Campaign Finance Report

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

Filer Identification 2002149						rt By :	CA	NDI	DATE	со	MMITTEE	 ✓ 	LOB	BYIST	
	Committee, Candid	ate or L	obbyist:			-	F THAD	DEL	JS KIRK						
Street Address:															
City:	CHESTER						State: PA Zip Code:					ode: 19	016		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.		DAY MARY	F	POST- 3	3.	AMEND REPOR		Yes	No) Y
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	O FRIDAY PRE- 5. 30 DAY				P	POST- 6	.	TERMII REPOR	NATION T?	Yes	No) 🔨
report type)	ANNUAL REPORT	7. X	Year 2016				ING ME) CHEC				PAPER	1	\checkmark	DISK	TTE
Name of Office S	Sought by Candida	te:			ł		DAT	ΈO	F ELEC	TION	Distric		Pai	ty Code	County
							мо		DAY	YEAR					1
								11	8	3 20	16	(SEE IN	STRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR	Ł		мо		DAY	YEAR	F	OR OFFIC	CE USE	ONLY	
Expenditures	s from:		11 29	2	016	то		12	31	L 20	16				
A. Amount Bro	ught Forward Fror	n Last R	leport				\$			715.0)2				
B. Total Monet	ary Contributions	And Rec	eipts (Fron	1 Sche	dule I))	\$			0.0	00				
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			715.0	02				
D. Total Expen	ditures (From Sch	edule II	1)				\$			552.0	8				
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)			\$			162.9	2				
F. Value Of In-	Kind Contributions	s Receiv	ed (From S	chedu	le II)		\$			0.0	0				
G. Unpaid Deb	ts And Obligations	(From	Schedule IV	/)			\$			0.0	00				
				AFF	IDAV	IT S	ECTI	NC							
	s a Committee rep														
I swear (or affirm correct and compl) that this report, incl ete.	luding th	e attached sc	hedule	s filed o	n pape	er or by o	electi	ronic med	lium, are	to the best	of my know	wledge	and bel	ef , true
Sworn to and subs	scribed before me this day of	5	20							Signat	ure of Pers	on Submit	ting Re	port	
	Signatu	re				_					Pri	nted Name	9		
My Commission E	xpires										Em	ail			
	мо	D	AY	YR					Area	Code	Dayti	me Teleph	one Nu	mber	
Part II- If this is	a report of a can	didate's	authorized	Comn	nittee,	Cand	idate s	hall	sign her	e.					
I swear (or affirm) No 320) as amend) that to the best of n ed.	ny knowl	edge and beli	ef this	politica	il com	imittee h	nas n	ot violate	d any pro	visions of t	he act of J	une 3,1	937 (P.I	1333,
Sworn to and subso	cribed before me this day of		20								Signature	of Candid	ate		
						_					Prin	ted Name			
My Commission Exp	Signature										Em	ail			
	мо	D	AY	YR	1	_			Area Co	ode		Daytime T	elephor	ne Numt	per

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Reportin	g Period	iod				
From:	<u>11/29/2</u>	2016 To:	<u>12/31/2016</u>			
ng Period	(1)	\$	0.00			
		\$	0.00			
All Other Contributions (Part B)						
TOTAL for the Reporting Period (2)						
		1				
		\$	0.00			
		\$	0.00			
ng Period	(3)	\$	0.00			
=)						
ng Period	(4)	\$	0.00			
		\$	0.00			
	rg Period ng Period ng Period ng Period E) ng Period	ng Period (1)	From: 11/29/2016 To: ng Period (1) \$ s \$ \$ ng Period (2) \$ s \$ \$ ng Period (2) \$ s \$ \$ ng Period (3) \$ s \$ \$ ng Period (4) \$ and enter amount \$ \$			

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					
F				From: To:					
		·			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	2.		\$	0.00	

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		ŀ	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 Sched	lule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	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				
			Froi	n:		Т):	
				D	ATE		АМ	IOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Pl	ıs 4)					
Employer Name				Occupat	tion			
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#	AGE TOTAL 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			Report	ing Perio	d			
			From:			To:		
				D	ATE		AMOUNT	
Full Name				мо	DAY	YEAR	\$ 0.0	00
Mailing Address								
City	State	Zip Code (Plus 4)					
Receipt Description	·							
		_	.				PAGE TOTAL	
Enter Grand Total of Part E on Schedu	lie 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

DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Perio	od	
FRIENDS OF THADDEUS KIRKLAND	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	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:			То:	
				DATE			AMOUNT
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address	-	_				\$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:				•			
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	ie,	F	PAGE TOTAL
						\$	0.00

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

Name of Filing Committee or Candidate			Rep	porting I	Period			
				m:		То:		
					DATE		AMOUNT	
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$ 0.00	
City	State	Zip Code(Plus 4)						
Employer of Contributor		•		Occupa	ation			
Employer Mailing Address/Principal Plac	e 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	d Contributions D	etaile	d			PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period					
FRIENDS OF THADDEUS KIRKLAND				<u>11/29</u>	9/2016	То:	<u>12/31/2016</u>		
· · · · · · · · · · · · · · · · · · ·				DATE AMOUNT					
To Whom Paid			мо	DAY	YEAR				
CASH									
Mailing Address			12	30	2016	\$	502.08		
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
			CAMPAI	GN EXPEN	SES				
To Whom Paid			мо	DAY	YEAR				
3 SHADES OF BLACKNESS			MC						
Mailing Address			6	21	2016	\$	50.00		
City CHESTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•			
	PA	19013	EVENT	TICKETS					
							PAGE TOTAL		
Enter Grand Total of Expenditures o	on Page 1, Report C	over Page, Item I) .			\$	552.08		