### **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	2014	0432				eport led B		CAND	IDATE		СОМ	<b>4ITTEE</b>	✓	LOBE	YIST	
Name of Filing C	Committee,	Candida	ate or Lo	obbyist:		BE	TSY \	VAHL	FOR JUI	DGE				-			
Street Address:	424 SO	DLLY AV	Έ														
City:	PHILA								State:	PA			Zip Cod	<b>le:</b> 19	9111		
TYPE OF REPORT	6TH TUESDA PRE-PRIMAR		1.	2ND FRIDAY PRIMARY	/ PRE	-	2. <b>X</b>	30 DA PRIMA		POST-	3.		AMENDM REPORT?		Yes	No	<b>~</b>
(place X to the right of	6TH TUESDA PRE-ELECTION		4.	2ND FRIDAY ELECTION	/ PRE	-	5.	30 DA ELECT		POST-	6.		TERMINA REPORT?		Yes	No	<b>~</b>
report type)	ANNUAL RI	EPORT	7.	<b>Year</b> 2019					IG METH CHECK C				PAPER		<b>/</b>	DISKE	ГТЕ
Name of Office S	Sought by C	andidat	e:						DATE (	OF ELE	CTIC	N	District Number	Office Code	Pari	ty Code	County Code
	,								МО	DAY	YI	AR	Number	СРЈ	DEM	<b>!</b>	-
JUDGE OF THE	COURT OF	COMM	ON PLE	AS					11	L	5	2019		(SEE IN	ISTRUCTIO	NS FOR C	ODES)
Summary of Expenditures		and	МО	DAY	YEAR	ł			МО	DAY	ΥI	EAR	FO	R OFFI	CE USE	ONLY	
Expenditures				4 2	2	019	<b>T</b>	0	5	5	6	2019					
A. Amount Bro	ught Forwa	rd Fron	ı Last R	eport				\$			65,9	900.76					
B. Total Monet	ary Contribu	utions A	and Rec	eipts (From	Sche	dul	e I)	\$				0.00					
C. Total Funds	Available (S	Sum Of	Lines A	and B)				\$			65,9	900.76					
D. Total Expend	ditures (Fro	m Sche	dule II	[)				\$			9,2	259.28					
E. Ending Cash	Balance (S	ubtract	Line D	From Line C	<b>:</b> )			\$			56,6	41.48					
F. Value Of In-	Kind Contril	butions	Receive	ed (From Sc	hedu	le I	<b>I</b> )	\$				0.00					
G. Unpaid Debt	ts And Oblig	gations	(From S	Schedule IV	)			\$				0.00			•		
					AFF	ID	AVI	ΓSE	CTION								
PART I - If this is	s a Committ	tee repo	ort, trea	surer sign h	nere.	If th	his is	a Can	didate r	eport,	candi	date sig	ın here.				
I swear (or affirm) correct and comple		ort, incl	uding the	attached sch	edule	s file	ed on	paper o	or by elec	tronic m	edium	, are to t	he best o	f my kno	wledge a	and belie	f , true
Sworn to and subs	cribed before day of	e me this		20							S	ignature	of Perso	n Submit	ting Rep	ort	
		Signatur	'e	- ,				- -					Prin	ted Name	e		
My Commission Ex			_										Ema	il			
	мс	0	D/	λY	YR			•		Ar	ea Cod	le	Daytim	e Telepi	none Nui	nber	
Part II- If this is	a report of	f a cand	idate's	authorized	Comn	nitte	ee, C	andida	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amende		best of m	y knowle	edge and belie	ef this	pol	litical	commi	ittee has i	not viola	ted an	y provisi	ions of the	e act of J	une 3,19	37 (P.L.	1333,
Sworn to and subsc		me this										Si	ignature o	of Candid	ate		
	day of ——							-					Dulm*-	d Name			
	Sia	nature						-					Printe	d Name			
My Commission Exp	_	acui C											Ema	il			
		МО	D/	λΥ	YR	l		•		Area	Code		Da	aytime T	elephon	e Numbe	er

