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	200214	49		-	Repor		CANDI	DATE		COM	1ITTEE	✓	LOBI	BYIST	
Number : Name of Filing (Committee, Ca	ndidat	e or Lo	obbvist:		Filed I	-	THADDE								
				5559130		INILINE		THADDE								
Street Address:																
City:	CHESTER	ł						State:	PA			Zip Co	de: 19	016		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY			2ND FRIDA PRIMARY	Y PRE	- 2. X	30 DA PRIMA		POST-	3.		AMENDN REPORT		Yes	No	Ŷ ✓
(place X to the right of	6TH TUESDAY PRE-ELECTIO		ł.	2ND FRIDA ELECTION	Y PRE	- 5.	30 DA		POST-	6.		TERMIN REPORT		Yes	No	° √
report type)	ANNUAL REF	ORT 7	7 .	Year 2014	FILING METHO							PAPER		\checkmark	DISKE	TTE
Name of Office Sought by Candidate:							DATE O				District Number			-	County Code	
REPRESENTATIVE IN THE GENERAL ASSEMBLY							мо	DAY	YE	AR	159	STH	DEN	1	23	
	-							11		4	2014		(SEE INS	STRUCTI	ONS FOR	CODES)
Summary of		nd	мо	DAY	YEAR	Ł		мо	DAY	YE	AR	FC	OR OFFIC	E USE	ONLY	
Expenditures	s from:			4 1	2	014 1	0	5		5	2014					
A. Amount Bro	ught Forward	From	Last R	eport			\$			9	32.92	1				
B. Total Monet	ary Contribut	ions Ar	nd Rec	eipts (Fron	n Sche	dule I)	\$			30,0	61.11]				
C. Total Funds	Available (Su	m Of L	ines A	and B)			\$			30,9	94.03					
D. Total Expen	ditures (From	Sched	lule II	I)			\$			9	60.00]				
E. Ending Cash	Balance (Sul	otract I	Line D	From Line	C)		\$			30,0	34.03					
F. Value Of In-	Kind Contribu	itions I	Receive	ed (From S	chedu	le II)	\$				0.00					
G. Unpaid Deb	ts And Obliga	tions (I	From S	Chedule I	/)		\$				0.00					
					AFF	IDAVI	T SE	CTION								
PART I - If this i	s a Committe	e repor	t, trea	surer sign	here.	If this is	s a Car	ndidate re	eport, c	andid	late sig	yn here.				
I swear (or affirm correct and compl		t, incluc	ding the	attached sc	hedule	s filed on	paper	or by elect	ronic me	edium,	are to t	the best o	f my knov	vledge	and beli	ef , true
Sworn to and subs	cribed before n day of	ne this		20						Si	gnature	e of Perso	n Submitt	ing Rep	oort	
		gnature					_					Prin	ted Name			
My Commission E		.										Ema	il			
	мо		D/	AY	YR				Are	ea Cod	e	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a	candio	date's	authorized	Comn	nittee, C	Candid	ate shall	sign he	ere.						
I swear (or affirm) No 320) as amend		st of my	knowle	edge and bel	ief this	political	comm	ittee has n	ot violat	ed any	/ provis	ions of th	e act of Ju	ine 3,1	937 (P.I	1333,
Sworn to and subso	cribed before mo day of	e this		20							s	ignature (of Candida	ite		
							_					Printe	ed Name			
Mu Corrector in 5	Signa	ture					_					Ema	il			
My Commission Exp	bires											Lind				
	М	0	DA	AY	YR		_		Area (Code		D	aytime Te	elephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF THADDEUS KIRKLAND	From:	<u>4/1/201</u>	<u>4</u> To:	<u>5/5/2014</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	Period	(1)	\$	50.00
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)			\$	100.00
TOTAL for the Reporting	Period	(2)	\$	100.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	3,300.00
All Other Contributions (Part D)			\$	26,611.11
TOTAL for the Reporting	Period	(3)	\$	29,911.11
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 Page			\$	30,061.11

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 Candidate				Reporting Period					
				From: To:			1		
		·			DATE			AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4	4)						
								PAGE TOTAL	
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.						\$	0.00		

