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 2023	30111				port ed B		CANDI	DATE		СОМ	ITTEE	✓	LOBE	SYIST	
Name of Filing C	ommittee, Candid	ate or L	obbyist:	•	FRII	END	S OF I	BARBAR	OHT A	1SON	FOR J	UDGE				
Street Address:	8002 WINSTO	ON ROAI	D,STE 300													
City:	PHILADELPHI	Α						State:	PA			Zip Cod	le: 19	9118		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	-	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. X		TERMINA REPORT		Yes	No	~
report type)	ANNUAL REPORT	7.	Year 2023					IG METH				PAPER		\	DISKE	ГТЕ
Name of Office S	ought by Candida	te:	-					DATE 0	F ELE	СТІО	N	District Number	Office Code	Par	ty Code	County Code
								МО	DAY	YE	AR			DEM	<u>_</u>	
								11		7	2023		(SEE IN	STRUCTIO	ONS FOR C	ODES)
•	Receipts and	МО	DAY	/EAR	1			МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY	
Expenditures	rrom:		10 24	20	023	Т	0	11	2	27	2023					
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			1	80.87					
B. Total Moneta	ary Contributions	And Rec	eipts (From S	Sche	dule	e I)	\$			4,1	50.00					
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			4,3	30.87					
D. Total Expend	ditures (From Sch	edule II	I)				\$			2,5	00.00					
E. Ending Cash	Balance (Subtrac	t Line D	From Line C))			\$			1,8	30.87					
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	nedul	le II	I)	\$				0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$			89,9	00.00			1		
				AFF	ΊD	AVI	T SE	CTION								
PART I - If this is	s a Committee rep	ort, trea	surer sign he	ere. 1	[f th	nis is	a Can	didate r	eport, c	andi	date sig	jn here.				
I swear (or affirm) correct and comple	that this report, inc ete.	luding the	attached sche	dules	file	d on	paper (or by elect	ronic m	edium	, are to t	the best o	f my kno	wledge a	and belie	f , true
Sworn to and subs	cribed before me thi day of	S	20							s	ignature	of Perso	n Submit	ting Rep	ort	
	Signatu	ıre					- -					Prin	ted Name	e		
My Commission Ex	pires											Ema	il			
	мо	D	AY	YR					Are	ea Cod	e	Daytim	e Telepi	none Nu	mber	
Part II- If this is	a report of a can	didate's	authorized C	omn	nitte	ee, C	andida	ate shall	sign he	ere.						
I swear (or affirm) No 320) as amende	that to the best of i	ny knowle	edge and belief	this	poli	tical	commi	ittee has n	ot viola	ted an	y provis	ions of the	e act of J	une 3,19	937 (P.L.	1333,
Sworn to and subsc	ribed before me this										s	ignature o	of Candid	ate		
	day of 						-					Printe	d Name			
	Signature						-									
My Commission Exp	ires											Ema	il			
	мо	D	AY	YR			•		Area	Code		Da	aytime T	elephon	e Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF BARBARA THOMSON FOR JUDGE	From:	10/24/202	<u>3</u> To:	11/27/2023
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)			\$	2,150.00
TOTAL for the Reporting) Period	(2)	\$	2,150.00
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)			\$	2,000.00
TOTAL for the Reporting) Period	(3)	\$	2,000.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	J Period	(4)	\$	0.00
			I	
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			\$	4,150.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
	•	·			•	•	$\overline{}$	DACE 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 Ca	ndidate		Reporting P	eriod			
FRIENDS OF BARBARA THOMS	ON FOR JUDGE		From:	10/24/	2023 T o	: <u>11/27/2023</u>	
				DATE		AMOUNT	
Full Name of Contributor MK FEENEY			МО	DAY	YEAR		
Mailing Address 100 SOUTH E	BROAD STREET					\$ 100.00	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19110	11	30	2023		
Full Name of Contributor CHRISTINE KENTY			МО	DAY	YEAR		
Mailing Address 8000 WINSTO	ON ROAD					\$ 250.00	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19118	11	30	2023		
Full Name of Contributor MARGARET NOLAN			МО	DAY	YEAR		
Mailing Address 7806 ROANO	KE STREET					\$ 50.00	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19118	11	30	2023		
Full Name of Contributor DANIEL FEE			МО	DAY	YEAR		
Mailing Address 2636 BROWN	I STREET				2000	\$ 250.00	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19130	11	9	2023		
Full Name of Contributor ANTHONY CAMPISI			МО	DAY	YEAR		
Mailing Address 200 WEST WALNUT LANE						\$ 250.00	
				7	2023	I	