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

, -				
Name of Filing Committee or Candidate	Reporting	Period		
BETSY WAHL FOR JUDGE	From:	<u>4/2/201</u>	<u>9</u> То:	5/6/2019
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)			\$	0.00
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
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	0.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	his Part to itemize onl with an aggregate val	-			-			
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		1			DATE			AMOUNT
Full Name of Contribution	ng Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	)					
	•	•			•	•		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 or Candi	date		Re <sub>l</sub>	oorting P m:	eriod	To	o:	
					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 Candi	date		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed 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			
			Froi	m:		To	):	
				D	ATE		АМ	OUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plu	5 4)					
Employer Name				Occupat	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 S	Summary Page,	Section	on 3.			PA:	<b>GE TOTAL</b> 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	Candidate		Repor	ting Perio	od			
			From:			To:		
			•	D	ATE		AI	MOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	•	•		•		•	•	
Enter Grand Total of Part E o	on Schedule I. Detailed	d Summary Page	Section	4			PA	GE TOTAL
- Inc. Statia Total of Fall E	Jonedane 1, Betanet	. Jammar y r uge,	500.011				\$	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	I	
BETSY WAHL FOR JUDGE	From:	<u>4/2/2019</u> <b>To:</b>	<u>5/6/2019</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	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 Candidat	:e		Reporting	g Period			
			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate	•				Rep	orting P	eriod			
					Froi	m:		To:		
				•			DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(Plu	us 4)						
Employer of Contributor	•		•			Occupat	tion		•	
Employer Mailing Address/Principal Pla Business	ce of	City	S	State		Zip 4)	Code(Plus	Descri	ption o	f Contribution
Enter Grand Total of Part G on Sch	nedule II, I	In-Kind	Contribution	ns De	taile	d				PAGE TOTAL
Summary Page, Section 3.	•									0.00

### **SCHEDULE III STATEMENT OF EXPENDITURES**

Name of Filing Comm	nittee or Candidate			Reporti	ng Period			
BETSY WAHL FOR J	UDGE			From	<u>4/2</u>	2/2019	То:	5/6/2019
					DATE			AMOUNT
To Whom Paid 22ND WARD DEMOC	RATS			МО	DAY	YEAR		
Mailing Address 6	836 ANDERSON ST			4	15	2019	\$	150.00
City PHILA		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	19119	FUNDR				
<b>To Whom Paid</b> 27TH WARD DEMOC	RATS			МО	DAY	YEAR		
Mailing Address 4	301 LARCHWOOD /	AVE		5	3	2019	\$	100.00
City PHILA		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19104	<b>Descrip</b> FUNDR	otion of Exp	penditure		
To Whom Paid 38TH DEMOCRATIC	COMMITTEE		•	МО	DAY	YEAR		
Mailing Address 3	324 ALLEGHENY AV	/E		4	29	2019	\$	150.00
City PHILA		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19132	<b>Descrip</b> FUNDR	otion of Exp AISER	penditure		
<b>To Whom Paid</b> 50TH WARD DEMOC	RATS			МО	DAY	YEAR		
Mailing Address	O BOX 27454			4	20	2019	\$	150.00
City PHILA		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19118	<b>Descrip</b> FUNDR	tion of Exp	penditure		
<b>To Whom Paid</b> 5TH WARD DEMOCR	ATIC COMMITTEE			МО	DAY	YEAR		
Mailing Address 1	23 S. BROAD ST			4	10	2019	\$	150.00

Zip Code (Plus 4)

