# **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	20140	0351		-	Repo		CAND	DATE	СОМ	MITTEE	✓	LOB	BYIST		
Number :						Filed										
Name of Filing	Committee, C	Candida	ate or Lo	obbyist:		WHITE	, DAV	'E FRIEND	IS OF							
Street Address:								_			_					
City:	MEDIA							State:	PA		Zip Co	ode: 19063				
TYPE OF REPORT	6TH TUESDA PRE-PRIMAR		1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 D PRIM		POST- 3	3.	AMENDMENT REPORT?		Yes	No	· 🗸	
(place X to the right of	6TH TUESDA PRE-ELECTIO		4.	2ND FRIDA ELECTION	y pre	≣- 5.	30 D ELEC	DAY CTION	POST- 6	5.	TERMIN REPORT		Yes	No	° <b>√</b>	
report type)	ANNUAL RE	PORT	7. <b>X</b>	<b>Year</b> 2016				NG METH			PAPER		$\checkmark$	DISK	TTE	
Name of Office	 Sought by Ca	andidat	e:					DATE C	OF ELEC	TION	District Number		Par	ty Code	County	
								мо	DAY	YEAR			I			
									. 8	3 2016	]	(SEE INS	STRUCTI	ONS FOR	CODES)	
Summary of		and	мо	DAY	YEAR	2		мо	DAY	YEAR	FC	OR OFFIC	E USE	ONLY		
Expenditure	s from:		1	1 29	2	016	Ю	12	2 31	1 2016	1					
A. Amount Bro	ought Forwar	d From	ı Last R	eport			\$	5	3	10,380.12						
B. Total Monet	tary Contribu	itions A	and Rec	eipts (Fron	1 Sche	dule I)	4	\$ 10,000.00								
C. Total Funds	Available (S	Sum Of	Lines A	and B)			4	\$	3	20,380.12						
D. Total Exper	nditures (Fro	m Sche	dule II	[)			4	\$		3,000.00	]					
E. Ending Cast	h Balance (Si	ubtract	Line D	From Line	C)			\$	31	17,380.12						
F. Value Of In-	-Kind Contrib	outions	Receive	ed (From S	chedu	le II)	4	\$		0.00						
G. Unpaid Deb	ots And Oblig	ations (	(From S	chedule IV	)		4	\$		0.00						
					AFF	IDAV	IT SE	ECTION								
PART I - If this i	is a Committe	ee repo	ort, trea	surer sign	here.	If this i	s a Ca	ndidate r	eport, ca	ndidate si	gn here.					
I swear (or affirm correct and comp		ort, inclu	uding the	attached sc	hedule	s filed or	n paper	r or by elect	tronic mea	lium, are to	the best o	of my knov	vledge	and bel	ief , true	
Sworn to and sub	scribed before day of	me this		20						Signatur	e of Perso	on Submitt	ing Rep	oort		
		Signatur	e				_				Prir	nted Name				
My Commission E	xpires										Ema	ail				
	мо	)	D/	AY	YR				Area	Code	Daytin	ne Teleph	one Nu	mber		
Part II- If this is	s a report of	a cand	idate's	authorized	Comm	nittee,	Candio	date shall	sign her	e.						
I swear (or affirm No 320) as amend		est of m	y knowle	edge and beli	ef this	politica	l com	nittee has r	not violate	d any provis	ions of th	ie act of Ju	ine 3,1	937 (P.I	L. 1333,	
Sworn to and subscribed before me this day of 20										5	Signature	of Candida	ite			
							_				Printe	ed Name				
	-	nature					_									
My Commission Ex	pires										Ema	aii				
		мо	D	AY.	YR	1	_		Area C	ode	D	aytime Te	elephor	e Numb	ber	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	g Period			
WHITE, DAVE FRIENDS OF	From:	<u>11/29/20</u>	<u>16</u> <b>To:</b>	<u>12/31/2016</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g 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)	\$	0.00		
TOTAL for the Reporting	\$	0.00		
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	10,000.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	g Period	(3)	\$	10,000.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)				
TOTAL for the Reporting	g 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 Pa			\$	10,000.00

# 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				orting I	Period		
		·			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	te		Rep	orting P	eriod					
			Fror	m:		Тс	):			
					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, Detail	ed Summary Pag	je, Se	ection 2			\$	0.00		

#### PAGE 5

# 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	Name of Filing Committee or Candidate			Reporting Period						
WHITE, DAVE FRIENDS OF				From:	<u>11/29/2016</u> <b>To:</b>			1	<u>12/31/2016</u>	
					DA	TE			AMOUNT	
Full Nam	ne of Contributing Committee				мо	DAY	YEAR			
IBEW PA	AC VOLUNTARY FUND					2		\$	10,000.00	
Mailing /	Address				12	31	2016		,	
City V	VASHINGTON	State	Zip Cod	e (Plus 4)	12		2010			
		DC	20001							
			_	<b>a</b>	_				PAGE TOTAL	
Enter G	rand Total of Part C on Sche	dule I, Detailed Sur	nmary Pa	age, Sectio	n 3.			\$	10,000.00	

## 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				Reporting Period					
Fr					From:				
				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 Sche	dule I, Detailed Su	ummary Page	e, Sectio	on 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							
			From: To:							
				D	ATE			AMOUNT		
Full Name				мо	DAY	YEAR	\$		0.00	
Mailing Address										
City	State	Zip Code (	Plus 4)							
Receipt Description	·	•					•			
		_						PAGE TO	TAL	
Enter Grand Total of Part E on Sched	ule 1, Detailed Sumn	nary 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

#### E THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THING DURING THE REPORTING PERIOD.

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting Perio	d	
WHITE, DAVE FRIENDS OF	From:	<u>11/29/2016</u> то:	<u>12/31/2016</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	ſF)		
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 Ro			Reporting Period					
F						То:		
				DATE			AMOUNT	
Full Name of Contributor			мо	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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,		PAGE TOTA	AL.
						\$		0.00

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

Name of Filing Committee or Candidate					Reporting Period				
						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	ation				
Employer Mailing Address/Principal Plac	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	l Contributions D	etaile	d			<b>PAGE TOTAL</b> 0.00		

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate				ng Period			
WHITE, DAVE FRIENDS OF	From <u>11/29/2016</u> To				<u>12/31/2016</u>		
		AMOUNT					
To Whom Paid	мо	DAY	YEAR				
FRIENDS OF JACK WHELAN			MC	2	12/		
Mailing Address			11	30	2016	\$	1,000.00
City MEDIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	19063	CONTRI	BUTION			
To Whom Paid			мо	DAY	YEAR		
CHESTER CITY REGULAR REPUBLICAN	CAMPAIGN COMMITT	EE					
Mailing Address			12	16	2016	\$	2,000.00
City CHESTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	19013	CONTRI	BUTION				
							PAGE TOTAL
Enter Grand Total of Expenditures of	on Page 1, Report C	over Page, Item I	).			\$	3,000.00