Campaign Finance Report

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

Filer Identificat Number :	ion 2014	0351			Report Filed B		CANDI	DATE		СОМІ	MITTEE	✓	LOBI	BYIST		
	Committee, Candida	ate or Lo	obbyist:			-	DAVE WI	HITE								
Street Address:																
City:	MEDIA						State:	PA			Zip Code: 19063					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 D/ PRIM		POST-	3. X		AMENDMENT REPORT?		Yes	N	0	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	5.	30 D/ ELEC		POST- 6.			TERMINATION REPORT?		Yes	N	0	\checkmark
report type)	ANNUAL REPORT	7.	Year 2017				NG METHO CHECK O				PAPER		\checkmark	DISK	ETTE	
Name of Office	L Sought by Candidat	te:					DATE O	F ELE(CTIO	N	District Number	Office Code	Par	ty Code	Cou	
							мо	DAY	YE	AR						
							11		7	2017		(SEE INS	TRUCTI	ONS FOR	CODES	5)
Summary of Expenditures	Receipts and	мо	DAY	YEAR			мо	DAY	YE	AR	FC	OR OFFIC	E USE	ONLY		
	5 110111.		5 2	2	017 T	0	6		5	2017						
	ought Forward From		-			\$		2	-	05.12	1					
B. Total Monet	ary Contributions /	And Rec	eipts (Fron	1 Sche	dule I)	\$	38,520.00									
C. Total Funds	Available (Sum Of	Lines A	and B)			\$	5	2	441,5	525.12	1					
D. Total Expen	ditures (From Sche	edule II	1)			\$	5		42,4	51.15						
	n Balance (Subtract			2		\$		3	899,0	73.97	-					
	Kind Contributions		•		le II)	\$		0.00								
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	()		\$	5			0.00						
							CTION									
	s a Committee report, incl	•	-								-	of my knov	vledge	and bel	ief , tı	rue
correct and comp	ete. scribed before me this											-				_
Sworn to and sub	day of	•	20						S	ignatur	e of Perso	n Submitt	ing Rep	oort		
	Signatu	re				_					Prir	ited Name				-
My Commission E	-					_					Ema	il				_
	мо	D	AY	YR				Are	ea Cod	e	Daytin	ne Teleph	one Nu	mber		
	a report of a cance) that to the best of m				•			•		y provis	ions of th	e act of Ju	ine 3,1	937 (P.	L. 133	з,
-	cribed before me this									5	ignature	of Candida	ite			-
	day of		20			_										
	6t					_		Printed Name								
My Commission Ex	Signature pires							Email					-			
	мо	D	AY	YR		-		Area	Code		D	aytime Te	elephon	e Num	ber	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF DAVE WHITE	From:	<u>5/2/201</u>	<u>7</u> To:	<u>6/5/2017</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	20.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	200.00
All Other Contributions (Part B)			\$	500.00
TOTAL for the Reporting) Period	(2)	\$	700.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	14,000.00
All Other Contributions (Part D)			\$	18,800.00
TOTAL for the Reporting	g Period	(3)	\$	32,800.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	5,000.00
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	id enter am ge, Item B.	ount)	\$	38,520.00

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 of	or Candidate		Reporting Period						
FRIENDS OF DAVE WHITE Fro				om:	<u>5/2/20</u>	1	<u>6/5/2017</u>		
					DATE			AMOUNT	
Full Name of Contributing Co 159TH VICTORY COMMITTEE				мо	DAY	YEAR			
Mailing Address				5	22	2017	\$	200.00	
City MEDIA	State PA	Zip Code (Plus 4 19063	4)	5		2017			
			_					PAGE TOTAL	
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.						\$	200.00		

	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										
FRIENDS OF DAVE WHITE					m:	<u>5/2/</u>	2017 T o):	<u>6/5/2017</u>	
						DATE			AMOUNT	
	ame of Contributor ARD E. BRAENDLE				мо	DAY	YEAR			
Mailin	g Address	_	-					\$	100.00	
City	KING OF PRUSSIA	State PA	Zip Code (Plus 4 19406)	5	22	2017			
	ame of Contributor M. GALLAGHER				мо	DAY	YEAR			
Mailin	g Address							\$	200.00	
City	DOYLESTOWN	State PA	Zip Code (Plus 4 18902)	5	22	2017			
	ame of Contributor A BRADBURD				мо	DAY	YEAR			
Mailin	g Address							\$	200.00	
City	BRYN MAWR	State PA	Zip Code (Plus 4 19010)	5	22	2017			
						-	-		PAGE TOTAL	

