

Commonwealth of Pennsylvania - Campaign Finance Report

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


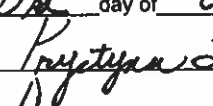
Filer Identification Number: 17760866		Report Filed By:	Candidate ¹ <input checked="" type="checkbox"/>	Committee ² <input type="checkbox"/>	Lobbyist ³ <input type="checkbox"/>			
Name of Filing Committee, Candidate or Lobbyist: Serianni for Judge								
Street Address: 1601 S Juniper St								
City: Philadelphia			State: PA	Zip Code: 19148				
Type of Report (Place x under report type)								
1- 6th Tuesday Pre-Primary	2- 2nd Friday Pre-Primary	3- 30 Day Post Primary	4- 6th Tuesday Pre-Election	5- 2nd Friday Pre-Election	6- 30 Day Post Election	7- Annual	Special 2nd Friday Pre-Election	Special 30 Day Post-Election
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date of Election (MM/DD/YYYY)		11/05/2019	Year	2019	Amendment Report	<input type="checkbox"/>	Termination Report	<input checked="" type="checkbox"/>

Summary of Receipts and Expenditures	From Date	To Date	FOR OFFICE USE ONLY
		06/11/2019	
A. Amount Brought Forward From Last Report		-\$271.60	<p style="writing-mode: vertical-rl; transform: rotate(180deg);"> COUNTY BO OF ELECTIONS 2019 SEP 11 P 12:19 CITY COMMISSIONERS </p>
B. Total Monetary Contributions and Receipts (From Schedule I)		\$739.40	
C. Total Funds Available (Sum of Lines A and B)		\$467.80	
D. Total Expenditures (From Schedule III)		\$467.80	
E. Ending Cash Balance (Subtract Line D from Line C)		\$0.00	
F. Value of In-Kind Contributions Received (From Schedule II)		\$0.00	
G. Unpaid Debts and Obligations (From Schedule IV)		\$0.00	

Affidavit Section


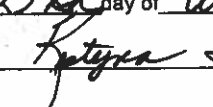
PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

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

Sworn to and subscribed before me this <u>22nd</u> day of <u>August</u> 20 <u>19</u>	
	Signature of Person Submitting Report
My commission expires _____	Printed Name <u>Justin J. Serianni</u>
Signature NOTARIAL SEAL Krystyna Longacre, Notary Public City of Philadelphia, Philadelphia County My Commission Expires Aug. 13, 2020 MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES	Area Code <u>215</u> Daytime Telephone Number <u>429 0026</u>

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 <u>23rd</u> day of <u>August</u> 20 <u>19</u>	
	Signature of Person Submitting Report
My commission expires _____	Printed Name <u>Nicole Senni</u>
Signature NOTARIAL SEAL Krystyna Longacre, Notary Public City of Philadelphia, Philadelphia County My Commission Expires Aug. 13, 2020 MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES	Area Code <u>215</u> Daytime Telephone Number <u>314 9007</u>

City of Philadelphia
Board of Ethics
Campaign Finance Filing Form
Sworn Statement Pursuant to Philadelphia Code § 20-1006(1)

To be filed with:
 campaign.finance@phila.gov
 Department of Records
 156 City Hall - Broad & Market Streets - Philadelphia, PA 19107 - 215-686-2262

IMPORTANT: Please enter the Committee and/or Candidate names exactly as they appear on submitted Campaign Finance Report or Statement.

Name of Committee
 Serianni for Judge

Name of Candidate (if applicable) Nicola Serianni	Office Sought by Candidate (if applicable) Judge of the Court of Common Pleas
--	--

State Filer ID No. (if applicable) 17760866	Date of Filing with Records / Board 07/29/2019
--	---

Filing Year: 2019


Type of Report - Check Only One

- | <u>PRIMARY ELECTION CYCLES</u> | <u>GENERAL ELECTION CYCLES</u> |
|---|---|
| <input type="checkbox"/> Cycle 1: Sixth Tuesday Pre-Primary
<input type="checkbox"/> Cycle 101: Fourth Tuesday Pre-Primary
<input type="checkbox"/> Cycle 2: Second Friday Pre-Primary
<input type="checkbox"/> Cycle 201: Last Tuesday Pre-Primary
<input type="checkbox"/> Cycle 10: 24-Hour Pre-Primary
<input type="checkbox"/> Cycle 3: 30-Day Post-Primary | <input checked="" type="checkbox"/> Cycle 4: Sixth Tuesday Pre-Election
<input type="checkbox"/> Cycle 401: Fourth Tuesday Pre-Election
<input type="checkbox"/> Cycle 5: Second Friday Pre-Election
<input type="checkbox"/> Cycle 501: Final Tuesday Pre-Election
<input type="checkbox"/> Cycle 11: 24-Hour Pre-Election
<input type="checkbox"/> Cycle 6: Thirty-Day Post-Election |
| <input type="checkbox"/> Cycle 7: Annual Report | <input type="checkbox"/> Campaign Finance Statement |