19109

**Description of Expenditure** 

**FUNDRAISER** 

City

PHILA

State

PΑ

							PAGE	
To Whom Paid 8TH WARD DEMO	OCRATS			МО	DAY	YEAR		
Mailing Address	2200 BEN FRANKLIN	I PARKWAY		4	16	2019	\$	250.00
City PHILA		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19130	<b>Descrip</b> FUNDR	otion of Exp	enditure		
To Whom Paid 9TH WARD DEMO	OCRATIC COMMITTEE			мо	DAY	YEAR		
Mailing Address	142 BETHELHAN PIK	Œ		4	12	2019	\$	150.00
City PHILA		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19118	<b>Descrip</b> FUNDR	otion of Exp	enditure		
To Whom Paid ANTON MOORE				МО	DAY	YEAR		
Mailing Address	2009 SNYDER AVE			4	15	2019	\$	1,000.00
City PHILA		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19145	<b>Descrip</b> CONSU	otion of Exp	enditure		
To Whom Paid ANTON MOORE				МО	DAY	YEAR		
	2009 SNYDER AVE			мо 4	<b>DAY</b> 19	<b>YEAR</b> 2019	\$	1,800.00
ANTON MOORE	2009 SNYDER AVE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19145	4	19 otion of Exp	2019		1,800.00
ANTON MOORE  Mailing Address				4 Descrip	19 otion of Exp	2019		1,800.00
ANTON MOORE  Mailing Address  City PHILA  To Whom Paid				4  Descrip CONSU	19 Otion of Exp LTING	2019 penditure		1,800.00
ANTON MOORE  Mailing Address  City PHILA  To Whom Paid BLUE STATE SOL	UTIONS			4  Descrip CONSU  MO	19 LTING  DAY  2 Dition of Exp	2019  Penditure  YEAR  2019	\$	
ANTON MOORE  Mailing Address  City PHILA  To Whom Paid BLUE STATE SOL  Mailing Address	UTIONS	PA State	19145  Zip Code (Plus 4)	4  Descrip CONSU  MO  4  Descrip	19 LTING  DAY  2 Dition of Exp	2019  Penditure  YEAR  2019	\$	
ANTON MOORE  Mailing Address  City PHILA  To Whom Paid BLUE STATE SOL  Mailing Address  City PHILA  To Whom Paid	UTIONS	PA  State PA	19145  Zip Code (Plus 4)	4  Description  MO  4  Description  CONSU	19  Intion of Exp  LTING  DAY  2  Stion of Exp  LTING	2019  Penditure  YEAR  2019  Penditure	\$	

							PAGE	13
To Whom Paid CREWS CONCULTING	G			мо	DAY	YEAR		
Mailing Address 100 S BROAD ST				4	12	2019	\$	2,250.00
City PHILA		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19110	<b>Descrip</b> CONSU	otion of Exp	penditure		
To Whom Paid FRIENDS OF THE 21ST WARD				МО	DAY	YEAR		
Mailing Address 539 GATES ST				4	27	2019	\$	100.00
City PHILA		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19128	Descrip	tion of Exp	penditure		
To Whom Paid FRIENDS OF THE 57TH WARD DEMOCRATS				МО	DAY	YEAR		
Mailing Address 9	217 ANDOVER ST			4	19	2019	\$	100.00
City PHILA		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19139	<b>Descrip</b> FUNDR	otion of Exp	penditure		
To Whom Paid INFORMATION REQUESTED				МО	DAY	YEAR		
Mailing Address	NFORMATION REQU	JESTED		5	4	2019	\$	150.00
City PHILA		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19120	Description of Expenditure FUNDRAISER				
To Whom Paid INFORMANTION REQUESTED				МО	DAY	YEAR		
Mailing Address XXXX				4	26	2019	\$	200.00
City PHILA		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19120	Description of Expenditure FUNDRAISER				
			<u> </u>	<u> </u>				
To Whom Paid INFORMANTION REQ	QUESTED			мо	DAY	YEAR		
INFORMANTION REQ	QUESTED			мо 4	<b>DAY</b> 22	<b>YEAR</b> 2019	\$	100.00

