

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: P.O. BOX 755												
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.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.X	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	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	Party Code	County Code
						MO	DAY	YEAR				
						11	4	2014				
									(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		9	16	2014		10	20	2014				
A. Amount Brought Forward From Last Report						\$			1,498.03			
B. Total Monetary Contributions And Receipts (From Schedule I)						\$			4,800.00			
C. Total Funds Available (Sum Of Lines A and B)						\$			6,298.03			
D. Total Expenditures (From Schedule III)						\$			1,935.00			
E. Ending Cash Balance (Subtract Line D From Line C)						\$			4,363.03			
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>9/16/2014</u> To: <u>10/20/2014</u>

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)	\$ 300.00
TOTAL for the Reporting Period (2)	\$ 300.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 1,000.00
All Other Contributions (Part D)	\$ 3,500.00
TOTAL for the Reporting Period (3)	\$ 4,500.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 4,800.00
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

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 FRIENDS OF THADDEUS KIRKLAND	Reporting Period From: <u>9/16/2014</u> To: <u>10/20/2014</u>
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				DATE			AMOUNT	
Full Name of Contributor PSECU				MO	DAY	YEAR	\$ 100.00	
Mailing Address 1500 ELMERTON AVE				10	17	2014		
City HARRISBURG		State PA	Zip Code (Plus 4) 171109214					

Full Name of Contributor			MO	DAY	YEAR	\$	200.00
MARY WALLACE HEWLETT							
Mailing Address			10	20	2014		
808 BRANDYWINE RD							
City	DOWNINGTOWN	State	Zip Code (Plus 4)				
		PA	19335				

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

PAGE TOTAL
\$ 300.00

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
FRIENDS OF THADDEUS KIRKLAND	From: <u>9/16/2014</u> To: <u>10/20/2014</u>

				DATE		AMOUNT	
Full Name of Contributing Committee 1776 PAC				MO	DAY	YEAR	\$ 500.00
Mailing Address 3031 WALTON RD SUITE 201				9	17	2014	
City PLYMOUTH MEETING	State PA	Zip Code (Plus 4) 19462					
Full Name of Contributing Committee PECO PAC				MO	DAY	YEAR	\$ 500.00
Mailing Address 2301 MARKET ST				9	30	2014	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103					

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

PAGE TOTAL
\$ 1,000.00

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>9/16/2014</u> To: <u>10/20/2014</u>
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
NICHOLAS SAKIEWICZ							
Mailing Address 1165 AVONLEA CIR				10	9	2014	\$ 2,500.00
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				MO	DAY	YEAR	
LIVIA SMITH							
Mailing Address 930 E. 18TH ST				10	16	2014	\$ 1,000.00
City CHESTER	State PA	Zip Code (Plus 4) 19013					
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
\$ 3,500.00

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
	<div style="display: flex; justify-content: space-between;"> From: To: </div>

				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>9/16/2014</u> To: <u>10/20/2014</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:
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			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 III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF THADDEUS KIRKLAND	From <u>9/16/2014</u> To: <u>10/20/2014</u>

DATE				AMOUNT		
To Whom Paid ANDREW NORTHERN			MO	DAY	YEAR	\$ 350.00
Mailing Address 1115 MEADOW LANE			9	16	2014	
City CHESTER	State PA	Zip Code (Plus 4) 19013	Description of Expenditure CAMPAIGN WORK			
To Whom Paid CASH			MO	DAY	YEAR	\$ 100.00
Mailing Address			9	22	2014	
City	State	Zip Code (Plus 4)	Description of Expenditure POSTAGE			
To Whom Paid DYNAGRAPHIX			MO	DAY	YEAR	\$ 485.00
Mailing Address 4834 TACKAWANNA ST			9	25	2014	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19124	Description of Expenditure ELECTION DAY PALM CARD EXPENSE			
To Whom Paid MICHAEL MILLER - INTERNET CAFE			MO	DAY	YEAR	\$ 400.00
Mailing Address 512 AVENUE OF THE STATES			10	10	2014	
City CHESTER	State PA	Zip Code (Plus 4) 19016	Description of Expenditure DOWN PAYMENT FOR OCTOBER FUND RAISER VENUE			
To Whom Paid BRIAN KIRKLAND			MO	DAY	YEAR	\$ 500.00
Mailing Address 1006 W. 7TH ST			10	10	2014	
City CHESTER	State PA	Zip Code (Plus 4) 19019	Description of Expenditure BEVERAGE EXPENSE FOR OCTOBER FUNDRAISER			

To Whom Paid ISLAMIC CENTER OF CHESTER, INC			MO	DAY	YEAR	
Mailing Address 14 E. 7TH ST			10	14	2014	
City CHESTER	State PA	Zip Code (Plus 4) 19013	Description of Expenditure PATRONAGE AD			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 1,935.00