Full Name of Conti	ributor							
EDWARD BARNAR	RD			МО	DAY		YEAR	
Mailing Address	8038 CRISPIN STR	EET						\$ 100.00
City PHILADELI	DHTA	State	Zip Code (Plus 4)	11		5	2023	
THEREE		PA	19118					
Full Name of Conti	ributor		L					
JASON M DUCKWORTH				МО	DAY		YEAR	
Mailing Address	2121 SANSOM ST							\$ 100.00
City PHILADELI	PHTA	State	Zip Code (Plus 4)	11		2	2023	
		PA	19103					
Full Name of Conti	ributor				DAY		WEAR	
DENISE LARRABE	E			МО	DAY		YEAR	
Mailing Address	850 CARPENTER LA	NE				,		\$ 100.00
City PHILADELI	PHIA	State	Zip Code (Plus 4)	11		1	2023	
		PA	19119					
Full Name of Contr JOHN BRADY	ributor			МО	DAY		YEAR	
	ributor 259 HERMITAGE ST	7		МО	DAY		YEAR	\$ 100.00
JOHN BRADY Mailing Address	259 HERMITAGE ST	State	Zip Code (Plus 4)	MO	DAY	1	YEAR 2023	\$ 100.00
JOHN BRADY Mailing Address	259 HERMITAGE ST		Zip Code (Plus 4) 19127		DAY	1		\$ 100.00
JOHN BRADY Mailing Address	259 HERMITAGE ST	State			DAY	1		\$ 100.00
JOHN BRADY Mailing Address City PHILADELI Full Name of Control	259 HERMITAGE ST	State PA		11		1	2023	\$ 100.00
JOHN BRADY Mailing Address City PHILADELI Full Name of Contr ED RENDELL Mailing Address	259 HERMITAGE ST PHIA ributor 3910 NETHERFIELD	State PA		11		1	2023	
JOHN BRADY Mailing Address City PHILADELI Full Name of Contr ED RENDELL Mailing Address	259 HERMITAGE ST PHIA ributor 3910 NETHERFIELD	State PA PA ROAD	19127	11 MO			2023 YEAR	
JOHN BRADY Mailing Address City PHILADELI Full Name of Contr ED RENDELL Mailing Address	259 HERMITAGE ST PHIA ributor 3910 NETHERFIELD	State PA ROAD State	19127 Zip Code (Plus 4)	MO 11	DAY		2023 YEAR 2023	
JOHN BRADY Mailing Address City PHILADELI Full Name of Contr ED RENDELL Mailing Address City PHILADELI	259 HERMITAGE ST PHIA ributor 3910 NETHERFIELD PHIA	State PA ROAD State	19127 Zip Code (Plus 4)	11 MO			2023 YEAR	
JOHN BRADY Mailing Address City PHILADELI Full Name of Contr ED RENDELL Mailing Address City PHILADELI Full Name of Contr	259 HERMITAGE ST PHIA ributor 3910 NETHERFIELD PHIA	State PA ROAD State PA	19127 Zip Code (Plus 4)	MO 11	DAY	1	2023 YEAR 2023	
JOHN BRADY Mailing Address City PHILADELI Full Name of Contr ED RENDELL Mailing Address City PHILADELI Full Name of Contr DOROTHY FULTOR	259 HERMITAGE ST PHIA ributor 3910 NETHERFIELD PHIA ributor N 2074 SUSQUEHANN	State PA ROAD State PA	19127 Zip Code (Plus 4)	MO 11	DAY		2023 YEAR 2023	\$ 100.00
JOHN BRADY Mailing Address City PHILADELI Full Name of Contr ED RENDELL Mailing Address City PHILADELI Full Name of Contr DOROTHY FULTOR Mailing Address	259 HERMITAGE ST PHIA ributor 3910 NETHERFIELD PHIA ributor N 2074 SUSQUEHANN	State PA ROAD State PA	19127 Zip Code (Plus 4) 19129	MO 11	DAY	1	2023 YEAR 2023	\$ 100.00

						PAGE 6
Full Name of Contributor ERIN HORVAT			мо	DAY	YEAR	
Mailing Address 12 E MERMAID LA	NE					\$ 200.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19118	10	31	2023	
Full Name of Contributor CHARLES MCNABB	CHARLES MCNABB				YEAR	
Mailing Address 7417 BOYER STREET State 7417 Code (Plus 4)				28	2023	\$ 100.00
CITY PHILADELPHIA	PA	19119				
Full Name of Contributor VICTORIA GREEN				DAY	YEAR	
Mailing Address 22 WATERMAN AV	/E					\$ 50.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19118	10	28	2023	
Full Name of Contributor LARRY GOULD		·	мо	DAY	YEAR	
Mailing Address 3 HANOVER SQUA			10	27	2023	\$ 100.00
City NEW YORJ	State NY	Zip Code (Plus 4) 10004		27	2023	
Full Name of Contributor MARY DORMAN			МО	DAY	YEAR	
Mailing Address 26 GREY OAKS CT #26					\$ 100.00	
City CARMEL	State NY	Zip Code (Plus 4) 10512	10	27	2023	
	•				•	

