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 2	2014043	32				port ed B		CAND	CANDIDATE COMMITTEE V LOBBYIST								
Name of Filing C	ommittee, Ca	ndidate	or Lo	bbyist:		BE1	TSY \	WAHL	FOR JU	DGE								_
Street Address:	424 SOLL	Y AVE																
City:	PHILA								State:	PA			Zip Cod	ie: 19	9111			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.		2ND FRIDAY PRIMARY	/ PRE	1	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No	~	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.		2ND FRIDAY ELECTION	/ PRE	≣-	5. X	30 DA ELECT		POST-	6.		TERMINATION Yes NREPORT?				~	
report type)	ANNUAL REP	ORT 7.		Year 2021					IG METH CHECK (DISKE	ГТЕ		
Name of Office S	ought by Can	didate:							DATE	OF ELE	CTIC	N	District Number	Office Code	Par	ty Code	County Code	_
7110 OF OF THE									МО	DAY	ΥI	AR		СРЈ	DEM	1		_
JUDGE OF THE	COURT OF CO	OMMON	N PLEA	AS					1:	1	2	2021		(SEE IN	STRUCTIO	ONS FOR C	ODES)	_
Summary of		d M	10	DAY	YEAR	ł			МО	DAY	Y	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	from:			9 14	2	021	T	0	1	0	18	2021						
A. Amount Bro	ught Forward	From L	ast Re	eport				\$			17,0	580.96						
B. Total Moneta	ary Contributi	ons And	d Rece	eipts (From	Sche	dule	e I)	\$				0.00						
C. Total Funds	Available (Su	n Of Lir	nes A	and B)				\$			17,0	580.96						
D. Total Expend	ditures (From	Schedu	ıle III	1)				\$			2,3	346.78						
E. Ending Cash	Balance (Sub	tract Li	ne D	From Line C	:)			\$			15,3	34.18]					
F. Value Of In-	Kind Contribu	tions Re	eceive	ed (From Sc	hedu	le I	I)	\$				0.00						
G. Unpaid Debt	s And Obligat	ions (Fı	rom S	chedule IV)			\$				0.00						
					AFF	ID	AVI	T SE	CTION									I
PART I - If this is	a Committee	report,	, trea	surer sign h	ere.	If th	his is	a Can	ididate i	eport,	candi	date sig	ın here.					
I swear (or affirm) correct and comple	that this reportete.	, includi	ng the	attached sch	edule	s file	ed on	paper (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 m day of	e this		20							5	Signature	of Perso	n Submit	ting Rep	ort		
	Sig	nature						- -					Prin	ted Name	e			
My Commission Ex	rpires							_					Ema	il				
	МО		DA	·Υ	YR					Ar	ea Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a	candida	ate's a	authorized	Comn	nitte	ee, C	andida	ate shal	l sign h	ere.							1
	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 subsc		this										S	ignature o	of Candid	ate			l
	day of ———							-					Printe	d Name				l
	Signa	ture						-										
My Commission Exp	ires												Ema	il				
	мс)	DA	ΛΥ	YR	l		•		Area	Code		Da	aytime T	elephon	e Numbe	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

	1			
Name of Filing Committee or Candidate	Reporting	g Period		
BETSY WAHL FOR JUDGE	From:	9/14/202	<u>1</u> To:	10/18/2021
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	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 Reporting	J 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	J Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add ar 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

	this Part to itemize onl with an aggregate valu	-			-			
Name of Filing Comm	nittee or Candidate		Re					
		From:			То	:		
		L			DATE			AMOUNT
Full Name of Contribut	ing Committee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	•	•				-		DAGE 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			Rep	orting P	eriod			
			From:			To	ō:		
						DATE			AMOUNT
Full Name of Contributor					МО	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus 4)						
								$\overline{}$	

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		А	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 Scho	edule I, Detailed Sun	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	ame of Filing Committee or Candidate			Reporting Period						
				Fror	n:		To	o:		
					D	ATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
ailing Idress State Zin Code (Plus 4)								\$		0.00
City	State	Zi	p Code (Plus	4)						
Employer Name		•			Occupa	tion	•	•		
Employer Mailing Address/Principal Pla Business	ce of		City			State		Zip C	ode (Plus	4)
Enter Grand Total of Part C on Scho	edule I, Detail	led Sumr	mary Page,	Section	on 3.			\$	PAGE TO	TAL 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 Car	ndidate		Report	ing Perio	od			
			From:			To:		
				D	ATE		A	MOUNT
Full Name				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	·						
Enter Grand Total of Part E on	Schedule T. Detailed	d Summary Page	Section	4			P	AGE TOTAL
	2, 200 0000		22300				\$	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	
BETSY WAHL FOR JUDGE	From:	<u>9/14/2021</u> To:	<u>10/18/2021</u>
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, 1		\$	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						\$	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 Candidat	e				Re	porting F	Period				
					Fro	om:		To:	То:		
							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	taile	ed				PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or	Candidate		Reporti	ng Period				
BETSY WAHL FOR JUDGE			From	<u>9/14</u>	<u>4/2021</u>	То:	10/18/2021	
				DATE	AMOUNT			
To Whom Paid COMMITTEE FOR LABOR &ar	mp; SERVICES		мо	DAY	YEAR			
Mailing Address INFORMA	ATION REQUESTED		9	14	2021	\$	1,574.78	
City PHILA State Zip Code (Plus 4) PA 19102				Description of Expenditure GOTV				
To Whom Paid GALLO'S SEAFOOD			МО	DAY	YEAR			
Mailing Address 8101 RO	OSEVELT BLVD		9	14	2021	\$	272.00	
City PHILA	State PA	Zip Code (Plus 4) 19152	Description of Expenditure CAMPAIGN EXPENDITURE					
To Whom Paid PHILLY UNITED			мо	DAY	YEAR			
Mailing Address 3200 MA	GEE ST		10	7	2021	\$	500.00	
City PHILA State Zip Code (Plus 4) PA 19149				otion of Exp	penditure			
Enter Grand Total of Expe	enditures on Page 1, Re	port Cover Page, Item [).				PAGE TOTAL	
·	_ ,					\$	2,346.78	