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

500.00

\$

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	e of Filing Committee or Candidate			Reporting	J Period			
FRIE	NDS OF DAVE WHITE			From:	<u>5</u> /	<u>/2/2017</u>	То:	<u>6/5/2017</u>
R					DA	TE		AMOUNT
Full N	lame of Contributing Committee				мо	DAY	YEAR	
RACE	STREET PAC							\$ 7,500.00
Mailir	ng Address				5	22	2017	
City	KINGSTON	State PA	Zip Cod 18704	e (Plus 4)				
Full N	lame of Contributing Committee	ł			мо	DAY	YEAR	
SPRI	NGFIELD REPUBLICAN PARTY				MO			\$ 2,000.00
Mailing Address			5	22	2017			
City	MEDIA	State	Zip Cod	e (Plus 4)		22	2017	
		РА	19063					
Full Name of Contributing Committee					мо	DAY	YEAR	
NORTHEAST REGIONAL COUNCIL OF CARP. PEC-PA					MO			\$ 2,000.00
Mailii	ng Address				5	22	2017	,
City	EDISON	State	Zip Cod	e (Plus 4)			2017	
		LΟ	08837					
Full N	lame of Contributing Committee				мо	DAY	YEAR	
PA FL	JTURE FUND				110			\$ 1,000.00
Mailii	ng Address				5	22	2017	
City	HARRISBURG	State	Zip Cod	e (Plus 4)			2017	
		PA	17112					
	lame of Contributing Committee JTURE FUND				мо	DAY	YEAR	¢ 1.000.00
Mailir	ng Address				_			\$ 1,000.00
City	HARRISBURG	State	Zip Cod	e (Plus 4)	5	22	2017	
		РА	17112					
Full N	lame of Contributing Committee	•			мо	DAY	YEAR	
LABC	LABORERS DISTRICT COUNCIL PAC						- 2711	\$ 500.00
Mailir	Mailing Address				5	22	2017	
City	PHILADELPHIA	State	Zip Cod	e (Plus 4)				
		РА	19123					

PAGE TOTAL

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

14,000.00

\$

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			Rep	orting Pe	riod				
FRIE	NDS OF DAVE WHITE			From	n:	<u>5/2/2</u>	<u>017</u> To	<u>7</u> To: <u>6/5/2017</u>		
					DA	ATE		AMOUNT		
Full N	ame of Contributor				мо	DAY	YEAR	L		
SHAR	ON DAVIS				MO	DAT	TEAR	\$ 500.00		
Mailin	ng Address				5	22	2015			
City	WEST CHESTER	State	Zip Code (Plu	ıs 4)			2020			
		PA	19380							
Emplo	oyer Name				Occupat	tion				
Employer Mailing Address/Principal Place of Business City				State		Zip Code (Plus 4)				
Full N	ame of Contributor				мо	DAY	YEAR			
JOHN	J. SUCHER				МО	DAT	ILAK	\$ 500.00		
Mailin	ng Address				5	22	2017			
City	WALLINGFORD	State	Zip Code (Plu	ıs 4)						
		PA	19086							
Emplo	oyer Name				Occupat	tion				
Emplo	oyer Mailing Address/Principal Plac	e of Business	City			State		Zip Code (Plus 4)		
Full N	ame of Contributor		I		мо	DAY	YEAR	L 100.00		
CHRIS	STOPHER M. HALLMAN				MO	DAT	TLAK	\$ 400.00		
Mailin	ng Address				_					
City	BOYERTOWN	State			5	22	2017			
			Zip Code (Plu	ıs 4)	5	22	2017			
		PA	Zip Code (Plu 19512	ıs 4)	5	22	2017			
Emplo	oyer Name			ıs 4)	Occupat		2017			
	oyer Name oyer Mailing Address/Principal Plac	PA		ıs 4)			2017	Zip Code (Plus 4)		
Emplo Full N	oyer Mailing Address/Principal Plac	PA	19512	ıs 4)		tion	2017 YEAR	Zip Code (Plus 4)		
Emplo Full N JOYCE	oyer Mailing Address/Principal Place lame of Contributor E DATILLO	PA	19512	ıs 4)	Occupat	tion State				
Emplo Full N JOYCE Mailin	oyer Mailing Address/Principal Plac ame of Contributor E DATILLO ng Address	PA	19512 City		Occupat	tion State		Zip Code (Plus 4) \$ 400.00		
Emplo Full N JOYCE	oyer Mailing Address/Principal Place lame of Contributor E DATILLO	PA ce of Business State	19512 City Zip Code (Plu		Occupat	ion State DAY	YEAR	Zip Code (Plus 4) \$ 400.00		
Emplo Full N JOYCE Mailin City	ame of Contributor E DATILLO ag Address RIDLEY PARK	PA	19512 City		MO 5	iion State DAY 22	YEAR	Zip Code (Plus 4) \$ 400.00		
Emplo Full N JOYCE Mailin City Emplo	oyer Mailing Address/Principal Plac ame of Contributor E DATILLO ng Address	PA ce of Business State PA	19512 City Zip Code (Plu		Occupat	iion State DAY 22	YEAR	Zip Code (Plus 4) \$ 400.00		

