</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	ſF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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 Candidate				Reporting Period						
	From:			То:						
				DATE		АМО	UNT			
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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL			
					4	6	0.00			

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate					Reporting Period					
					Fro	From: To:				
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor						Occupat	tion			
Employer Mailing Address/Principal Place of City State Business					Zip Code(Plus 4) Description			ption of	Contribution	

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed	PAGE TOTAL
Summary Page, Section 3.	0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate					Reporting Period						
MARVIN L. WILLIAMS	From	<u>11/28</u>	То:	<u>12/31/2023</u>								
		AMOUNT										
To Whom Paid PHILA DEMOCRATIC CITY CMTE	мо	DAY	YEAR									
Mailing Address 219 SPRING GARDE	N ST		11	2	2023	\$	1,500.00					
City PHILA	State PA	Zip Code (Plus 4) 19123	· ·	otion of Exp SSMENT	penditure	1						
							PAGE TOTAL					
Enter Grand Total of Expenditures of	on Page 1, Report C	over Page, Item I).			\$	1,500.00					

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