

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 :		20180481		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: Friends of Wendi Barish												
Street Address: PO Box 2380,2037 Chestnut Street												
City: Philadelphia						State: PA		Zip Code: 19103				
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7. X	Year 2018		FILING METHOD () CHECK ONE		PAPER		DISKETTE <input checked="" type="checkbox"/>			
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code
						MO	DAY	YEAR				
						11	6	2018				
									(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		11	27	2018		12	31	2018				
A. Amount Brought Forward From Last Report						\$		0.00				
B. Total Monetary Contributions And Receipts (From Schedule I)						\$		1,201.00				
C. Total Funds Available (Sum Of Lines A and B)						\$		1,201.00				
D. Total Expenditures (From Schedule III)						\$		86.43				
E. Ending Cash Balance (Subtract Line D From Line C)						\$		1,114.57				
F. Value Of In-Kind Contributions Received (From Schedule II)						\$		11,250.00				
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 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
Friends of Wendi Barish	From: <u>11/27/2018</u> To: <u>12/31/2018</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 81.00

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)	\$ 1,020.00
TOTAL for the Reporting Period (3)	\$ 1,020.00

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.)	\$ 1,201.00
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

PAGE TOTAL	
\$	0.00

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
Friends of Wendi Barish	From: <u>11/27/2018</u> To: <u>12/31/2018</u>

DATE				AMOUNT
Full Name of Contributor	MO	DAY	YEAR	\$ 100.00
Jilisa Snyder				
Mailing Address 1167 S Stream Rd				
City Bennington	State VT	Zip Code (Plus 4) 052018722	12 26 2018	

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

PAGE TOTAL
\$ 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 Candidate	Reporting Period	
	From:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
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 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 Friends of Wendi Barish	Reporting Period From: <u>11/27/2018</u> To: <u>12/31/2018</u>
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				DATE	AMOUNT			
Full Name of Contributor	MO	DAY	YEAR					
Wendi Barish Mailing Address 112 N 2nd St Apt 4A <table style="width: 100%;"> <tr> <td style="width: 33%;">City Philadelphia</td> <td style="width: 15%;">State PA</td> <td style="width: 52%;">Zip Code (Plus 4) 191061961</td> </tr> </table>	City Philadelphia	State PA	Zip Code (Plus 4) 191061961	11	9	2018	\$	20.00
City Philadelphia	State PA	Zip Code (Plus 4) 191061961						
Employer Name PHA				Occupation Attorney				
Employer Mailing Address/Principal Place of Business 2013 Ridge Ave		City Philadelphia		State PA	Zip Code (Plus 4) 191214113			

Full Name of Contributor	MO	DAY	YEAR					
Renee Snyder Mailing Address 153 Browns Pond Rd <table style="width: 100%;"> <tr> <td style="width: 33%;">City Staatsburg</td> <td style="width: 15%;">State NY</td> <td style="width: 52%;">Zip Code (Plus 4) 125805663</td> </tr> </table>	City Staatsburg	State NY	Zip Code (Plus 4) 125805663	12	26	2018	\$	1,000.00
City Staatsburg	State NY	Zip Code (Plus 4) 125805663						
Employer Name Self Employed				Occupation Musician				
Employer Mailing Address/Principal Place of Business 153 Browns Pond Rd		City Staatsburg		State NY	Zip Code (Plus 4) 125805663			

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

PAGE TOTAL
\$ 1,020.00

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:
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			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	
Friends of Wendi Barish		From: <u>11/27/2018</u> To: <u>12/31/2018</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 RECEIVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period		(3)	\$ 11,250.00
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.)			\$ 11,250.00

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:

			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
Friends of Wendi Barish	From: <u>11/27/2018</u> To: <u>12/31/2018</u>

				DATE		AMOUNT	
Full Name of Contributor Wendi Barish				MO	DAY	YEAR	\$ 5,000.00
Mailing Address 112 N 2nd St Apt 4A				10	10	2018	
City Philadelphia	State PA	Zip Code(Plus 4) 191061961					
Employer of Contributor PHA				Occupation Attorney			
Employer Mailing Address/Principal Place of Business 2013 Ridge Ave		City Philadelphia	State PA	Zip Code(Plus 4) 191214113		Description of Contribution Payment to Square Group Inc	

Full Name of Contributor Wendi Barish				MO	DAY	YEAR	\$ 5,000.00
Mailing Address 112 N 2nd St Apt 4A				12	14	2018	
City Philadelphia	State PA	Zip Code(Plus 4) 191061961					
Employer of Contributor PHA				Occupation Attorney			
Employer Mailing Address/Principal Place of Business 2013 Ridge Ave		City Philadelphia	State PA	Zip Code(Plus 4) 191214113		Description of Contribution Payment to Square Group Inc	

Full Name of Contributor Wendi Barish			MO	DAY	YEAR	\$ 1,250.00
Mailing Address 112 N 2nd St Apt 4A			12	19	2018	
City Philadelphia	State PA	Zip Code(Plus 4) 191061961				
Employer of Contributor PHA			Occupation Attorney			
Employer Mailing Address/Principal Place of Business 2013 Ridge Ave		City Philadelphia	State PA	Zip Code(Plus 4) 191214113		Description of Contribution Payment to Adam Bonin for Legal Services

**Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed
Summary Page, Section 3.**

PAGE TOTAL

11,250.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
Friends of Wendi Barish	From <u>11/27/2018</u> To: <u>12/31/2018</u>

DATE				AMOUNT
To Whom Paid Pay Pal	MO	DAY	YEAR	
Mailing Address 2211 N 1st St	12	31	2018	\$ 34.43
City San Jose	State CA	Zip Code (Plus 4) 951312021	Description of Expenditure Merchant Fees	
To Whom Paid Philly United	MO	DAY	YEAR	
Mailing Address 3200 Magee Ave	12	29	2018	\$ 50.00
City Philadelphia	State PA	Zip Code (Plus 4) 191492615	Description of Expenditure Ticket to NE Wards Holiday Party	
To Whom Paid TD BANK	MO	DAY	YEAR	
Mailing Address 1901 Market St	12	31	2018	\$ 2.00
City Philadelphia	State PA	Zip Code (Plus 4) 191031480	Description of Expenditure Account Fees	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.				PAGE TOTAL \$ 86.43

