

Campaign Finance Report

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

Filer Identification Number : 2002149		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST	
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF THADDEUS KIRKLAND								
Street Address:								
City: CHESTER				State: PA		Zip Code: 19016		
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	Year 2014	FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/>	DISKETTE	
Name of Office Sought by Candidate:				DATE OF ELECTION			District Number	Office Code
REPRESENTATIVE IN THE GENERAL ASSEMBLY				MO DAY YEAR			159	STH
				11 4 2014			DEM 23	
							(SEE INSTRUCTIONS FOR CODES)	
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO		FOR OFFICE USE ONLY	
		4	1	2014	5 5 2014			
A. Amount Brought Forward From Last Report				\$ 932.92				
B. Total Monetary Contributions And Receipts (From Schedule I)				\$ 30,061.11				
C. Total Funds Available (Sum Of Lines A and B)				\$ 30,994.03				
D. Total Expenditures (From Schedule III)				\$ 960.00				
E. Ending Cash Balance (Subtract Line D From Line C)				\$ 30,034.03				
F. Value Of In-Kind Contributions Received (From Schedule II)				\$ 0.00				
G. Unpaid Debts And Obligations (From Schedule IV)				\$ 0.00				

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
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 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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 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:	
				DATE	AMOUNT		
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 0.00
Mailing Address							
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 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 Candidate	Reporting Period
FRIENDS OF THADDEUS KIRKLAND	From: <u>4/1/2014</u> To: <u>5/5/2014</u>

DATE				AMOUNT
Full Name of Contributor				
STEVEN DEVINE				
Mailing Address				
City WEST CHESTER	State	Zip Code (Plus 4)	MO	DAY
	PA	19382	5	5
				2014
				\$ 100.00

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

PAGE TOTAL
\$ 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 FRIENDS OF THADDEUS KIRKLAND	Reporting Period From: <u>4/1/2014</u> To: <u>5/5/2014</u>
----------------------------------------------------------------------------------	----------------------------------------------------------------------------------------

				DATE	AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR
PILOTS ASSN. FOR BAY & RIVER DEV PAC						
Mailing Address						
City	PHILA.	State	PA	5	5	2014
		Zip Code (Plus 4)	19147			
						\$ 300.00
Full Name of Contributing Committee				MO	DAY	YEAR
DUANE MORRIS LLP PAC						
Mailing Address						
City	PHILA	State	PA	5	5	2014
		Zip Code (Plus 4)	19103			
						\$ 1,000.00
Full Name of Contributing Committee				MO	DAY	YEAR
PENN LIBERTY FUND PAC						
Mailing Address						
City	JENKINTOWN	State	PA	5	5	2014
		Zip Code (Plus 4)	19046			
						\$ 1,000.00
Full Name of Contributing Committee				MO	DAY	YEAR
LABORERS DISTRICT COUNCIL PAC FUND						
Mailing Address						
City	PHILA	State	PA	5	5	2014
		Zip Code (Plus 4)	19123			
						\$ 1,000.00

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

PAGE TOTAL
\$ 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 FRIENDS OF THADDEUS KIRKLAND	Reporting Period From: <u>4/1/2014</u> To: <u>5/5/2014</u>
----------------------------------------------------------------------------------	----------------------------------------------------------------------------------------

				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	\$ 5,000.00
DISCOVER OPTIMAL HEALTHCARE, P.C.				5	5	2014	
Mailing Address							
City	State	Zip Code (Plus 4)					
BROOKHAVEN	PA	19015					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)		
Full Name of Contributor				MO	DAY	YEAR	\$ 5,000.00
BETTER DELCO				5	5	2014	
Mailing Address							
City	State	Zip Code (Plus 4)					
DREXEL HILL	PA	19026					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)		
Full Name of Contributor				MO	DAY	YEAR	\$ 2,000.00
HARRY AND ELEANOR OXMAN				5	5	2014	
Mailing Address							
City	State	Zip Code (Plus 4)					
PHILA	PA	19106					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)		
Full Name of Contributor				MO	DAY	YEAR	\$ 1,111.11
JOSEPH IACONA III				5	5	2014	
Mailing Address							
City	State	Zip Code (Plus 4)					
CHESTER	PA	19013					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)		

Full Name of Contributor MR. AND MRS. PATRICK BURNS			MO	DAY	YEAR	\$ 1,000.00
Mailing Address			5	5	2014	
City NEWTOWN SQUARE	State PA	Zip Code (Plus 4) 19073				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

