#### **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	20180	481				Repo Filed		<i>'</i> :	CA	NDII	DATE		COMM	1ITTEE	<b>✓</b> [	LOBI	BYIST		
Name of Filing C	ommittee, Ca	andida	te or Lo	bbyis	t:	F	riend	ds o	f We	ndi E	Baris	h		<u> </u>						
Street Address:	615 Ches	stnut S	Street,F	PO Bo	x 402	24														
City:	Philadelp	hia								State	e:	PA			Zip Cod	le: 19	106			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		1.	2ND F PRIMA		/ PRE-	2.		30 DA PRIMA		Р	POST- 3.			AMENDMENT REPORT?		Yes	N	0	<b>√</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION		4.	ELECTION ELI					30 DA		Р	POST- 6.			TERMINATION REPORT?		Yes	<b>√</b> N	0	
report type)	ANNUAL REP	PORT	7. <b>X</b>	Year	2021					IG ME CHEC		_			PAPER		$\checkmark$	DISK	ETTE	
Name of Office S	ought by Can	ndidate	e:							DAT	E O	F ELE	CTIC	ON	District Number	Office Code	Par	ty Cod	Code	
JUDGE OF THE	COURT OF C	`OMMC	N DI FA	ΔS - D	ια ιτμο	JEI DH.	ТΔ			МО		DAY	Y	EAR	1	CPJP	DEN	1	51	
JODGE OF THE	COOK! OF C	2011110	71 <b>4</b> 1 LL7		IIILA	DEEI II.	1/1				11		2	2021		(SEE INS	TRUCTI	ONS FOR	CODES	5)
Summary of		nd	МО	DA	Y	YEAR				МО		DAY	Y	EAR	FO	R OFFIC	E USE	ONLY	,	
expenditures	penditures from: 11 23 2021 <b>TO</b> 12 31 2									2021										
A. Amount Bro	ught Forward	l From	Last R	eport					\$				29,	660.08						
B. Total Moneta	ary Contribut	ions A	nd Rec	eipts (	From	Sched	lule I	()	\$					0.00						
C. Total Funds	Available (Su	ım Of L	ines A	and B	3)				\$				29,	660.08						
D. Total Expend	ditures (From	1 Sched	dule III	[)					\$				29,	660.08						
E. Ending Cash	Balance (Sub	btract	Line D	From	Line C	<b>E)</b>			\$					0.00						
F. Value Of In-	Kind Contribu	utions	Receive	ed (Fr	om Sc	hedule	e II)		\$					0.00						
G. Unpaid Debt	s And Obliga	tions (	From S	chedu	ıle IV	)			\$					0.00		1				
						AFFI	DA۱	/IT	SE	CTIC	NC									
PART I - If this is	a Committee	e repo	rt, trea	surer	sign h	nere. If	f this	is a	a Car	ndidat	e re	port, o	candi	idate sig	ın here.					
I swear (or affirm) correct and comple		rt, inclu	ding the	attach	ed sch	edules	filed o	on pa	aper (	or by e	electr	onic m	ediun	ı, are to t	he best o	f my know	vledge	and be	lief , tr	ue
Sworn to and subs	cribed before m day of	ne this		20									:	Signature	of Perso	n Submitt	ing Rep	ort		
	Si	gnature	•					_							Prin	ted Name				
My Commission Ex	pires										•				Emai	il				
	МО		DA	λY		YR						Arc	ea Co	de	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a	candi	date's	autho	rized	Commi	ittee,	, Ca	ndid	ate sl	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende		st of my	/ knowle	dge an	d belie	ef this p	politic	al c	omm	ittee h	as no	ot viola	ted a	ny provis	ions of the	e act of Ju	ine 3,1	937 (P	L. 133	з,
Sworn to and subsc	ribed before me	e this		20										s	ignature o	of Candida	ite			_
				20 -											Printe	d Name				-
	Signa	ature						_												_
My Commission Exp	ires														Emai	II.				
	M	0	DA	ΑY		YR						Area	Code		Da	aytime Te	elephor	e Num	ber	_

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
Friends of Wendi Barish	From:	11/23/202	<u>1</u> To:	12/31/2021
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	(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

	this Part to itemize onl with an aggregate value		\$2		) in the			
		From:			То	:		
		<u> </u>			DATE			AMOUNT
Full Name of Contribut	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	)					
	<b>_</b>		!		<u> </u>			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 Candidat	e		Rep						
				From: To				):	
					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 Can	didate			Rep	orting Pe	riod			
				Froi	m:		То	:	
					D	ATE		AN	MOUNT
Full Name of Contributor					МО	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus	4)					
Employer Name	•	,			Occupa	tion	•	•	
Employer Mailing Address/Princi Business	pal Place of		City		•	State		Zip Code	e (Plus 4)
Enter Grand Total of Part C o	n Schedule I, Deta	iled Sumr	mary Page,	Section	on 3.			P	AGE TOTAL
								•	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 Ca	ndidate		Repor	ting Perio	od			
			From:			To:		
				D	ATE		А	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	l Summary Page	Section	4			P	AGE TOTAL
zinci. Grana rotal or rait z on	ocilculate 1, Detailet	z cammary r uge,	Section	-11			\$	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 Per	iod	
Friends of Wendi Barish	From:	<u>11/23/2021</u> <b>To:</b>	12/31/2021
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	R	
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	Reporting 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					Re	porting l	Period				
					Fro	From: To					
					•		DATE			AMOUNT	
Full Name of Contributor						МО	DAY	YEAR			
Mailing Address									\$ \$	0.00	
City	State		Zip Code(I	Plus 4)							
Employer of Contributor						Occupa	ition				
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descr	ption	of Contribution	
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, I	in-Kind	Contributi	ons De	etaile	ed				<b>PAGE TOTAL</b> 0.00	

### STATEMENT OF EXPENDITURES

Name of Filing Committee or Candi	idate		Reporti	ng Period				
Friends of Wendi Barish			From	11/23	3/2021	То:	12/31/2021	
			DATE AMOUNT					
<b>To Whom Paid</b> Wendi Barish			мо	DAY	YEAR			
Mailing Address 112 N 2nd St Apt 4A				2	2021	\$	29,639.18	
CityPhiladelphiaStateZip Code (Plus 4)PA191061961				Description of Expenditure  Loan Repayment				
<b>To Whom Paid</b> Paragon Payment Solutions			мо	DAY	YEAR			
Mailing Address 2141 E Broadw	ay Rd Ste 202		12	2	2021	\$	20.90	
City         Tempe         State         Zip Code (Plus 4)           AZ         852821895				Description of Expenditure Transaction Fee				
Enter Grand Total of Expenditu	res on Page 1, Re	eport Cover Page, Item [	).				PAGE TOTAL	

29,660.08