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 Candida	ate		Rep	porting Po	eriod				
FRIENDS OF THADDEUS KIRKLAND				From: <u>4/1/2014</u> To				:: <u>5/5/2014</u>	
			•		DATE			AMOUNT	
Full Name of Contributor STEVEN DEVINE				мо	DAY	YEAR			
Mailing Address							\$	100.00	
City WEST CHESTER	State	Zip Code (Plus	4)	5	5	2014			
	PA	19382							
								PAGE TOTAL	
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.							\$	100.00	

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	ame of Filing Committee or Candidate Report				g Period				
FRIENDS OF THADDEUS KIRKLAND			From:	<u>4</u>	/1/2014	То:		<u>5/5/2014</u>	
				DA	TE			AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			
PILOTS ASSN. FOR BAY & RIVER DEV				\$	300.00				
City PHILA. State Zip Code (Plus 4)				5	5	2014			
City Phila.	PA	19147	e (Plus 4)						
Full Name of Contributing Committee		2		мо	DAY	YEAR			
DUANE MORRIS LLP PAC							\$	1,000.00	
Mailing Address	1	1		5	5	2014			
City PHILA	State		e (Plus 4)						
	РА	19103							
Full Name of Contributing Committee				мо	DAY	YEAR			
PENN LIBERTY FUND PAC							\$	1,000.00	
Mailing Address	_			5	5	2014			
City JENKINTOWN	State	Zip Code	e (Plus 4)						
	РА	19046							
Full Name of Contributing Committee				мо	DAY	YEAR			
LABORERS DISTRICT COUNCIL PAC FL	ND						\$	1,000.00	
Mailing Address				5	5	2014			
City PHILA	State	Zip Code	e (Plus 4)						
	PA	19123							
	· · ·					[PAGE TOTAL	
Enter Grand Total of Part C on Sche	iter Grand Total of Part C on Schedule I, Detailed Summary Page, Secti								
	ter Grand Total of Part C on Schedule I, Detailed Summary Page, Section						\$	3,300.00	

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				Repo	orting Per	riod				
FRIE	NDS OF THADDEUS KIRKLAND				Fron	1:	<u>4/1/2</u>	<u>014</u> To	5 : <u>5/5/2014</u>		
						DA	TE		АМО	UNT	
Full N	ame of Contributor					мо	DAY	YEAR		F 000 00	
DISC	OVER OPTIMAL HEALTHCARE, P.C					110	DAT		\$	5,000.00	
Mailin	ng Address					5	5	2014			
City	BROOKHAVEN	State	Zip	Code (Plus	4)						
		PA	190)15		I					
Employer Name						Occupat	ion				
Employer Mailing Address/Principal Place of Business City						State		Zip Code (Plus 4)		
Full N	ame of Contributor					мо	DAY	YEAR		E 000 00	
BETTE	ER DELCO					MO	DAT	TEAR	\$	5,000.00	
Mailin	ng Address	-				5	5	2014			
City	DREXEL HILL	State	Zip	Code (Plus	4)	5	5	2011			
		PA	190)26							
Emplo	oyer Name					Occupat	ion				
Emplo	oyer Mailing Address/Principal Plac	e of Business		City			State		Zip Code (Plus 4)	
Full N	ame of Contributor					мо	DAY	YEAR			
HARR	Y AND ELEANOR OXMAN					MO	DAT	TEAR	\$	2,000.00	
Mailin	ng Address					5	5	2014			
City	PHILA	State	Zip	Code (Plus	4)	5	5	2011			
		PA	191	106							
Emplo	oyer Name					Occupat	ion				
Emplo	oyer Mailing Address/Principal Plac	e of Business		City			State		Zip Code (Plus 4)	
									-		
Full N	ame of Contributor					мо	DAY	YEAR	e e	1 111 11	
JOSE	PH IACONA III					мо	DAY	YEAR	\$	1,111.11	
JOSEI Mailin	PH IACONA III ng Address					мо 5	DAY 5	YEAR 2014	-	1,111.11	
JOSE	PH IACONA III	State		Code (Plus	4)				-	1,111.11	
JOSEI Mailin City	PH IACONA III ng Address CHESTER	State PA	Zip 190		4)	5	5		-	1,111.11	
JOSEI Mailin City Emplo	PH IACONA III ng Address	PA			4)		5		-		

