#### **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 202	00453				port ed B		CANDI	DATE		СОМ	<b>ITTEE</b>	<b>√</b>	LOBI	BYIST		
Name of Filing C	Committee, Candi	late or L	obbyist:	•	FRIE	END	S OF	TAMIKA '	WASHI	NGT	ON FOR	R JUDGE					
Street Address:	PO BOX 273	36															
City:	PHILADELPH:	ΪA						State:	PA			Zip Cod	le: 19	118-9	998		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	- 2	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.	30 DA ELECT		POST-	6.		TERMINA REPORT?		Yes	No		<b>/</b>
report type)	ANNUAL REPORT	7. <b>X</b>	<b>Year</b> 2021					IG METHO				PAPER		<b>\</b>	DISKE	TTE	
Name of Office S	Sought by Candida	rte:	•					DATE O	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Coun	
								МО	DAY	YE	AR	Ivamber	Touc	D/R		couc	
								11		2	2021		(SEE IN	STRUCTI	ONS FOR O	ODES)	1
	Receipts and	МО	DAY Y	/EAR				МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
Expenditures	s trom:		11 23	2	021	Т	0	12		31	2021						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$				78.00						
B. Total Monet	ary Contributions	And Rec	eipts (From S	Sche	dule	eI)	\$				0.00						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$				78.00						
D. Total Expen	ditures (From Sch	edule II	I)				\$				0.00						
E. Ending Cash	Balance (Subtra	t Line D	From Line C)	)			\$				78.00						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	nedu	le II	()	\$				0.00						
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV)				\$			1,2	50.00			•			
			,	AFF	IDA	٩VI	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign he	ere. 1	[f thi	is is	a Can	didate re	eport, c	candi	date sig	jn here.					
I swear (or affirm) correct and comple	) that this report, inc ete.	luding the	e attached sche	dules	filed	d on	paper o	or by elect	ronic m	edium	, are to t	the best o	f my knov	wledge	and belie	ef , tru	ıe.
Sworn to and subs	cribed before me th day of	S	20							S	ignature	of Perso	n Submit	ting Rep	ort		
	Signat	ıre					-					Prin	ted Name				-
My Commission Ex	cpires											Ema	il				_
	мо	D	AY	YR					Are	ea Cod	e	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized C	omn	iitte	e, C	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and belief	this	polit	tical	commi	ittee has n	ot viola	ted an	y provis	ions of the	e act of J	une 3,1	937 (P.L	. 1333	3,
Sworn to and subsc	ribed before me this										s	ignature o	of Candida	ate			-
	day of						_					Printe	d Name				-
	Signature						-										_
My Commission Exp	_											Ema	il				
	мо	D	AY	YR			•		Area	Code		Da	aytime T	elephon	e Numb	er	-

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF TAMIKA WASHINGTON FOR JUDGE	From:	11/23/202	2 <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	) 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
			1	
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

	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.

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 Filling Committee of Candidate			Reporting Period					
			Fro	m:		To	):	
					DATE		АМ	OUNT
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	ame of Filing Committee or Candidate		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				Reporting Period					
				Fro	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/Principal Business	Place of		City		•	State		Zip Code	e (Plus 4)
Enter Grand Total of Part C on S	chedule I, Deta	iled Sumr	mary Page,	Secti	on 3.			P	AGE TOTAL
								<b>\$</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		Report	ting Perio	bd			
			From:			To:		
				D	ATE		AMOUNT	
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. Detailer	d Summary Page	Section	4			PAGE TOTAL	
Enter Grand Total of Fait E	on senedare 1, Betanet	a Summary rage,	Section				\$ 0.0	0

#### **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	od	
FRIENDS OF TAMIKA WASHINGTON FOR JUDGE	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	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 Candid	ame of Filing Committee or Candidate			Reporting 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 S	chedule II, In-Kir	nd Contributions Deta	iled Sun	ımary Pa	ge,		PAGE TOTAL		
Section 2.						\$	0.00		

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate					Reporting	Period			
					From:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus	4)					
Employer of Contributor					Occupa	ation			
Employer Mailing Address/Principal Plad Business	ce of	City	Sta	ite	Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, I	n-Kind	Contributions	Deta	ailed				PAGE TOTAL
Summary Page, Section 3.									0.00

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or	ame of Filing Committee or Candidate			ng Period			
			From			То:	
				DATE			AMOUNT
To Whom Paid			мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)	Description of Expenditure				
							PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item I		).			<b>\$</b>	0.00	

## STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate			Reportir	ng Period					
FRIENDS OF TAMIKA WASHINGTON FO	R JUDGE		From:	<u>11</u>	./23/2021	То:		12/31/2021	
					DATE			Outstanding Balance of D	
Name of Creditor PRINCETON STRATGIES				мо	DAY	YEAR			
Mailing Address 2008 CHESTNUT S	Т			6	7	2021		<b>\$</b>	250.00
City PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plu</b> 19102	ıs 4)	Description of Debt COMPLIANCE CONSULTING F				EE	
	•								
					DATE			Outstanding Balance of D	
Name of Creditor MICHAEL TUCKER				МО	DATE	YEAR			
	IELD ST			<b>MO</b> 6		<b>YEAR</b> 2021	. 4	Balance of D	
MICHAEL TUCKER	IELD ST  State PA	Zip Code (Plu 19151	us 4)	6	DAY 7	2021	- 4	Balance of D	ebt
MICHAEL TUCKER  Mailing Address 1444 NORTH REDF	<b>State</b> PA	19151	•	6  Descrip  CONSU	DAY 7	2021		Balance of D	000.00