### **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	0100			Report		CANDI	DATE		соми	<b>ITTEE</b>	<b>√</b>	LOBI	BYIST		
Name of Filing C	Committee, Candid	ate or L	obbyist:	В	ATTIS	TA FO	R JUDGE									
Street Address:																
City:	LAMARTINE						State:	PA			Zip Cod	de: 16	375			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. <b>X</b>	2ND FRIDAY PR PRIMARY	E-	2.	30 DA		POST-	3.		AMENDM REPORT		Yes	No		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PF ELECTION	RE-	5.	30 DA		POST-	6.		TERMIN/ REPORT		Yes	No	•	<b>/</b>
report type)								PAPER	PAPER DISKETTE							
Name of Office S	- Sought by Candida	te:	-		-		DATE 0	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Coun	
							МО	DAY	YE	AR	-1	SPR	REF	<u> </u>	16	
JUDGE OF THE	SUPERIOR COUR	Т					11		7	2023		(SEE IN	STRUCTI	ONS FOR C	ODES)	
	Receipts and	МО	DAY YEA	R			МО	DAY	YE	AR	FC	R OFFI	CE USE	ONLY		
Expenditures	from:		1 1	202	23 <b>T</b>	0	3		27	2023						
A. Amount Bro	ught Forward Fro	n Last R	eport			\$	_			0.00						
B. Total Moneta	ary Contributions	And Rec	eipts (From Sch	ed	ule I)	\$			51,1	100.00						
C. Total Funds	Available (Sum O	f Lines A	and B)			\$			51,1	100.00						
D. Total Expend	ditures (From Sch	edule II	I)			\$			2,7	'50.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)			\$			48,3	50.00						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sched	ule	II)	\$				0.00						
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV)			\$				0.00						
			AF	FΙ	DAVI	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign here	. If	this is	a Car	ndidate re	eport, o	candio	date sig	jn here.					
I swear (or affirm) correct and comple	) that this report, inc ete.	luding the	attached schedul	es f	iled on	paper	or by elect	ronic m	edium	, are to t	the best o	f my knov	wledge	and belie	ef , tru	1e
Sworn to and subs	cribed before me this day of	5	20						s	ignature	of Perso	n Submit	ting Rep	ort		
	Signatu	re				- -					Prin	ted Name	•			_
My Commission Ex	cpires					_					Ema	il				
	МО	D	AY Y	R				Ar	ea Cod	le	Daytin	ie Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized Com	mi	ttee, C	andid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of red.	ny knowl	edge and belief th	is p	olitical	comm	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333	3,
Sworn to and subsc	ribed before me this							-		s	ignature (	of Candid	ate			-
	day of					-					Printe	ed Name				-
	Signature					-										_
My Commission Exp	ires										Ema	11				
	мо	D	AY Y	R		_		Area	Code		D	aytime T	elephor	e Numb	er	-

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
BATTISTA FOR JUDGE	From:	1/1/202	<u>3</u> To:	3/27/2023
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)			\$	100.00
TOTAL for the Reporting	Period	(2)	\$	100.00
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)			\$	51,000.00
TOTAL for the Reporting	Period	(3)	\$	51,000.00
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 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page			\$	51,100.00

#### **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 Candida	te		Reporting	Period			
			From:		То	:	
				DATE			AMOUNT
Full Name of Contributing Committee			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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

#### **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 Candidate

**Reporting Period** 

DATE

BATTISTA FOR JUDGE

From:

<u>1/1/2023</u> **To:** 

3/27/2023

**AMOUNT** 

	ame of Contributor e Chesler			МО	DAY	YEAR	
Mailin	g Address						\$ 100.00
City	Denver	State	Zip Code (Plus 4)	3	21	2023	
		NC	28037				

**PAGE TOTAL** 

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

100.00

#### **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 Cai	ndidate		Reporting	Period				
			From:			То:		
				DA	TE		Α	AMOUNT
Full Name of Contributing Comm	nittee			мо	DAY	YEAR		0.00
Mailing Address							<b>-</b>   \$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C o	n Schedule I, Detaile	d Summary 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				
BATTISTA FOR JUDGE				Fror	m:	<u>1/1/2</u>	023 1	Го:		<u>3/27/2023</u>
					D/	ATE			АМС	DUNT
Full Name of Contributor					мо	DAY	YEAF	,		1 000 00
Clara Ann Macko					140	DAI	I LA	`	\$	1,000.00
Mailing Address	T				3	21	202	3		
City Connellsville	State	Zi	p Code (Plus	34)						
	l <sub>PA</sub>	15	5425				l			
Employer Name Retired					Occupat	ion	Retire	d_		
Employer Mailing Address/Principal Plac	e of Business		City			State		Z	Zip Code	(Plus 4)
			Connellsv	ille		PA		1	15425	
Full Name of Contributor					мо	DAY	YEAF	,		F0 000 00
Martin E Judge, Jr.					140	DAI	i LA	`	\$	50,000.00
Mailing Address					3	8	202	3		
City Avalon	State	Zi	p Code (Plus	4)						
	l <sub>NJ</sub>	08	3202				l			
Employer Name The Judge Group					Occupat	ion	Found	er 8	& Chairm	an
Employer Mailing Address/Principal Plac	e of Business		City			State		Z	Zip Code	(Plus 4)
			Wayne			PA		1	19087	
Enton Crond Total of Doub Com Colo	dula I. Datailed C		nomi Doco	Coat!	am 2		ſ		PAG	SE TOTAL
Enter Grand Total of Part C on Sche	dule 1, Detalled Si	umn	nary Page,	Section	on 3.			\$		51,000.00

## 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		Report	ing Peri	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (	Plus 4)					
Receipt Description	•	•			•			
Forten Commit Tatal of Boot	F an Cabadala I Batallad	I C B	C					PAGE TOTAL
Enter Grand Total of Part	e on Schedule I, Detalled	summary Page,	Section	4.			\$	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	d	
BATTISTA FOR JUDGE	From:	<u>1/1/2023</u> <b>To:</b>	3/27/2023
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER 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 Ca	ndidate		Reporting Period					
			From:			To:		
				DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address						<b> </b>	0.00	
City	State	Zip Code (Plus 4)						
Description of Contribution:	•		•	•				
				_	Г			
Enter Grand Total of Part F of Section 2.	n Schedule II, In-Ki	nd Contributions Detai	led Sum	nmary Pa	ge,		PAGE TOTAL	
						\$	0.00	

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

### STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting	Period			
BATTISTA FOR JUDGE	From	1/1/2023	То:	3/27/2023	

				DATE			AMOUNT	
To Whom Paid			МО	DAY	YEAR			
AxCapital, LLC			1-10					
Mailing Address			3	21	2023	\$	500.00	
City Kansas City	State	Zip Code (Plus 4)	Description of Expenditure					
	МО	64112	Complia	nce Consu	ılting			
To Whom Paid Clebak Consulting LLC			мо	DAY	YEAR			
Mailing Address				21	2023	\$	1,500.00	
<b>City</b> Hershey	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	18954	General	Consulting	g			
To Whom Paid			МО	DAY	YEAR			
The Stoneridge Group LLC			МО	DAI	ILAK			
Mailing Address			3	13	2023	\$	750.00	
<b>City</b> Alpharetta	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	GA	30005	Website	<u> </u>				
							PAGE TOTAL	
Enter Grand Total of Expen	ditures on Page 1, Re	port Cover Page, Item D	).			\$	2,750.00	