Amended Report (Yes / No)
 No

Termination Report (Yes / No)
 Yes

"I swear (or affirm) that the information contained in the electronic filing submitted together with this statement is true, correct and complete to the best of my knowledge and belief"


 Signature of individual filing report
 (If a report or statement filed by a candidate as an individual, the candidate should sign)


 Print Name


 Telephone Number and Email Address

Note:

Reports and statements filed by candidate committees and political committees: The individual who signs this form may, with the committee, be jointly and severally subject to civil penalties if the report or statement contains any material misstatements or omissions.

Reports and statements filed by candidates as individuals: A candidate may be subject to civil penalties if his or her report or statements contains any material misstatements or omissions.

Electronic filing with the Ethics Board DOES NOT satisfy your obligation to file with the City Commissioners or the Secretary of the Commonwealth.

SCHEDULE I
Contributions and Receipts
Detailed Summary Page

Filer Identification Number: 17760866

1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR

TOTAL for the Reporting Period	(1)	\$0.00
--------------------------------	-----	--------

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND 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 OVER \$250.00 (FROM PART C AND D)

Contributions Received from Political Committees (Part C)		\$0.00
All Other Contributions (Part D)		\$739.40
TOTAL for the Reporting Period	(3)	\$739.40

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 Page 1, Report Cover Page, Item B.)	\$739.40
--	----------

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)

Filer Identification Number: 17760866					
Full Name of Contributor Nicola Serianni			MO. DAY YEAR 6 19 2019		\$410.40
Mailing Address 1601 S Juniper St					
City Philadelphia		State PA	Zip Code (Plus 4) 19148-1012		
Employer Name Levin, Sedran, & Berman LLP			Occupation Attorney		
Employer Mailing Address/Principal Place of Business 510 Walnut St Ste 500 Philadelphia, PA 19106-3625					
Full Name of Contributor Nicola Serianni			MO. DAY YEAR 7 25 2019		\$329.00
Mailing Address 1601 S Juniper St					
City Philadelphia		State PA	Zip Code (Plus 4) 19148-1012		
Employer Name Levin, Sedran, & Berman LLP			Occupation Attorney		
Employer Mailing Address/Principal Place of Business 510 Walnut St Ste 500 Philadelphia, PA 19106-3625					

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

PAGE TOTAL \$739.40

In-Kind Contributions And Valuable Things ReceivedUSE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS
DURING THE REPORTING PERIOD

Detailed Summary Page

Filer Identification Number: 17760866	
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 RECEIVED-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. Report Cover Page, Item F.)	\$0.00

Statement of Expenditures

Filer Identification Number: 17760866							
To Whom Paid NGP VAN, Inc				MO	DAY	YEAR	\$195.00
				7	2	2019	
Mailing Address PO Box 392264							
City Pittsburgh			State PA	Zip Code (Plus 4) 15251-9264			
Description of Expenditure Software							
To Whom Paid PNC Bank				MO	DAY	YEAR	\$7.00
				6	11	2019	
Mailing Address 400 Market St							
City Philadelphia			State PA	Zip Code (Plus 4) 19106-2513			
Description of Expenditure Bank Fees							
To Whom Paid PNC Bank				MO	DAY	YEAR	\$7.00
				6	12	2019	
Mailing Address 400 Market St							
City Philadelphia			State PA	Zip Code (Plus 4) 19106-2513			
Description of Expenditure Bank Fees							
To Whom Paid PNC Bank				MO	DAY	YEAR	\$7.00
				6	13	2019	
Mailing Address 400 Market St							
City Philadelphia			State PA	Zip Code (Plus 4) 19106-2513			
Description of Expenditure Bank Fees							
To Whom Paid PNC Bank				MO	DAY	YEAR	\$7.00
				6	14	2019	
Mailing Address 400 Market St							
City Philadelphia			State PA	Zip Code (Plus 4) 19106-2513			
Description of Expenditure Bank Fees							
To Whom Paid PNC Bank				MO	DAY	YEAR	\$0.23
				6	17	2019	
Mailing Address 400 Market St							
City Philadelphia			State PA	Zip Code (Plus 4) 19106-2513			
Description of Expenditure Bank Fee							

