# **Campaign Finance Report**

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

Filer Identificat	tion 2014	40351			Report Filed B		CANDI	DATE	1	СОММ	ITTEE	<	LOBI	BYIST	
	Committee, Candio	date or L	obbyist:			-	DAVE WH	HITE							
Street Address	Street Address:														
City:	SWARTHMOR	RE					State:	PA			Zip Co	<b>de:</b> 19	081		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-		30 DA PRIM		POST- 3.			AMENDN REPORT		Yes	No	, 🔨
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	_			30 DA		POST- 6.			TERMIN/ REPORT		Yes	Nc	· 🗸
report type)	ANNUAL REPORT	<b>r</b> 7.	<b>Year</b> 2014				NG METHO				PAPER		$\checkmark$	DISKE	TTE
Name of Office	Sought by Candida	ate:					DATE O	F ELEC	CTION		District Number	Office Code	Par	ty Code	County Code
							мо	DAY	YEA	R			REP		23
							11		4 2	2014		(SEE INS	STRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR			мо	DAY	YEA	R	FC	OR OFFIC	E USE	ONLY	
Expenditure	s from:		4 1	. 20	014 <b>T</b>	0	5		5 2	2014					
A. Amount Bro	ought Forward Fro	m Last R	eport			\$		1	164,63	5.00					
B. Total Mone	tary Contributions	And Rec	eipts (Fron	n Sche	dule I)	\$				0.00					
C. Total Funds	s Available (Sum O	of Lines A	and B)			\$		1	164,63	5.00					
D. Total Exper	nditures (From Sch	nedule II	1)			\$			8,000	0.00					
E. Ending Cas	h Balance (Subtra	ct Line D	From Line	C)		\$		1	56,635	5.00					
	-Kind Contribution		•		le II)	\$			(	0.00					
G. Unpaid Deb	ots And Obligations	s (From S	Schedule I\	/)		\$			(	0.00					
				AFF	IDAVI	Г SE	CTION								
	is a Committee rep ) that this report, inc		-							-		f my knou	vladaa	and hali	of true
correct and comp	lete.	•	e attached sc	inequies	s mea on j	рареі	or by elect		aiuii, a		ne best o	i iliy kilov	vieuge		er, true
Sworn to and sub	scribed before me th day of	is	20						Sig	nature	of Perso	n Submitt	ing Rep	oort	
						-					Prin	ted Name			
My Commission I	Signat Expires	ure									Ema	il			
	мо	D	AY	YR		-		Are	a Code		Daytin	ne Teleph	one Nu	mber	
Part II- If this is	s a report of a can	didate's	authorized	Comm	nittee, Ca	andid	ate shall	sign he	ere.						
I swear (or affirm No 320) as amend	) that to the best of led.	my knowle	edge and bel	ief this	political	comm	ittee has n	ot violat	ed any p	provisi	ons of th	e act of Ju	ine 3,1	937 (P.I	1333,
Sworn to and subscribed before me this Signature of Candidate															
·						-					Printe	ed Name			
My Commission Ex	Signature					-					Ema	il			
	мо	D	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 Period** FRIENDS OF DAVE WHITE From: <u>4/1/2014</u> **To:** <u>5/5/2014</u> 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting 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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 0.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

# 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			м	10	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 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 Candidate Reporting Period										
			From: To							
					DATE			AMOUNT		
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address		_					\$	0.00		
City	State	Zip Code (Plus 4	•)							
								PAGE TOTAL		
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2. \$										

# 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						
				То:					
				DA	TE		A	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR		0.00	
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section							\$	0.00	

## 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				Reporting Period						
From:				m:			То:			
				D	ATE	АМ	IOUNT			
Full Name of Contributor				мо	DAY	YEAR	\$	0.00		
Mailing Address										
City	State	Zip Code (Pl	ıs 4)							
Employer Name				Occupation						
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)		
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.							P#	<b>AGE TOTAL</b> 0.00		

## 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							
				m: To:						
				D	ATE			AMOUNT		
Full Name				мо	DAY	YEAR	\$	0	.00	
Mailing Address										
City	State	Zip Code (	Plus 4)							
Receipt Description										
								PAGE TOTAL		
inter 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 DAVE WHITE	From:	<u>4/1/2014</u> <b>то:</b>	<u>5/5/2014</u>							
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR										
TOTAL for the Reporting Pe	riod (1)	\$	0.00							
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)									
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, 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:			То:		
				DATE			AMOUNT		
Full Name of Contributor				DAY	YEAR				
Mailing Address		_				<b>7</b> \$		0.00	
City	State	Zip Code (Plus 4)							
Description of Contribution:			1						
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:		То:				
· · · · · · · · · · · · · · · · · · ·					DATE		AMOUNT			
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address							<b>\$</b> 0.00			
City	State	Zip Code(Plus 4)								
Employer of Contributor		•		Occupa	tion		•			
Employer Mailing Address/Principal Place of Business City			State	e Zip	Code(Plus 4)	Descri	ption of Contribution			
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-Kind	Contributions D	etaile	d			<b>PAGE TOTAL</b> 0.00			

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period			
FRIENDS OF DAVE WHITE				<u>4/:</u>	<u>1/2014</u>	То:	<u>5/5/2014</u>
				DATE			AMOUNT
To Whom Paid				DAY	YEAR		
DELAWARE COUNTY REPUBLICAN FINA	NCE COMMITTEE		мо				
Mailing Address				23	2014	\$	3,000.00
City MEDIA State Zip Code (Plus 4)				tion of Exp	enditure		
	PA	19063	CONTRI	BUTION			
To Whom Paid			мо	DAY	YEAR		
FRIENDS OF JAMIE SANTORA					1 EAN		
Mailing Address			3	18	2014	\$	5,000.00
City MEDIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA	19063	CONTRI	BUTION			
							PAGE TOTAL
Enter Grand Total of Expenditures of	on Page 1, Report C	over Page, Item I	<b>D</b> .			\$	8,000.00