To Whom Paid JOHN SABINTINA	1,000.00 2.00 145.80			
City PHILA  State PA	2.00			
To Whom Paid PNC BANK  Mailing Address PO BOX 609  State PA 2ip Code (Plus 4) Description of Expenditure BANKING FEE  To Whom Paid STRASSHEIM GRAPHIC DESIGN  MO DAY YEAR  Zip Code (Plus 4) Description of Expenditure BANKING FEE  To Whom Paid STRASSHEIM GRAPHIC DESIGN  Mo DAY YEAR  Zip Code (Plus 4) Description of Expenditure BANKING FEE  To Whom Paid State PA 2 2019 \$  City PHILA State PA 2 2019 \$  To Whom Paid STRASSHEIM GRAPHICS DESIGN  MO DAY YEAR  To Whom Paid STRASSHEIM GRAPHICS DESIGN				
To Whom Paid PNC BANK  Mailing Address PO BOX 609  State PA				
PNC BANK  Mailing Address PO BOX 609  State PA State PA State PA STRASSHEIM GRAPHIC DESIGN  PA State PA PA PILLA  To Whom Paid STRASSHEIM GRAPHIC DESIGN  State PA PA PILLA  State PA PILLA  State PA PILLA  State PA PILLA  State PA PILLA  Description of Expenditure PRINTING  To Whom Paid STRASSHEIM GRAPHICS DESIGN				
City PITTSBURG  State PA  15230  Description of Expenditure BANKING FEE  To Whom Paid STRASSHEIM GRAPHIC DESIGN  Mo DAY  YEAR  City PHILA  State PA  2ip Code (Plus 4) 15230  Mo DAY  YEAR  City PHILA  State PA  19130  Description of Expenditure BANKING FEE  **  Mo DAY  YEAR  **  To Whom Paid PA  STRASSHEIM GRAPHICS DESIGN  Mo DAY  YEAR  A 2 2019  \$  To Whom Paid STRASSHEIM GRAPHICS DESIGN				
To Whom Paid STRASSHEIM GRAPHIC DESIGN  Mo DAY  VEAR  Mo DAY  VEAR  City PHILA  State PA  State PA  State PA  To Whom Paid STRASSHEIM GRAPHICS DESIGN  Mo DAY  VEAR  A  Description of Expenditure PRINTING  To Whom Paid STRASSHEIM GRAPHICS DESIGN  Mo DAY  VEAR  A  Description of Expenditure PRINTING	145.80			
To Whom Paid STRASSHEIM GRAPHIC DESIGN  Mo DAY YEAR  Mailing Address 1500 SPRING GARDEN ST SUITE 225  City PHILA  State PA 19130  To Whom Paid STRASSHEIM GRAPHICS DESIGN  Mo DAY YEAR  A 2 2019 \$  To Whom Paid STRASSHEIM GRAPHICS DESIGN	145.80			
STRASSHEIM GRAPHIC DESIGN  Mo DAY YEAR  Mailing Address 1500 SPRING GARDEN ST SUITE 225  City PHILA  State Zip Code (Plus 4) Description of Expenditure PRINTING  To Whom Paid STRASSHEIM GRAPHICS DESIGN  Mo DAY YEAR  Mo DAY YEAR	145.80			
City PHILA  State PA  2ip Code (Plus 4) 19130  Description of Expenditure PRINTING  To Whom Paid STRASSHEIM GRAPHICS DESIGN  Mo DAY  YEAR  Mailing Address  A 2010	145.80			
To Whom Paid STRASSHEIM GRAPHICS DESIGN  MO DAY YEAR  Mailing Address  A 2010				
To Whom Paid STRASSHEIM GRAPHICS DESIGN  MO DAY YEAR  Mailing Address  A 2010				
STRASSHEIM GRAPHICS DESIGN  Mo DAY YEAR  Mailing Address 1700 Control of the cont				
Mailing Address 1500 SPRING CARDEN ST 4 11 2019				
1500 SPRING GARDEN ST	411.48			
City PHILA State Zip Code (Plus 4) Description of Expenditure	Description of Expenditure			
PA 19130 PRINTING				
To Whom Paid TAMIAL DAVIS  MO DAY YEAR				
Mailing Address         826 S. VODGE ST         4         19         2019         \$	600.00			
City PHILA State Zip Code (Plus 4) Description of Expenditure				
PA 19130				
To Whom Paid THE THRISTY DICE  MO DAY YEAR				
Mailing Address 1642 FAIRMOUNT AVE 4 9 2019 \$	50.00			
City PHILA State Zip Code (Plus 4) Description of Expenditure				
PA 19130 FUNDRAISER				
PAG Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.	E TOTAL			
\$				