III Name of Contributor				мо	DAY	YEAR	\$	1,000.00
MR. AND MRS. PATRICK BURNS								1,000.00
Mailing Address	1 1			5	5	2014		
City NEWTOWN SQUARE	State	Zip	Code (Plus 4)					
	I PA	190)73					
Employer Name				Occupat	ion			
Employer Mailing Address/Principal Pla	ce of Business		City		State		Zip Code	e (Plus 4)
Full Name of Contributor				мо	DAY	YEAR	\$	1,000.00
WILLIAM INGRAM D.O.							ļ	1,000.00
Mailing Address	1			5	5	2014		
City MEDIA	State	Zip	Code (Plus 4)					
	I PA	190	063					
Employer Name								
Employer Mailing Address/Principal Place of Business City					State		Zip Code	e (Plus 4)
Full Name of Contributor				мо	DAY	YEAR	\$	1,000.00
FOX ROTHCHILD, LLP							ĻŤ	1,000.00
Mailing Address	1			5	5	2014		
City BLUE BELL	State	Zip	Code (Plus 4)					
	l pa	194	422					
Employer Name				Occupat	ion			
Employer Mailing Address/Principal Pla	ce of Business		City		State		Zip Code	e (Plus 4)
Full Name of Contributor								
				мо	DAY	YEAR	\$	1.000.00
BALLARD SPAHR, LLP				мо	DAY	YEAR	\$	1,000.00
BALLARD SPAHR, LLP Mailing Address				мо 5	DAY 5	YEAR 2014	\$	1,000.00
BALLARD SPAHR, LLP	State		Code (Plus 4)				\$	1,000.00
BALLARD SPAHR, LLP Mailing Address	State PA	Zip 191					\$	1,000.00
BALLARD SPAHR, LLP Mailing Address					5		\$	1,000.00
BALLARD SPAHR, LLP Mailing Address City PHILA	PA			- 5	5			1,000.00 e (Plus 4)
BALLARD SPAHR, LLP Mailing Address City PHILA Employer Name Employer Mailing Address/Principal Pla Full Name of Contributor	PA		103	- 5	ion		Zip Code	e (Plus 4)
BALLARD SPAHR, LLP Mailing Address City PHILA Employer Name Employer Mailing Address/Principal Pla Full Name of Contributor BETTY LINCKE	PA		103	- 5 Occupat	ion State	2014		
BALLARD SPAHR, LLP Mailing Address City PHILA Employer Name Employer Mailing Address/Principal Pla Full Name of Contributor BETTY LINCKE Mailing Address	PA	191	103 City	- 5 Occupat	ion State	2014	Zip Code	e (Plus 4)
BALLARD SPAHR, LLP Mailing Address City PHILA Employer Name Employer Mailing Address/Principal Pla Full Name of Contributor BETTY LINCKE	PA ice of Business	2ip	City Code (Plus 4)	Occupat	ion State DAY	2014 YEAR	Zip Code	e (Plus 4)
BALLARD SPAHR, LLP Mailing Address City PHILA Employer Name Employer Mailing Address/Principal Pla Full Name of Contributor BETTY LINCKE Mailing Address	PA	191	City Code (Plus 4)	Occupat	ion State DAY	2014 YEAR	Zip Code	e (Plus 4)
BALLARD SPAHR, LLP Mailing Address City PHILA Employer Name Employer Mailing Address/Principal Pla Full Name of Contributor BETTY LINCKE Mailing Address	PA ice of Business	2ip	City Code (Plus 4)	Occupat	ion State DAY 5	2014 YEAR	Zip Code	e (Plus 4)
