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	20230	C0166				port ed B		CANI	DIE	DATE	√	CO	MMITTEE		LOBI	BYIST		
Name of Filing C	ommitte	e, Candida	ate or Lo	obbyist:		DAI	NIEL	D. M	CCAFFE	RY	<u> </u>								
Street Address:																			
City:									State:					Zip Code: 19114					
TYPE OF REPORT	6TH TUES		1.	2ND FRIDA' PRIMARY	Y PRE	-	2.	30 DA		P	OST-	3.		AMENDME REPORT?	NT	Yes	No	\	
(place X to the right of	6TH TUES		4.	2ND FRIDA' ELECTION	y pri	E -	5.	30 DA	DAY POST- 6. ECTION					TERMINAT REPORT?	ΓΙΟΝ	Yes	√ No		
report type)	ANNUAL	. REPORT	7. X	Year 2023					IG MET CHECK					PAPER / D			DISKE	TTE	
Name of Office S	ought by	/ Candidat	:e:	-					DATE	OF	F ELEC	СТІС)N	District Number	ty Code	County Code			
7110TT05 05 TU	- CURR		_						МО		DAY	ΥI	EAR	-1	SPM	DEN	1		
JUSTICE OF TH	E SUPRE	ME COUR	.1						1	1		7	2023		(SEE INS	TRUCTI	ONS FOR C	CODES)	
Summary of		s and	МО	DAY	YEAR	2			МО		DAY	Y	EAR	FOF	OFFIC	E USE	ONLY		
Expenditures	from:			11 28	2	023	T	0	1	12	3	31	2023						
A. Amount Bro	ught For	ward Fron	ı Last R	eport				\$	_				0.00						
B. Total Monet	ary Conti	ributions A	Ind Rec	eipts (From	Sche	dule	e I)	\$				1,:	109.38						
C. Total Funds	Available	e (Sum Of	Lines A	and B)				\$				1,:	109.38						
D. Total Expend	ditures (From Sche	dule II	I)				\$				1,1	109.38						
E. Ending Cash	Balance	(Subtract	Line D	From Line (C)			\$					0.00						
F. Value Of In-	Kind Con	tributions	Receive	ed (From S	chedu	le I	I)	\$					0.00						
G. Unpaid Debt	s And Ob	oligations	(From S	Schedule IV)			\$					0.00						
					AFF	ID	AVI	T SE	CTIO	V									
PART I - If this is	s a Comm	nittee repo	ort, trea	surer sign l	here.	If th	nis is	a Car	ndidate	re	port, c	andi	date sig	jn here.					
I swear (or affirm) correct and comple		report, incl	uding the	attached scl	nedule	s file	ed on	paper	or by ele	ctr	onic me	edium	, are to t	the best of	my knov	vledge	and belie	ef , true	
Sworn to and subs	cribed bef day of	ore me this		20						-		5	Signature	of Person	Submitt	ing Rep	ort		
	_	Signatur						<u>-</u>		-				Printe	ed Name				
My Commission Ex	cpires									-				Email					
		мо	D/	AY	YR						Are	ea Coo	le	Daytime	Teleph	one Nu	mber		
Part II- If this is	a report	t of a cand	idate's	authorized	Comn	nitte	ee, C	andid	ate sha	II s	ign he	ere.							
I swear (or affirm) No 320) as amende		ne best of m	y knowle	edge and beli	ef this	poli	itical	comm	ittee has	s no	t violat	ted ar	y provis	ions of the	act of Ju	ıne 3,1	937 (P.L.	. 1333,	
Sworn to and subsc		ore me this											s	ignature of	Candida	ite			
	day of —							-						Printed	Name				
		Signature						-		_									
My Commission Exp	ires													Email					
	_	МО	D	AY	YR	ł		-			Area	Code		Day	time Te	elephon	e Numbe	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
DANIEL D. MCCAFFERY	From:	11/28/202	<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)			\$	1,109.38
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting) Period	(3)	\$	1,109.38
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			\$	1,109.38

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	Name of Filing Committee or Candidate				Reporting Period						
			Fre	om:		То	:				
		<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 Filing Committee of Canadate			Reporting Period From: To:					
			Fro	m:		10):	
					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 P	Period		
DANIEL D. MCCAFFERY	From:	11/28/2023	То:	12/31/2023

DATE AMOUNT

Full Name of Contributing Committee MCCAFFERY FOR SUPREME COURT	МО	DAY	YEAR			
Mailing Address 1518 WALNUT STREET SUITE 702				_		\$ 1,109.38
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19102	12	7	2023	

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL1,109.38

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					
			Fron	n:		To	То:		
				D	ATE		ı	AMOUNT	
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus	s 4)						
Employer Name				Occupat	tion				
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Co	de (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			l	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	Candidate		Repor	ting Perio	od			
			From:			To:		
			•	D	ATE		AI	MOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	•	•		•		•	•	
Enter Grand Total of Part E o	on Schedule I. Detailed	d Summary Page	Section	4			PA	GE TOTAL
- Inc. Statia Total of Fall E	Jonedane 1, Betanet	. Jammar y r uge,	500.011				\$	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 Pe	eriod	
DANIEL D. MCCAFFERY	From:	<u>11/28/2023</u> To:	12/31/2023
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUT	OR	
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
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	Name of Filing Committee or Candidate Re			g Period					
	Fro				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 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 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 or Candidate	Reporting Period				
DANIEL D. MCCAFFERY	From	11/28/2023	То:	12/31/2023	

				DATE			AMOUNT	
To Whom Paid AMERICAN EXPRESS			МО	DAY	YEAR			
Mailing Address 200 VESEY STREET			12	6	2023	\$	1,109.38	
City NEW YORK	State NY	Zip Code (Plus 4) 10285	Description of Expenditure REIMBURSEMENT FOR TRAVEL AND PHONE					
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 1,109.38		