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	20230	111				Repor Filed I		CAN	IDI	DATE		COM	1ITTEE	✓	LOBI	BYIST		
Name of Filing C	ommittee, Ca	andida	te or Lo	obbyis	t:	F	RIEND	S OF	BARB	ARA	THON	1SON	FOR J	UDGE					
Street Address:																			
City:	PHILADE	LPHIA							State	:	PA			Zip Cod	le: 19	118			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		1.	2ND F PRIMA		PRE-	2.	30 D/ PRIM		P	OST-	3.		AMENDM REPORT?		Yes	No)	\
(place X to the right of	6TH TUESDAY PRE-ELECTION		4.	2ND F ELECT		PRE-	5.	30 D		P	OST-	6.		TERMINA REPORT?		Yes	√ No)	
report type)	ANNUAL REF	PORT	7. X	Year 2	2023				CHECK					PAPER		\checkmark	DISKE	TTE	l
Name of Office S	- Sought by Car	ndidate	e:				-		DAT	E OI	F ELE	СТІО	N	District Number	Office Code	Par	ty Code	Cour	
									МО		DAY	YE	AR		<u> </u>	DEN	1		
										11		7	2023		(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of		nd	МО	DAY	Y	YEAR			МО		DAY	YE	AR	FO	R OFFIC	E USE	ONLY		
Expenditures	rrom:		1	1	28	202	23 1	ГО		1		1	2024						
A. Amount Bro	ught Forward	l From	Last R	eport				\$				1,8	330.87						
B. Total Moneta	ary Contribut	ions A	nd Rec	eipts (From	Sched	ule I)	\$					0.00						
C. Total Funds	Available (Su	ım Of L	ines A	and B)			\$					0.00						
D. Total Expend	ditures (From	1 Sched	dule III	[)				\$				1,8	30.87						
E. Ending Cash	Balance (Sul	btract	Line D	From L	Line C)		\$					0.00						
F. Value Of In-	Kind Contribu	utions	Receive	ed (Fro	om Sc	hedule	e II)	\$					0.00						
G. Unpaid Debt	s And Obliga	tions (From S	chedu	le IV))		\$					0.00						
						AFFI	DAV!	IT SE	CTIO	N									
PART I - If this is		-	-		_								_						
I swear (or affirm) correct and complete		rt, inclu	ding the	attach	ed sch	edules f	filed on	paper	or by e	lectr	onic m	edium	, are to t	he best of	f my knov	vledge	and beli	ef , tr	ue
Sworn to and subs	cribed before n day of	ne this		20						•		S	ignature	of Persoi	n Submitt	ing Rep	ort		_
		gnature	e					_		•				Print	ted Name				_
My Commission Ex	rpires							_		-				Emai	i				_
	мо		DA	λY		YR					Are	ea Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a	candi	date's	author	ized (Commi	ttee, (Candid	ate sh	all s	sign he	ere.							
I swear (or affirm) No 320) as amende		st of my	/ knowle	dge an	d belie	f this p	olitical	comm	ittee ha	as no	ot viola	ted an	y provisi	ions of the	e act of Ju	ine 3,1	937 (P.I	133	3,
Sworn to and subsc	ribed before me	e this		20									Si	ignature o	f Candida	ite			-
	— —							_						Printe	d Name				-
	Signa	ature						_		_									_
My Commission Exp	ires													Emai	il				
	M	0	D#	λY		YR		_			Area	Code		Da	ytime Te	elephor	e Numb	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -						
Name of Filing Committee or Candidate	Reporting Period					
FRIENDS OF BARBARA THOMSON FOR JUDGE	From:	11/28/202	<u>3</u> To:	1/1/2024		
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	y 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 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

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 Committee or Candidat	Name of Filing Committee or Candidate			Reporting Period					
			From:		То	:			
				DATE			AMOUNT		
Full Name of Contributing Committee			МО	DAY	YEAR				
Mailing Address						\$	0.00		
City	State	Zip Code (Plus 4)							

PAGE TOTAL
0.00

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

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	Name of Filing Committee or Candidate			Reporting Period					
			Fro	m:		To):		
					DATE			AMOUNT	
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4))						
								PAGE TOTAL	

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	ame of Filing Committee or Candidate		Reporting Period						
			From:			То:			
				DA	TE		А	MOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR	\$		0.00
Mailing Address							7 *		0.00
City	State	Zip Cod	e (Plus 4)						
1	I	ı			ı	<u> </u>			
		_		_				PAGE TOT	AL
Enter Grand Total of Part C on Scheo	lule 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	1			Repo	orting Pe	riod			
				Fron	n:		To):	
					D	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR	\$	0.00
Mailing Address									
City	State	Zi	p Code (Plus	s 4)					
Employer Name		•			Occupa	tion			
Employer Mailing Address/Principal Pl	ace of Business		City			State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detaile	ed Sumn	nary Page,	Section	on 3.			\$	PAGE 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 Candidate		Report	ing Peri	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plus 4)					
Receipt Description	•	•			•			
Forten Commit Tatal of Boot	F an Cabadala I Batallad	I C B	C					PAGE TOTAL
Enter Grand Total of Part	e on Schedule I, Detalled	summary Page,	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 REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Peri	od	
FRIENDS OF BARBARA THOMSON FOR JUDGE	From:	11/28/2023 To:	1/1/2024
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTO	₹	
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	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 Sche Section 2.	dule II, In-Kind (Contributions Detai	iled Sum	mary 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	Period				
				Fro	m:		To:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address									\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	ation				
Employer Mailing Address/Principal Plac	e of Business	City	′	Stat	e Zip	Code(Plus 4)	Desci	ript	ion of Contribution	on
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	ontributions De	etaile	ed				PAGE TO	ΓAL
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	11/28/2023	То:	1/1/2024			

			•		DATE			AMOUNT
To W	hom Paid			МО	DAY	YEAR		
BARB	ARA THOMSON			МО	DAT	TEAR		
Mailing Address				12	28	2023	\$	1,830.87
City	PHILADELPHIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	19118	REPAYM	IENT OF CA	AMPAIGN	LOAN	
								PAGE TOTAL
Ente	nter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							1,830.87

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					<u>11</u>	11/28/2023 To:			1/1/2024		
DATE									Outstanding Balance of Debt		
Name of Creditor					мо	DAY	YEAR				
BARBARA THOMSON											
Mailing Address								\$		0.00	
City	PHILADELPHIA State Zip Co		Zip Code (Plus 4)	Description of Debt						
		PA	19118		DEBT FORGIVENESS OF \$.13		
									PAGE TOTAL		
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.										0.00	