BALLARD SPAHR, LLP Mailing Address City PHILA Employer Name Employer Mailing Address/Principal Pla Full Name of Contributor BETTY LINCKE Mailing Address City MEDIA	PA ace of Business State PA	2ip	City Code (Plus 4)	MO 5	ion State DAY 5	2014 YEAR	Zip Code	e (Plus 4)
BALLARD SPAHR, LLP Mailing Address City PHILA Employer Name Employer Mailing Address/Principal Pla Full Name of Contributor BETTY LINCKE Mailing Address City MEDIA Employer Name	PA ace of Business State PA	2ip	City Code (Plus 4)	MO 5	ion State DAY 5	2014 YEAR	Zip Code	e (Plus 4) 1,000.00 e (Plus 4)
BALLARD SPAHR, LLP Mailing Address City PHILA Employer Name Employer Mailing Address/Principal Pla Full Name of Contributor BETTY LINCKE Mailing Address City MEDIA Employer Name Employer Mailing Address/Principal Pla Full Name of Contributor DRAKE NAKAISHI	PA ace of Business State PA	2ip	City Code (Plus 4)	MO 5 Occupat	ion State DAY 5 ion State	2014 YEAR 2014	Zip Code	e (Plus 4) 1,000.00
BALLARD SPAHR, LLP Mailing Address City PHILA Employer Name Employer Mailing Address/Principal Pla Full Name of Contributor BETTY LINCKE Mailing Address City MEDIA Employer Name Employer Mailing Address/Principal Pla Full Name of Contributor DRAKE NAKAISHI Mailing Address	PA ace of Business State PA	2ip 190	103 City Code (Plus 4) D63 City	MO 5 Occupat	ion State DAY 5 ion State	2014 YEAR 2014	Zip Code	e (Plus 4) 1,000.00 e (Plus 4)
BALLARD SPAHR, LLP Mailing Address City PHILA Employer Name Employer Mailing Address/Principal Pla Full Name of Contributor BETTY LINCKE Mailing Address City MEDIA Employer Name Employer Mailing Address/Principal Pla Full Name of Contributor DRAKE NAKAISHI	PA ace of Business State PA	2ip 190	City Code (Plus 4)	MO Occupat	ion State DAY 5 ion State DAY	2014 YEAR 2014 YEAR	Zip Code	e (Plus 4) 1,000.00 e (Plus 4)
BALLARD SPAHR, LLP Mailing Address City PHILA Employer Name Employer Mailing Address/Principal Pla Full Name of Contributor BETTY LINCKE Mailing Address City MEDIA Employer Name Employer Mailing Address/Principal Pla Full Name of Contributor DRAKE NAKAISHI Mailing Address	PA Ice of Business State PA Ice of Business	2ip 190	103 City Code (Plus 4) 063 City Code (Plus 4)	MO Occupat	ion State DAY 5 ion State DAY	2014 YEAR 2014 YEAR	Zip Code	e (Plus 4) 1,000.00 e (Plus 4)
BALLARD SPAHR, LLP Mailing Address City PHILA Employer Name Employer Mailing Address/Principal Pla Full Name of Contributor BETTY LINCKE Mailing Address City MEDIA Employer Name Employer Mailing Address/Principal Pla Full Name of Contributor DRAKE NAKAISHI Mailing Address	PA ace of Business State PA ace of Business State State	191 Zip 190	103 City Code (Plus 4) 063 City Code (Plus 4)	MO Occupat	ion State DAY 5 ion State DAY 5	2014 YEAR 2014 YEAR	Zip Code	e (Plus 4) 1,000.00 e (Plus 4)

