

Campaign Finance Report

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

Filer Identification Number :		20230100		Report Filed By :		CANDIDATE		COMMITTEE		✓		LOBBYIST	
Name of Filing Committee, Candidate or Lobbyist: BATTISTA FOR JUDGE													
Street Address: PO BOX 66													
City: RICHBORO						State: PA			Zip Code: 18954				
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	✓			
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	✓			
	ANNUAL REPORT	7.	Year 2024	FILING METHOD () CHECK ONE			PAPER	✓	DISKETTE				
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code	
						MO	DAY	YEAR	-1		REP	16	
						11	5	2024	(SEE INSTRUCTIONS FOR CODES)				
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY				
		1	1	2024		4	8	2024					
A. Amount Brought Forward From Last Report						\$ 1,063.53							
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 1,000.00							
C. Total Funds Available (Sum Of Lines A and B)						\$ 2,063.53							
D. Total Expenditures (From Schedule III)						\$ 531.92							
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 1,531.61							
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 0.00							
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 4,383.00							

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
BATTISTA FOR JUDGE	From: <u>1/1/2024</u> To: <u>4/8/2024</u>

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)	\$ 1,000.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 1,000.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 1,000.00
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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
BATTISTA FOR JUDGE	From: <u>1/1/2024</u> To: <u>4/8/2024</u>

				DATE			AMOUNT	
Full Name of Contributing Committee					MO	DAY	YEAR	\$1,000.00
SGA PAC								
Mailing Address					2	20	2024	
518 S OXFORD VALLEY ROAD								
City	FAIRLESS HILLS		State	PA	Zip Code (Plus 4)	19030		

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

PAGE TOTAL
\$ 1,000.00

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
	From: To:

				DATE	AMOUNT	
Full Name of Contributor				MO	DAY	YEAR
Mailing Address						
City	State	Zip Code (Plus 4)				
Employer Name				Occupation		
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)	

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

PAGE TOTAL
\$ 0.00

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	Reporting Period
	From: To:

			DATE		AMOUNT	
Full Name			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Receipt Description						

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 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	
BATTISTA FOR JUDGE		From: <u>1/1/2024</u> To: <u>4/8/2024</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period (1)		\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period (2)		\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period (3)		\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)		\$	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: To:
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						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:		To:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
BATTISTA FOR JUDGE	From <u>1/1/2024</u> To: <u>4/8/2024</u>

DATE				AMOUNT		
To Whom Paid The Stoneridge Group LLC			MO	DAY	YEAR	\$ 19.95
Mailing Address 960 North Point Parkway, Suite 225			1	9	2024	
City Alpharetta	State GA	Zip Code (Plus 4) 30005	Description of Expenditure Website Hosting			
To Whom Paid The Stoneridge Group LLC			MO	DAY	YEAR	\$ 19.95
Mailing Address 960 North Point Parkway, Suite 225			2	9	2024	
City Alpharetta	State GA	Zip Code (Plus 4) 30005	Description of Expenditure Website Hosting			
To Whom Paid The Stoneridge Group LLC			MO	DAY	YEAR	\$ 19.95
Mailing Address 960 North Point Parkway, Suite 225			3	11	2024	
City Alpharetta	State GA	Zip Code (Plus 4) 30005	Description of Expenditure Website Hosting			
To Whom Paid USPS			MO	DAY	YEAR	\$ 64.00
Mailing Address 851 Bustleton Pike			2	16	2024	
City Richboro	State PA	Zip Code (Plus 4) 18954	Description of Expenditure PO Box Rental Fee			
To Whom Paid Chain Bridge Bank			MO	DAY	YEAR	\$ 25.00
Mailing Address 1445A Laughlin Ave			1	2	2024	
City McLean	State VA	Zip Code (Plus 4) 22101	Description of Expenditure Bank Fees			

To Whom Paid Pro Printing & Office, LLC			MO	DAY	YEAR	
Mailing Address 128 Siecker Road			4	8	2024	
City St. Marys	State PA	Zip Code (Plus 4) 15857	Description of Expenditure Thank You Cards & Envelope Printing			\$ 383.07
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 531.92

SCHEDULE IV
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 BATTISTA FOR JUDGE				Reporting Period From: <u>1/1/2024</u> To: <u>4/8/2024</u>			
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DATE				Outstanding Balance of Debt		
Name of Creditor Hey Andrea, LLC			MO	DAY	YEAR	\$ 900.00
Mailing Address 475 Buchanan Road			10	14	2023	
City Perkasio	State PA	Zip Code (Plus 4) 18944	Description of Debt Television Production			
DATE				Outstanding Balance of Debt		
Name of Creditor Maria C. Battista			MO	DAY	YEAR	\$ 3,083.00
Mailing Address 430 Community Road			12	31	2023	
City Emlenton	State PA	Zip Code (Plus 4) 16373	Description of Debt Reimbursable Campaign Expenses			
DATE				Outstanding Balance of Debt		
Name of Creditor Daddy's Main Street			MO	DAY	YEAR	\$ 400.00
Mailing Address 513 Main Street			12	15	2023	
City Clarion	State PA	Zip Code (Plus 4) 16214	Description of Debt Event Catering			
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.						PAGE TOTAL \$ 4,383.00