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

PAGE TOTAL \$ 2,150.00

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				Repo	orting Per	riod			
FRIENDS OF BARBARA THOMSON FOR	JUDGE			Fron	n:	10/24/2	<u>023</u> To	: <u>11/27/2023</u>	
					DA	\TE		AMOUNT	
Full Name of Contributor JEFFREY PREVIDI					мо	DAY	YEAR		
Mailing 160 CABRINI BOULEV	ARD							\$ 500.00	
City NEW YORK	State	Zip	Code (Plus	4)	10	31	2023		
	NY 10033								
Employer Name			Occupat	ion					
Employer Mailing Address/Principal Place of City Business					State		Zip Code (Plus 4)		
Dusiliess									
Full Name of Contributor JULIET MOONEY					мо	DAY	YEAR		
Mailing 7808 ROANOKE STRE	ET							\$ 500.00	
City PHILADELPHIA	State	Zip	Code (Plus	4)	10	31	2023		
	PA	19	118						
Employer Name					Occupation				
Employer Mailing Address/Principal Place	e of		City			State		Zip Code (Plus 4)	
Full Name of Contributor					мо	DAY	YEAR		
BARRY ROGERS					М	DA 1	ILAK		
Mailing 5425 S US HIGHWAY	1							\$ 500.00	
City GRANT	State	Zip	Code (Plus	4)	11	9	2023		
	FL	32	949						
Employer Name			Occupation						
Employer Mailing Address/Principal Place Business	e of		City			State		Zip Code (Plus 4)	

Full Name of Contributor ROBERT CERULLI	ROBERT CERULLI				YEAR	
Mailing 8105 LAWNTON STREET Address 2 7 in Code (Dive 4)			11			\$ 500.00
City PHILADELPHIA State Zip Code (Plus 4) PA 19128				30	2023	
Employer Name	•		Occupat	tion		•
Employer Mailing Address/Principal Place of Business City		City	•	State		Zip Code (Plus 4)

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL \$ 2,000.00

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 Candida	Name of Filing Committee of Candidate		Report	ing Perio	od		
			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 Scho	edule T. Detaile	d Summary Page.	Section	4.			PAGE TOTAL
	Julie 1, Detaile	a sammary ruge,		•			\$ 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	od	
FRIENDS OF BARBARA THOMSON FOR JUDGE	From:	<u>10/24/2023</u> To:	11/27/2023
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,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	3		Reporting	9 Period	Reporting Period				
	Fi				From: To:				
				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	odulo II. In Vir	d Contributions Data	ilad Sum	mary Dag			DAGE TOTAL		
Section 2.	edule II, III-KIN	iu Contributions Deta	ilieu Sum	шагу Рас	je,		PAGE TOTAL		
						\$	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	1		
Mailing Address									\$	0.00
City	State		Zip Code(Plus	4)						
Employer of Contributor						Occupation				
Employer Mailing Address/Principal Place of Business		City	State			Zip Code(Plus 4)		Description 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 Candidate	Reporting Period						
FRIENDS OF BARBARA THOMSON FOR JUDGE	From	10/24/2023	То:	11/27/2023			

			DATE				AMOUNT		
To Whom Paid BARBARA THOMSON			мо	DAY	YEAR				
Mailing Address 8002 WINSTON ROAD			11	30	2023	\$	2,500.00		
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19118	Description of Expenditure PARTIAL PAYMENT OF DEBT						
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	PAGE TOTAL 2,500.00		

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			Reporting Period						
FRIENDS OF BARBARA THOMSON FOR JUDGE			From:	<u>10/24/2023</u> To:			1	11/27/2023	
					DATE			Outstanding Balance of Debt	
Name of Creditor BARBARA THOMSON				мо	DAY	YEAR			
Mailing Address 8002 WINSTO	ON ROAD						\$	89,900.00	
City PHILADELPHIA	State	Zip Code (Pl	us 4)	4) Description of Debt					
	PA	19118	CAMPAIGN LOAN						
	•	•		•				PAGE TOTAL	
Enter Grand Total of Unpaid	Debts on Page 1	l, Report Cover Pa	ge, Item	ı G.			\$	89,900.00	