ull Name of Contributor				мо	DAY	YEAR		1 000 00
SCF CONSULTING LLC				MO	DAT	TLAK	\$	1,000.00
Mailing Address				4	21	2014		
City AMBER	State	Zip	Code (Plus 4)			2011		
	РА	19	002					
Employer Name				Occupat	ion:			
Employer Mailing Address/Principal Pla	ce of Business		City		State		Zip Cod	le (Plus 4)
Full Name of Contributor E. ROBERT BLAKE				мо	DAY	YEAR	\$	1,000.00
Mailing Address							1	
City MEDIA	State	Zip	Code (Plus 4)	- 4	21	2014		
-	PA		063					
Employer Name				Occupat	ion			
Employer Mailing Address/Principal Place of Business City				1	State		Zip Cod	le (Plus 4)
Full Name of Contributor ASUNCION MUNOZ				мо	DAY	YEAR	\$	1,000.00
Mailing Address							1	
City	State	Zip	Code (Plus 4)	4	21	2014		
Employer Name	•			Occupat	ion		•	
Employer Mailing Address/Principal Pla	ce of Business		City	•	State		Zip Cod	le (Plus 4)
Full Name of Contributor				мо	DAY	YEAR		1 000 00
CURT AND KAREN HEFFLER					2/11	TEAK	\$	1,000.00
CURT AND KAREN HEFFLER Mailing Address							Ş	1,000.00
	State	Zip	Code (Plus 4)	- 4	21	2014	\$	1,000.00
Mailing Address	State PA		Code (Plus 4)				_ _ 	1,000.00
Mailing Address					21		\$	1,000.00
Mailing Address City NARBERTH	РА			- 4	21			1,000.00 le (Plus 4)
Mailing Address City NARBERTH Employer Name	РА		072	- 4	21			
Mailing Address City NARBERTH Employer Name Employer Mailing Address/Principal Place Full Name of Contributor	РА		072	Occupat	ion State DAY	2014 YEAR	Zip Cod	le (Plus 4)
Mailing Address City NARBERTH Employer Name Employer Mailing Address/Principal Place Full Name of Contributor ALLEN AND ANN MARIE KLENOTIZ	РА	190	072	- 4 Occupat	ion State	2014	Zip Cod	le (Plus 4)
Mailing Address City NARBERTH Employer Name Employer Mailing Address/Principal Plan Full Name of Contributor ALLEN AND ANN MARIE KLENOTIZ Mailing Address	PA	190	072 City	Occupat	ion State DAY	2014 YEAR	Zip Cod	le (Plus 4)
Mailing Address City NARBERTH Employer Name Employer Mailing Address/Principal Place Full Name of Contributor ALLEN AND ANN MARIE KLENOTIZ Mailing Address City GLEN MILLS	PA ce of Business State	190	072 City	MO 4	21 ion State DAY 21	2014 YEAR	Zip Cod	le (Plus 4)
Mailing Address City NARBERTH Employer Name Employer Mailing Address/Principal Plan Full Name of Contributor ALLEN AND ANN MARIE KLENOTIZ Mailing Address	PA ce of Business State PA	190	072 City	Occupat	21 ion State DAY 21	2014 YEAR	Zip Cod	le (Plus 4)
Mailing Address City NARBERTH Employer Name Employer Mailing Address/Principal Place Full Name of Contributor ALLEN AND ANN MARIE KLENOTIZ Mailing Address City GLEN MILLS Employer Name Employer Mailing Address/Principal Place Full Name of Contributor Full Name Address	PA ce of Business State PA	190	072 City Code (Plus 4) 342	MO 4	ion State DAY 21	2014 YEAR	Zip Cod	le (Plus 4) 1,000.00
Mailing Address City NARBERTH Employer Name Employer Mailing Address/Principal Place Full Name of Contributor ALLEN AND ANN MARIE KLENOTIZ Mailing Address City GLEN MILLS Employer Name Employer Mailing Address/Principal Place Full Name of Contributor 2 GOOD FOOD MART	PA ce of Business State PA	190	072 City Code (Plus 4) 342	MO 4 Occupat	ion State DAY 21 ion State	2014 YEAR 2014	Zip Cod	le (Plus 4) 1,000.00 le (Plus 4)
Mailing Address City NARBERTH Employer Name Employer Mailing Address/Principal Place Full Name of Contributor ALLEN AND ANN MARIE KLENOTIZ Mailing Address City GLEN MILLS Employer Mailing Address/Principal Place Full Name of Contributor 2 GOOD FOOD MART Mailing Address	PA ce of Business State PA ce of Business	190 Zip 193	072 City Code (Plus 4) 342 City	MO 4 Occupat	ion State DAY 21 ion State	2014 YEAR 2014	Zip Cod	le (Plus 4) 1,000.00 le (Plus 4)
Mailing Address City NARBERTH Employer Name Employer Mailing Address/Principal Place Full Name of Contributor ALLEN AND ANN MARIE KLENOTIZ Mailing Address City GLEN MILLS Employer Name Employer Mailing Address/Principal Place Full Name of Contributor 2 GOOD FOOD MART	PA ce of Business State PA ce of Business State	190 Zip 193	072 City Code (Plus 4) 342	MO Occupat	ion State DAY 21 21 21 21 21 35 35 45 21	2014 YEAR 2014 YEAR	Zip Cod	le (Plus 4) 1,000.00 le (Plus 4)
Mailing Address City NARBERTH Employer Name Employer Mailing Address/Principal Place Full Name of Contributor ALLEN AND ANN MARIE KLENOTIZ Mailing Address City GLEN MILLS Employer Name Employer Mailing Address/Principal Place Full Name of Contributor 2 GOOD FOOD MART Mailing Address City UPPER DARBY	PA ce of Business State PA ce of Business	190 Zip 193	072 City Code (Plus 4) 342 City	MO A Occupat	21 State DAY 21 State 21 DAY 21 DAY 21 DAY 21 21 21 21 21 21 21	2014 YEAR 2014 YEAR	Zip Cod	le (Plus 4) 1,000.00 le (Plus 4)
Mailing Address City NARBERTH Employer Name Employer Mailing Address/Principal Place Full Name of Contributor ALLEN AND ANN MARIE KLENOTIZ Mailing Address City GLEN MILLS Employer Mailing Address/Principal Place Full Name of Contributor 2 GOOD FOOD MART Mailing Address	PA ce of Business State PA ce of Business State PA	190 Zip 193	072 City Code (Plus 4) 342 City	MO Occupat	21 State DAY 21 State 21 DAY 21 DAY 21 DAY 21 21 21 21 21 21 21	2014 YEAR 2014 YEAR	Zip Cod	le (Plus 4) 1,000.00 le (Plus 4)