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL

\$223.23

Statement of Expenditures

Filer Identification Number: 17760866							
To Whom Paid PNC Bank				MO	DAY	YEAR	\$0.37
				6	17	2019	
Mailing Address 400 Market St							
City Philadelphia		State PA	Zip Code (Plus 4) 19106-2513				
Description of Expenditure Bank Fees							
To Whom Paid PNC Bank				MO	DAY	YEAR	\$0.60
				6	17	2019	
Mailing Address 400 Market St							
City Philadelphia		State PA	Zip Code (Plus 4) 19106-2513				
Description of Expenditure Bank Fees							
To Whom Paid PNC Bank				MO	DAY	YEAR	\$21.00
				6	17	2019	
Mailing Address 400 Market St							
City Philadelphia		State PA	Zip Code (Plus 4) 19106-2513				
Description of Expenditure Bank Fees							
To Whom Paid PNC Bank				MO	DAY	YEAR	\$36.00
				6	18	2019	
Mailing Address 400 Market St							
City Philadelphia		State PA	Zip Code (Plus 4) 19106-2513				
Description of Expenditure Bank Fees							
To Whom Paid PNC Bank				MO	DAY	YEAR	\$0.60
				6	18	2019	
Mailing Address 400 Market St							
City Philadelphia		State PA	Zip Code (Plus 4) 19106-2513				
Description of Expenditure Bank Fee							
To Whom Paid PNC Bank				MO	DAY	YEAR	\$7.00
				6	18	2019	
Mailing Address 400 Market St							
City Philadelphia		State PA	Zip Code (Plus 4) 19106-2513				
Description of Expenditure Bank Fee							

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL

\$65.57

Statement of Expenditures

Filer Identification Number: 17760866						
To Whom Paid PNC Bank			MO	DAY	YEAR	\$45.00
			7	1	2019	
Mailing Address 400 Market St						
City Philadelphia		State PA	Zip Code (Plus 4) 19106-2513			
Description of Expenditure Bank Fee						
To Whom Paid PNC Bank			MO	DAY	YEAR	\$36.00
			7	3	2019	
Mailing Address 400 Market St						
City Philadelphia		State PA	Zip Code (Plus 4) 19106-2513			
Description of Expenditure Bank Fee						
To Whom Paid PNC Bank			MO	DAY	YEAR	\$7.00
			7	5	2019	
Mailing Address 400 Market St						
City Philadelphia		State PA	Zip Code (Plus 4) 19106-2513			
Description of Expenditure Bank Fee						
To Whom Paid PNC Bank			MO	DAY	YEAR	\$21.00
			7	8	2019	
Mailing Address 400 Market St						
City Philadelphia		State PA	Zip Code (Plus 4) 19106-2513			
Description of Expenditure Bank Fee						
To Whom Paid PNC Bank			MO	DAY	YEAR	\$7.00
			7	9	2019	
Mailing Address 400 Market St						
City Philadelphia		State PA	Zip Code (Plus 4) 19106-2513			
Description of Expenditure Bank Fee						
To Whom Paid PNC Bank			MO	DAY	YEAR	\$7.00
			7	10	2019	
Mailing Address 400 Market St						
City Philadelphia		State PA	Zip Code (Plus 4) 19106-2513			
Description of Expenditure Bank Fee						

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL

\$123.00

Statement of Expenditures

Filer Identification Number: 17760866								
To Whom Paid PNC Bank					MO	DAY	YEAR	\$7.00
					7	11	2019	
Mailing Address 400 Market St								
City Philadelphia		State PA	Zip Code (Plus 4) 19106-2513					
Description of Expenditure Bank Fee								
To Whom Paid PNC Bank					MO	DAY	YEAR	\$7.00
					7	12	2019	
Mailing Address 400 Market St								
City Philadelphia		State PA	Zip Code (Plus 4) 19106-2513					
Description of Expenditure Bank Fee								
To Whom Paid PNC Bank					MO	DAY	YEAR	\$21.00
					7	15	2019	
Mailing Address 400 Market St								
City Philadelphia		State PA	Zip Code (Plus 4) 19106-2513					
Description of Expenditure Bank Fee								
To Whom Paid PNC Bank					MO	DAY	YEAR	\$7.00
					7	16	2019	
Mailing Address 400 Market St								
City Philadelphia		State PA	Zip Code (Plus 4) 19106-2513					
Description of Expenditure Bank Fee								
To Whom Paid PNC Bank					MO	DAY	YEAR	\$7.00
					7	17	2019	
Mailing Address 400 Market St								
City Philadelphia		State PA	Zip Code (Plus 4) 19106-2513					
Description of Expenditure Bank Fee								
To Whom Paid PNC Bank					MO	DAY	YEAR	\$7.00
					7	18	2019	
Mailing Address 400 Market St								
City Philadelphia		State PA	Zip Code (Plus 4) 19106-2513					
Description of Expenditure Bank Fee								

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL

\$56.00