### **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 200	02149			Rep File			CAN	DIE	DATE		COMM	4ITTEE	<b>✓</b>	LOB	BYIST		
Name of Filing C	ommittee, Cand	idate or L	obbyist:		FRIE	ND	S OF	THADD	EU	JS KIR	KLAI	ND						
Street Address:	P.O. BOX 7	55																
City:	CHESTER						State:			PA			<b>Zip Code:</b> 19016					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2	2.	30 DA		P	OST-	3. <b>X</b>		AMENDM REPORT?		Yes		lo	<b>/</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	<u>-</u>	5.	30 DA		P	OST-	6.		TERMINA REPORT?		Yes	١	lo	<b>\</b>
report type)	ANNUAL REPOR	7.	<b>Year</b> 2014					NG MET CHECK		_			PAPER		$\checkmark$	DISK	ETTE	
Name of Office S	ought by Candid	late:						DATE	OI	F ELE	CTIC	N	District Number	Office Code	Pai	rty Cod	e Cour	
								МО		DAY	ΥI	EAR		•			•	
								1	11		4	2014		(SEE INS	TRUCTI	ONS FO	R CODES	5)
Summary of		МО	DAY	YEAR	2			МО		DAY	YI	EAR	FO	R OFFIC	E USE	ONL	7	
Expenditures	trom:		5 6	2	014	Т	0		6		9	2014						
A. Amount Bro	ught Forward Fr	om Last R	Report				\$				30,0	034.03						
B. Total Monetary Contributions And Receipts (From Schedule I)							\$			2,750.00								
C. Total Funds Available (Sum Of Lines A and B)									32,	784.03								
D. Total Expenditures (From Schedule III)							\$				20,5	39.00						
E. Ending Cash	Balance (Subtra	act Line D	From Line	C)			\$				12,2	245.03						
F. Value Of In-	Kind Contributio	ns Receiv	ed (From S	chedu	le II	)	\$					0.00						
G. Unpaid Debt	s And Obligation	ns (From	Schedule IV	/)			\$					0.00		,				
				AFF	IDA	\VI	ΓSE	CTIO	N									
PART I - If this is			_															
I swear (or affirm) correct and comple		ncluding th	e attached sc	hedules	s filed	l on	paper	or by ele	ectr	onic m	edium	, are to t	he best of	my knov	vledge	and be	lief , tr	ue
Sworn to and subs	cribed before me t day of	his	20						-		5	Signature	of Persoi	n Submitt	ing Re	port		_
	Signa	ture					-		-				Print	ed Name				_
My Commission Ex	pires						_		-				Emai	I				
	мо	D	AY	YR						Are	ea Cod	de	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a ca	ndidate's	authorized	Comn	nitte	e, C	andid	ate sha	all s	sign he	ere.							
I swear (or affirm) No 320) as amende		f my knowl	edge and beli	ief this	polit	ical	comm	ittee has	s no	ot viola	ted ar	y provis	ions of the	e act of Ju	ine 3,1	937 (P	.L. 133	з,
Sworn to and subsc		is	20									s	ignature o	f Candida	ite			_
-	day of		_ 20				-						Printe	d Name				-
	Signatur	e					-		_									_
My Commission Exp	ires												Emai	I				
	МО	D	AY	YR			•			Area	Code		Da	ytime Te	elephor	ne Num	ber	_

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF THADDEUS KIRKLAND	From:	<u>5/6/201</u>	<u>4</u> To:	6/9/2014
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)			\$	250.00
TOTAL for the Reporting	Period	(2)	\$	250.00
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)			\$	2,500.00
TOTAL for the Reporting	Period	(3)	\$	2,500.00
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 1, Page 2, Pa			\$	2,750.00

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

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

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 Candidate

**Reporting Period** 

DATE

FRIENDS OF THADDEUS KIRKLAND

From:

<u>5/6/2014</u> **To:** 

6/9/2014

AMOUNT

Full Name of Contributor CARL EWALD			МО	DAY	YEAR	
Mailing Address 185 PINE DRIVE						\$ 250.00
City PHOENIVILLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19460	5	27	2014	

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

**PAGE TOTAL \$** 250.00

#### **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	ne of Filing Committee or Candidate						
FRIENDS OF THADDEUS KIRKLAND			Fror	m:	<u>5/6/2</u>	<u>014</u> To	: <u>6/9/2014</u>
				D	ATE		AMOUNT
Full Name of Contributor THOMAS F BEACH, JR				МО	DAY	YEAR	
Mailing 922 FAYETTE ST Address							<b>\$</b> 1,500.00
City CONSHOHOCKEN	<b>State</b> PA	<b>Zip Code (Plus</b> 194281560	s 4)	5	8	2014	
Employer Name				Occupat	tion		
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code (Plus 4)
Full Name of Contributor LIVIA SMITH				МО	DAY	YEAR	
Mailing 930 E. 18TH ST							<b>\$</b> 1,000.00
City CHESTER	<b>State</b> PA	Zip Code (Plus 19013	5 4)	5	13	2014	
Employer Name				Occupat	tion		
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.		\$	PAGE TOTAL 5 2,500.00