Full Na	ull Name of Contributor					DAY	YEAR		
PAISNE	ER LITVIN LLP				мо	DAT	TEAR	\$	1,000.00
Mailing	Address				4	21	2014		
City	BALA CYNWYD	State	Zi	p Code (Plus 4)	-	21	2014		
		I _{PA}	19	9004					
Employer Name					Occupat	ion			
Employer Mailing Address/Principal Place of Business City				State		Zip Cod	le (Plus 4)		
Full Name of Contributor						DAY	VEAD		
ROBER	T SCOTT				мо	DAY	YEAR	\$	500.00
Mailing	Address				- 5	5	2014		
City	SWARTHMORE	State	Zi	p Code (Plus 4)	5	J	2014		
		PA	19	9081					
Employ	ver Name				Occupation				
Employ	ver Mailing Address/Prine	cipal Place of Business		City	State			Zip Cod	e (Plus 4)
								Р	AGE TOTAL
Enter (Grand Total of Part C	on Schedule I, Detailed	Sumr	nary Page, Section	on 3.				
							1	\$	26,611.11

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 Candidate	Name of Filing Committee or Candidate			Reporting Period					
			From:			То:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (Plus 4)						
Receipt Description									
		_	a					PAGE TOTAL	
nter Grand Total of Part E on Schedule I, Detailed 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 Period		
FRIENDS OF THADDEUS KIRKLAND	From:	<u>4/1/2014</u> To:	<u>5/5/2014</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	「 F)		
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, I		\$	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				
						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 Sched Section 2.	iled Sum	mary Pag	e,		PAGE TOTA	<u></u>		
						\$		0.00

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

Name of Filing Committee or Candidate			Reporting Period						
			From:			То:			
						DATE		Α	MOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zip Code(Plu	ıs 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 Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00			

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period					
FRIENDS OF THADDEUS KIRKLAND			From <u>4/</u>		<u>1/2014</u>	То:	<u>5/5/2014</u>	
					DATE			AMOUNT
To Whom Paid				мо	DAY	YEAR		
ANDREW NORTHERN								
Mailing Address				4	10	2014	\$	400.00
City	CHESTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	19013	CAMPAIGN LITERATURE DISTRIB.				
Το W	To Whom Paid			мо	DAY	YEAR		
VOTE VINCE PA								
Mailing Address			4	30	2014	\$	500.00	
City	ty DREXEL HILL State Zip Code (Plus 4)		Description of Expenditure					
		PA	19026	CAMPAIGN DONATION FOR			R VINCE	RANGIONE
To Whom Paid				мо	DAY	YEAR		
CHESTER FINE ARTS CENTER EAST				MO		1 LAIX		
Mailing Address			5	2	2014	\$	60.00	
City CHESTER		State	Zip Code (Plus 4)	Description of Expenditure				
		PA	19013	PURCH	ASE OF 3 J	AZZ DIN	NER TIC	KETS
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.								PAGE TOTAL
Ente	r Grand Total of Expenditu	ires on Page 1, R	eport Cover Page, Item	D.			\$	960.00