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 8	3000	21				port ed B		CA	NDII	DATE		СОМ	1ITTEE	✓ [LOB	BYIST		
Name of Filing C	ommittee, Car	ndida	te or Lo	bbyist:		JUD	ICI/	AL ME	RIT S	ELE	CTION	COM	1 OF AL	L CO					
Street Address:	400 KOPP	PERS I	BLDG 4	36 7TH	AVE														
City:	PITTSBUR	GH							State	e:	PA			Zip Cod	le: 15	219-1	.811		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1	1.	2ND FRI PRIMAR	DAY PRE	-	2.	30 DA		Р	OST-	3.		AMENDMENT REPORT?		Yes	N	0	/
(place X to the right of	6TH TUESDAY PRE-ELECTION		1.	2ND FRI ELECTIO	DAY PRI	E-	5.	30 DA		Р	OST-	6.		TERMINA REPORT?	Yes	N	0	√	
report type)	ANNUAL REPO	ORT	7. X	Year 20	00				NG ME					PAPER		\	DISK	ETTE	
Name of Office S	ought by Cand	didate	e:						DAT	E O	F ELE	СТІО	N	District Number	Office Code	Pai	rty Cod	e Cour	
									МО		DAY	YE	AR		•				
										11		7	2000		(SEE IN	STRUCTI	ONS FOR	CODES	5)
Summary of		d	МО	DAY	YEAF	₹			МО		DAY	YI	AR	FO	R OFFIC	E USE	ONLY	,	
Expenditures	penditures from: 1 1 1 TO 12 31 2000									2000									
A. Amount Bro	ught Forward	From	Last Re	eport				\$				22,7	711.05						
B. Total Moneta	B. Total Monetary Contributions And Receipts (From Schedule I) \$									0.00									
C. Total Funds Available (Sum Of Lines A and B) \$ 22,711.									711.05										
D. Total Expend	ditures (From	Sched	dule III	()				\$				17,3	889.78						
E. Ending Cash	Balance (Sub	tract	Line D	From Liı	ne C)			\$				5,3	21.27						
F. Value Of In-	Kind Contribut	tions	Receive	ed (Fron	n Schedu	ile II	()	\$					0.00						
G. Unpaid Debt	s And Obligati	ions (From S	chedule	IV)			\$					0.00						
					AFF	FIDA	۱۷۶	T SE	CTIO	NC									
PART I - If this is		-	-																
I swear (or affirm) correct and comple		, inclu	aing the	attached	scneaule	s file	a on	paper	or by e	electr	ronic m	eaium	, are to t	ne best o	r my knov	vieage	and be	lief , tr	ue
Sworn to and subs	cribed before me day of	e this		20						•		S	ignature	of Perso	n Submitt	ing Re	port		_
	Sig	nature	.	_				- -						Prin	ted Name	ı			-
My Commission Ex	pires							_						Emai	I				
	МО		DA	Υ	YR						Are	ea Cod	le	Daytim	e Teleph	one Nu	mber		$\underline{}$
Part II- If this is	a report of a	candi	date's a	authoriz	ed Comr	nitte	e, C	andid	ate si	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende		t of my	/ knowle	dge and l	belief this	s polit	tical	comm	ittee h	as no	ot viola	ted an	y provis	ions of the	e act of Ju	ıne 3,1	937 (P	L. 133	3,
Sworn to and subsc	ribed before me day of	this		20									s	ignature o	f Candida	ite			_
	— ——			- <u>-</u>				-						Printe	d Name				-
	Signat	ure						-											_
My Commission Exp	ires													Emai	il				
	мо)	DA	ΛΥ	YF	₹		-			Area	Code		Da	ytime To	elephoi	ne Num	ber	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period		
JUDICIAL MERIT SELECTION COM OF ALL CO	From:	To:	12/31/2000
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			
TOTAL for the Reportin	g 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 Reportin	g 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 Reportin	g Period (3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)			
TOTAL for the Reportin	g Period (4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add a totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page 1		\$	0.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize on with an aggregate val							
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			Fr	om:		То	:	
					DATE			AMOUNT
Full Name of Contribution	ng Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
	•					-	Г	PAGE 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 Candidate				Reporting Period From: To:				
					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	Period				
			From:			То:		
				DA	TE		A	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 Scheo	dule I, Detailed Sum	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:		To) :	
				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	5 4)					
Employer Name				Occupa	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.			PA \$	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 Co	andidate		Report	ting Perio	bd			
			From:			То:		
				D	ATE		AM	10UNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	•						
Enter Grand Total of Part E or	Schedule T. Detailer	d Summary Page	Section	4			PA	GE TOTAL
Lines Grana Fotal of Fair 2 of	r benedule 1/ betanet	z Sammary r age,	Section	•			\$	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		
JUDICIAL MERIT SELECTION COM OF ALL CO	From:	To:	12/31/2000
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,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candid	ate		Reportin	g Period			
			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 S	chedule II, In-Kir	nd Contributions Deta	iled Sun	nmary Pag	ge,		PAGE TOTAL
Section 2.						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidat	e				Re	porting P	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	•		•			Occupa	tion			
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, i	In-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	indidate		Reporti	ng Period			
JUDICIAL MERIT SELECTION C	OM OF ALL CO		From			То:	12/31/2000
				DATE			AMOUNT
To Whom Paid ALLEGHENY COUNTY BAR ASSO	OCIATION PAC		мо	DAY	YEAR		
Mailing Address 400 KOPPER	RS BUILDING		1	21	2000	\$	4,100.00
City PITTSBURGH	State PA	Zip Code (Plus 4) 15219		otion of Exp IBUTION	penditure	1	
To Whom Paid PITTSBURGH SENIOR NEWS			МО	DAY	YEAR		
Mailing Address 3345 EVERO	GREEN ROAD		1	21	2000	\$	600.00
City PITTSBURGH	State PA	Zip Code (Plus 4) 15219	Descrip ADVER	otion of Exp	penditure		
To Whom Paid ACBA			мо	DAY	YEAR		
Mailing Address ACBA			1	24	2000	\$	12,573.78
City PITTSBURGH	State PA	Zip Code (Plus 4) 15237		otion of Exp GE FOR CO			NTION MAILING
To Whom Paid PAC SERVICES		·	МО	DAY	YEAR		
Mailing Address 33RD FLOO	R, GULF TOWER 707 G	RANT STREET	3	24	2000	\$	103.00
City PITTSBURGH	State PA	Zip Code (Plus 4) 15219	1	otion of Exp			
To Whom Paid PAC SERVICES	·		мо	DAY	YEAR		
Mailing Address 33RD FLOO	R, GULF TOWER 707 G	RANT STREET	5	31	2000	\$	13.00
City PITTSBURGH	State PA	Zip Code (Plus 4) 15219		L otion of Exp TING SER\		1	
			1				PAGE TOTAL
Enter Grand Total of Expend	itures on Page 1, Re	port Cover Page, Item D).			\$	17,389.78