## 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	ting Perio	bd			
			From:			To:		
				D	ATE		AM	OUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	•	•		•	•	•	_	
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			PAG	GE TOTAL
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	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>5/6/2014</u> <b>To:</b>	6/9/2014
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, 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:			To:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Sche Section 2.	edule II, In-Kin	d Contributions Deta	iled Sum	mary Pag	je,		PAGE TOTAL
Section 2.						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate					Re	porting l	Period			
					Fro	om:		To:		
					•		DATE			AMOUNT
Full Name of Contributor						МО	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupa	ition		•	
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iption	of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, I	in-Kind	Contributi	ons De	etaile	ed				<b>PAGE TOTAL</b> 0.00

### STATEMENT OF EXPENDITURES

Name of Filing Committee or C	andidate		Reporti	ng Period				
FRIENDS OF THADDEUS KIRK	LAND		From	<u>5/0</u>	6/2014	То:	6/9/2014	
				DATE			AMOUNT	
<b>To Whom Paid</b> BRYN MAWR TRUST COMPANY			мо	DAY	YEAR			
Mailing Address 801 LANCA	STER AVE		5	6	2014	\$	500.00	
City BRYN MAWR	State	Zip Code (Plus 4)	Description of Expenditure					
DICIN MAWIX	PA	19010		HECK FROM				
To Whom Paid BRYN MAWR TRUST COMPANY			мо	DAY	YEAR			
Mailing Address 801 LANCA	STER AVE		5	6	2014	\$	15.00	
City BRYN MAWR State Zip Code (Plus 4)				otion of Exp	penditure			
	PA	19010						
To Whom Paid ANDREW NORTHERN			МО	DAY	YEAR			
Mailing Address 1115 MEAD	OOW LANE		5	9	2014	\$	1,000.00	
City CHESTER	State	Zip Code (Plus 4)	Descri	otion of Exp	penditure			
	PA	19013	1	IGN LITER			ION	
To Whom Paid ERIC BAYNE/ FOR BREGER FLO	DWERS		МО	DAY	YEAR			
Mailing Address 1826 MARS	SH ROAD		5	12	2014	\$	300.00	
City WILMINGTON	State	Zip Code (Plus 4)	Descri	otion of Exp	penditure	<u> </u>		
	DE	19810	_	ASE OF CA			OTHER'S DAY	
To Whom Paid CHESTER CITY DEMOCRATIC C	CAMPAIGN		мо	DAY	YEAR			
Mailing Address 403 AVENU	E OF THE STATES		5	14	2014	\$	250.00	
City CHESTER	State	Zip Code (Plus 4)	Descri	otion of Exp	penditure	·		
	<sub>DA</sub>	10012	1	_			T DDEAVEACT	

19013

PA

PURCHASE TICKETS FOR A TABLE AT BREAKFAST

							GE 12	
To Whom Paid DYNAGRAPHIX				DAY	YEAR			
Mailing Address 4324 TACKAWANNA ST			5	19	2014	\$	650.00	
City PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19124	Description of Expenditure PRINTING EXPENSE FOR PALM CARDS FOR ELECTION					
To Whom Paid LAW ENFORCEMENT CHAPLAINS OF DELAWARE COUNTY			МО	DAY	YEAR			
Mailing Address 214 EDWARDS ST			5	19	2014	\$	150.00	
City CHESTER	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19013		Description of Expenditure ADVERTISEMENT AND TICKET				
To Whom Paid FRIENDS OF VANESSA BROWN			МО	DAY	YEAR			
Mailing Address			5	20	2014	\$	500.00	
City PHILADELPHIA	<b>State</b> PA	Zip Code (Plus 4)	Description of Expenditure CAMPAIGN DONATION					
To Whom Paid CASH			МО	DAY	YEAR			
Mailing Address			5	20	2014	\$	13,000.00	
City	State	Zip Code (Plus 4)	Description of Expenditure ELECTION DAY EXPENSES					
To Whom Paid ANDREW NORTHERN			МО	DAY	YEAR			
Mailing Address 1115 MEADON LANE				27	2014			
1115 MEADON	LANE		5	2	2014	\$	2,500.00	
City CHESTER	State PA	<b>Zip Code (Plus 4)</b> 19013	Descrip	tion of Exp	enditure		2,500.00 TELECTION	
TITO MEADON	State		Descrip	tion of Exp	enditure			
City CHESTER  To Whom Paid	State PA		<b>Descrip</b> CAMPA	otion of Exp IGN WORK	penditure C DURING			

To Whom Paid POSTMASTER			МО	DAY	YEAR			
Mailing Address			6	2	2014	\$	49.00	
City CHESTER	State	Zip Code (Plus 4)	Description of Expenditure STAMPS					
	PA	19013						
To Whom Paid PHILADELPHIA OIC			МО	DAY	YEAR			
Mailing Address 1231 NORTH BROAD ST			6	5	2014	\$	125.00	
City PHILADELPHIA	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	19122	50TH ANNIVERSARY GALA TICKETS					
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL	
						\$	20,539.00	