Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificat	ion	2014	0432		-	Repor		CANDI	DATE	СОМ	MITTEE	✓	LOB	BYIST		
Number :						Filed I	-	500.305								
Name of Filing (•		obbyist:		BEISY	WAHL	_ FOR JUE	GE							
Street Address:	424	SOLLY AV	/E					_			_					
City:	PHIL	A						State:	PA		Zip Co	Zip Code: 19111				
TYPE OF REPORT	6TH TUE	-	1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 D. PRIM		POST- 3		AMENDI REPORT		Yes	No	\checkmark	
(place X to the right of	6TH TUE		4.	2ND FRIDA ELECTION	y pre	≣- 5.	30 D. ELEC	AY F TION	POST- 6.		TERMINATION REPORT?		Yes	No	\checkmark	
report type)	ANNUAL	. REPORT	7. X	Year 2022				NG METHO CHECK O	-					DISKE	TTE	
Name of Office S	L Sought by	y Candidat	te:					DATE O	F ELEC	TION	District Number		Par	ty Code	County	
								мо	DAY	YEAR		CPJ	DEN	1		
JUDGE OF THE	COURT	OF COMM	ON PLE	AS				11	8	2022		(SEE INS	STRUCTI	ONS FOR	CODES)	
Summary of		s and	мо	DAY	YEAR	Ł		мо	DAY	YEAR	FC	OR OFFIC	E USE	ONLY		
Expenditures	s from:		1	11 29	2	022 1	0	12	31	. 2022						
A. Amount Bro	ught For	ward Fron	n Last R	eport			\$	5		0.00						
B. Total Monet	ary Conti	ributions A	And Rec	eipts (From	n Sche	dule I)	\$	5	0.00							
C. Total Funds	Available	e (Sum Of	Lines A	and B)			\$	5		0.00						
D. Total Expen	ditures (From Sche	edule II	I)			\$	5		0.00						
E. Ending Cash	Balance	(Subtract	Line D	From Line	C)		\$	5		2,921.56						
F. Value Of In-	Kind Con	tributions	Receive	ed (From S	chedu	le II)	\$	5	0.00							
G. Unpaid Deb	ts And Ol	oligations	(From S	Schedule IV	')		\$	5		0.00						
					AFF	IDAVI	T SE	CTION								
PART I - If this i																
I swear (or affirm correct and compl		report, incl	uding the	e attached sc	hedule	s filed on	paper	or by elect	ronic med	ium, are to	the best o	of my knov	vledge	and beli	ef , true	
Sworn to and subs	scribed bef day of	ore me this		20						Signatur	e of Perso	on Submitt	ing Rep	oort		
	_	Signatur	re				_				Prir	nted Name				
My Commission E	xpires	Signatur									Ema	ail				
		мо	DA	AY	YR		_		Area	Code	Daytin	ne Teleph	one Nu	mber		
Part II- If this is	a report	t of a cand	lidate's	authorized	Comn	nittee, C	Candid	late shall	sign her	e.						
I swear (or affirm) No 320) as amend		ne best of m	ny knowle	edge and beli	ef this	political	comn	nittee has n	ot violate	d any provis	ions of th	ne act of Ju	ine 3,1	937 (P.L	1333,	
Sworn to and subso		ore me this								S	ignature	of Candida	ite			
	day of						_				Printe	ed Name				
. <u> </u>		Signature					_									
My Commission Exp	oires										Ema	311				
	-	мо	D/	AY	YR	1	-		Area Co	ode	D	aytime Te	elephor	e Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** BETSY WAHL FOR JUDGE From: <u>11/29/2022</u> **To:** 12/31/2022 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 0.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committ	Reporting Period						
·······							
			From:		То	:	
		·		DATE			AMOUNT
Full Name of Contributing	J Committee		мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
						Г	PAGE TOTAL
Enter Grand Total of Pa	art A on Schedule I, Detail	ed Summary Page, Sec	tion 2.			\$	0.00

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

\$

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 Candidat	e			orting P	eriod				
			Fro	m:		Тс):		
					DATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4)							
								PAGE TOTAL	
Enter Grand Total of Part A on S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	2.		\$	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 Can	Name of Filing Committee or Candidate				Reporting Period					
			From:			То:				
				DA	TE		А	MOUNT		
Full Name of Contributing Comm	ittee			мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Cod	e (Plus 4)							
						Γ		PAGE TOTAL		
Enter Grand Total of Part C or	n Schedule I, Detaile	ed Summary Pa	age, Sectio	n 3.			\$	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	Reporting Period	
	From:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

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 C	andidate		Reporting Period						
	From: To				:				
			I	D	ATE			AMOUNT	1
Full Name				мо	DAY	YEAR			
Mailing Address							\$;	0.00
City	State	Zip Code (Plus 4)						
Receipt Description	I			1	1	1			
Enter Grand Total of Part E o	n Schodulo I. Dotailog		Section	4				PAGE TO	TAL
	Schedule 1, Detailed	i Summaly Paye,	Section	4.			\$		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 REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THIN

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Perio	d	
BETSY WAHL FOR JUDGE	From:	<u>11/29/2022</u> то:	<u>12/31/2022</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	ΓF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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 Candidate				Reporting Period				
	From:			То:				
				DATE		АМО	UNT	
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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL	
					4	6	0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate					Reporting Period					
					From: To:					
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor			1			Occupa	tion	1	1	
Employer Mailing Address/Principal P Business	lace of	City		State		Zip 4)	Code(Plus	Descri	ption of	Contribution
Enter Grand Total of Part G on S Summary Page, Section 3.	chedule II,	, In-Kind	Contributi	ions De	etaile	ed				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate					Reporting Period				
	From			То:						
	DATE				AMOUNT					
To Whom Paid	мо	DAY	YEAR							
Mailing Address						\$	0.00			
City	State	Zip Code (Plus 4)	Descri	otion of Ex	penditure					
Enter Grand Total of Expenditures	an Page 1. Benert C	over Dage Item [PAGE TOTAL			
	on Page 1, Report C	over Page, Item L				\$	0.00			

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