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 8300	021			Report Filed E		CANDI	DATE		COM	MITTEE	✓	LOBE	BYIST		
Name of Filing (Committee, Candid	ate or Lo	obbyist:	Α	CBA J	JDICI	AL EXCE	LLENCE		IMITTE	E					
Street Address:	Street Address: 400 KOPPERS BLDG 436 7TH AVE															
City:	PITTSBURGH						State:	PA			Zip Code: 15219-1811					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.					AY I ARY	20ST- 3.		AMENDMENT REPORT?		Yes	Nc	 ✓ 		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.					AY I TION	POST-	6.		TERMINATION REPORT?		Yes	Nc	\checkmark	
report type)	ANNUAL REPORT	7.	Year 2011				NG METHO CHECK O				PAPER		\checkmark	DISKE	TTE	
Name of Office !	L Sought by Candida	te:					DATE O	F ELE	СТІО	N	District Number	Office Code	Par	ty Code	County	
							мо	DAY	YE	AR					10020	
							11		8	2011		(SEE INS	TRUCTIO	ONS FOR	CODES)	
	Receipts and	мо	DAY	YEAR			мо	DAY	YE	AR	FC	OR OFFIC	E USE	ONLY		
Expenditures	s from:		1 1	20	11 T	0	5		2	2011						
A. Amount Bro	ught Forward From	n Last Re	eport			\$			71,0	28.81						
B. Total Monet	ary Contributions	And Rece	eipts (Fron	n Sched	ule I)	\$	0.00									
C. Total Funds	Available (Sum Of	Lines A	and B)			\$			71,0	28.81						
D. Total Expen	ditures (From Sch	edule III	[)			\$			5,2	96.49						
E. Ending Cash	Balance (Subtrac	t Line D I	From Line	C)		\$			65,7	32.32	-					
F. Value Of In-	Kind Contributions	s Receive	ed (From S	chedule	e II)	\$				0.00						
G. Unpaid Deb	ts And Obligations	(From S	chedule I\	/)		\$	\$ 0.0			0.00						
				AFFI	DAVI	T SE	CTION									
PART I - If this i	s a Committee rep	ort, treas	surer sign	here. If	f this is	a Cai	ndidate re	eport, c	andid	late sig	gn here.					
I swear (or affirm correct and compl) that this report, incl ete.	luding the	attached sc	hedules	filed on	paper	or by elect	ronic me	edium,	are to t	the best o	f my knov	ledge	and beli	ef , true	
Sworn to and subs	scribed before me this day of	5	20						Si	ignature	e of Perso	n Submitt	ing Rep	ort		
	Signatu	re				_					Prin	ted Name				
My Commission E	xpires					_					Ema	il				
	мо	DA	Y	YR				Are	ea Cod	e	Daytin	ne Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's a	authorized	Commi	ittee, C	andid	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amend) that to the best of n ed.	ny knowle	dge and bei	ief this p	oolitical	comm	ittee has n	ot violat	ted any	y provis	ions of th	e act of Ju	ine 3,19	937 (P.L	1333,	
Sworn to and subso	cribed before me this day of		20							S	ignature (of Candida	te			
						-					Printe	ed Name				
My Commission Exp	Signature					-					Ema	il				
	мо		\Y	YR		-		Area	C - d -			aytime Te				

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** ACBA JUDICIAL EXCELLENCE COMMITTEE From: <u>1/1/2011</u> **To:** <u>5/2/2011</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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 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 \$ 0.00 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						
Fro						:					
					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.

\$

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		Rep	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 Candidate			Reporting Period						
			From:			То:			
				DA	TE		А	MOUNT	
Full Name of Contributing Committe	ee			мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
						ſ		PAGE TOTAL	
Enter Grand Total of Part C on S	chedule I, Detail	led 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	
	From:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor					DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupation				
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

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	Name of Filing Committee or Candidate			Reporting Period						
Fr						То:	:			
				D	ATE			AMOUNT	1	
Full Name				мо	DAY	YEAR	1			
Mailing Address							\$	5	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	TAL	
		illi 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

DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Perio	d	
ACBA JUDICIAL EXCELLENCE COMMITTEE	From:	<u>1/1/2011</u> To:	<u>5/2/2011</u>
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	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, 3		\$	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		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 Schedule II, In-Kind Contributions Detaile Section 2.			iled Sum	mary Pag	je,	PAGE	TOTAL
					4	6	0.00

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(P	Plus 4)						
Employer of Contributor					Occupation					
Employer Mailing Address/Principal Place of City State Business					Zip Code(Plus 4) Descript			ption of Contribution		
Enter Grand Total of Part G on Sch	edule II, 1	In-Kind	Contributio	ons De	taile	d				PAGE TOTAL

Summary Page, Section 3.

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period						
ACBA JUDICIAL EXCELLENCE COMMIT	TEE		From	<u>1/</u>	<u>1/2011</u>	То:	<u>5/2/2011</u>
				DATE			AMOUNT
To Whom Paid PITTSBURGH CITY PAPER			мо	DAY	YEAR		
Mailing Address 650 SMITHFIELD ST	4	27	2011	\$	1,065.75		
City PITTSBURGH	State	Zip Code (Plus 4)	Descrip	otion of Exp	Denditure		
	PA	15222	ADVER	TISEMENT			
To Whom Paid TRIB TOTAL MEDIA			мо	DAY	YEAR		
Mailing Address 622 CABIN HILL DR	IVE		4	28	2011	\$	4,230.74
City GREENSBURG	State	Zip Code (Plus 4)	Descrip	otion of Exp	penditure		
	PA	15601	ADVER	TISEMENT			
							PAGE TOTAL
Enter Grand Total of Expenditures	on Page 1, Report (Cover Page, Item I	D .			\$	5,296.49