Full Name of Contributor WILLIAM INGRAM D.O.			MO	DAY	YEAR	\$ 1,000.00
Mailing Address			5	5	2014	
City MEDIA	State PA	Zip Code (Plus 4) 19063				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

Full Name of Contributor FOX ROTHCHILD, LLP			MO	DAY	YEAR	\$ 1,000.00
Mailing Address			5	5	2014	
City BLUE BELL	State PA	Zip Code (Plus 4) 19422				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

Full Name of Contributor BALLARD SPAHR, LLP			MO	DAY	YEAR	\$ 1,000.00
Mailing Address			5	5	2014	
City PHILA	State PA	Zip Code (Plus 4) 19103				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

Full Name of Contributor BETTY LINCKE			MO	DAY	YEAR	\$ 1,000.00
Mailing Address			5	5	2014	
City MEDIA	State PA	Zip Code (Plus 4) 19063				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

Full Name of Contributor DRAKE NAKAISHI			MO	DAY	YEAR	\$ 1,000.00
Mailing Address			5	5	2014	
City WAYNE	State PA	Zip Code (Plus 4) 19087				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

Full Name of Contributor SCF CONSULTING LLC			MO	DAY	YEAR	\$ 1,000.00
Mailing Address			4	21	2014	
City AMBER	State PA	Zip Code (Plus 4) 19002				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

Full Name of Contributor E. ROBERT BLAKE			MO	DAY	YEAR	\$ 1,000.00
Mailing Address			4	21	2014	
City MEDIA	State PA	Zip Code (Plus 4) 19063				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

Full Name of Contributor ASUNCION MUNOZ			MO	DAY	YEAR	\$ 1,000.00
Mailing Address			4	21	2014	
City	State	Zip Code (Plus 4)				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

Full Name of Contributor CURT AND KAREN HEFFLER			MO	DAY	YEAR	\$ 1,000.00
Mailing Address			4	21	2014	
City NARBERTH	State PA	Zip Code (Plus 4) 19072				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

Full Name of Contributor ALLEN AND ANN MARIE KLENOTIZ			MO	DAY	YEAR	\$ 1,000.00
Mailing Address			4	21	2014	
City GLEN MILLS	State PA	Zip Code (Plus 4) 19342				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

Full Name of Contributor 2 GOOD FOOD MART			MO	DAY	YEAR	\$ 1,000.00
Mailing Address			4	21	2014	
City UPPER DARBY	State PA	Zip Code (Plus 4)				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

Full Name of Contributor PAISNER LITVIN LLP			MO	DAY	YEAR	\$ 1,000.00
Mailing Address			4	21	2014	
City BALA CYNWYD	State PA	Zip Code (Plus 4) 19004				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State		Zip Code (Plus 4)	

Full Name of Contributor ROBERT SCOTT			MO	DAY	YEAR	\$ 500.00
Mailing Address			5	5	2014	
City SWARTHMORE	State PA	Zip Code (Plus 4) 19081				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State		Zip Code (Plus 4)	

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

PAGE TOTAL
\$ 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	Reporting Period From: To:
---------------------------------------	----------------------------------------------------------------------

			DATE			AMOUNT
Full Name			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Receipt Description						

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 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 PER CONTRIBUTOR			
TOTAL for the Reporting Period (1)		\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period (2)		\$	0.00
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period (3)		\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)		\$	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: To:
---------------------------------------	----------------------------------------------------------------------

			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						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: To:

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
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 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>4/1/2014</u> To: <u>5/5/2014</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
ANDREW NORTHERN				
Mailing Address	4	10	2014	\$ 400.00
City CHESTER	State PA	Zip Code (Plus 4) 19013	Description of Expenditure CAMPAIGN LITERATURE DISTRIB.	
To Whom Paid	MO	DAY	YEAR	
VOTE VINCE PA				
Mailing Address	4	30	2014	\$ 500.00
City DREXEL HILL	State PA	Zip Code (Plus 4) 19026	Description of Expenditure CAMPAIGN DONATION FOR VINCE RANGIONE	
To Whom Paid	MO	DAY	YEAR	
CHESTER FINE ARTS CENTER EAST				
Mailing Address	5	2	2014	\$ 60.00
City CHESTER	State PA	Zip Code (Plus 4) 19013	Description of Expenditure PURCHASE OF 3 JAZZ DINNER TICKETS	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.				PAGE TOTAL \$ 960.00