ull Name of Contributor								
PAMELA CROSSIN				мо	DAY	YEAR	\$	400.00
Mailing Address				- 5	22	2015		
City SPRINGFIELD	State	Zi	p Code (Plus 4)	, J	22	2015		
	PA	19	9064					
Employer Name				Occupat	ion			
Employer Mailing Address/Principal	Place of Business		City		State		Zip Cod	le (Plus 4)
Full Name of Contributor				мо	DAY	YEAR	\$	400.00
NICHOLAS J. PLANTE							- · ·	
Mailing Address				5	22	2017		
City SPRINGFIELD	State		p Code (Plus 4)					
	ΙΡΑ	I 19	9064				I	
Employer Name				Occupat				
Employer Mailing Address/Principal Place of Business City				State		Zip Cod	le (Plus 4)	
Full Name of Contributor ROBERT J. BEDARD				мо	DAY	YEAR	\$	400.00
Mailing Address							1	
City SPRINGFIELD	State	Zi	p Code (Plus 4)	- 5	22	2017		
	PA		9064					
Employer Name	1 FA	• 13	9004	Occupat	ion		•	
Employer Mailing Address/Principal	Place of Business		City		State		Zin Cod	le (Plus 4)
			City		State			ie (Flus 4)
Full Name of Contributor				мо	DAY	YEAR	¢	300.00
Full Name of Contributor PAUL A. LYNCH				мо	DAY	YEAR	\$	300.00
				мо	DAY 22	YEAR 2017	\$	300.00
PAUL A. LYNCH	State	Zi	p Code (Plus 4)				\$	300.00
PAUL A. LYNCH Mailing Address	State PA		p Code (Plus 4) 9473				\$	300.00
PAUL A. LYNCH Mailing Address					22		\$	300.00
PAUL A. LYNCH Mailing Address City SCHWENKSVILLE	PA			- 5	22			300.00 le (Plus 4)
PAUL A. LYNCH Mailing Address City SCHWENKSVILLE Employer Name Employer Mailing Address/Principal Full Name of Contributor	PA		9473	- 5	22 :ion			le (Plus 4)
PAUL A. LYNCH Mailing Address City SCHWENKSVILLE Employer Name Employer Mailing Address/Principal Full Name of Contributor ROBERT MCGREEVY	PA		9473	- 5 Occupat	ion State	2017	Zip Cod	
PAUL A. LYNCH Mailing Address City SCHWENKSVILLE Employer Name Employer Mailing Address/Principal Full Name of Contributor ROBERT MCGREEVY Mailing Address	PA Place of Business	<u>19</u>	0473 City	- 5 Occupat	ion State	2017	Zip Cod	le (Plus 4)
PAUL A. LYNCH Mailing Address City SCHWENKSVILLE Employer Name Employer Mailing Address/Principal Full Name of Contributor ROBERT MCGREEVY	PA Place of Business State		p Code (Plus 4)	Occupat	ion State DAY	2017 YEAR	Zip Cod	le (Plus 4)
PAUL A. LYNCH Mailing Address City SCHWENKSVILLE Employer Name Employer Mailing Address/Principal Full Name of Contributor ROBERT MCGREEVY Mailing Address City WEST CHESTER	PA Place of Business		0473 City	- 5 Оссират	ion State DAY 22	2017 YEAR	Zip Cod	le (Plus 4)
PAUL A. LYNCH Mailing Address City SCHWENKSVILLE Employer Name Employer Mailing Address/Principal Full Name of Contributor ROBERT MCGREEVY Mailing Address City WEST CHESTER Employer Name	PA Place of Business State PA		City P Code (Plus 4) 0382	Occupat	ion State DAY 22 22	2017 YEAR	Zip Cod	le (Plus 4) 10,000.00
PAUL A. LYNCH Mailing Address City SCHWENKSVILLE Employer Name Employer Mailing Address/Principal Full Name of Contributor ROBERT MCGREEVY Mailing Address City WEST CHESTER	PA Place of Business State PA		p Code (Plus 4)	- 5 Оссират	ion State DAY 22	2017 YEAR	Zip Cod	le (Plus 4)
PAUL A. LYNCH Mailing Address City SCHWENKSVILLE Employer Name Employer Mailing Address/Principal Full Name of Contributor ROBERT MCGREEVY Mailing Address City WEST CHESTER Employer Name Employer Mailing Address/Principal Full Name of Contributor Full Name of Contributor	PA Place of Business State PA		City P Code (Plus 4) 0382	- 5 Оссират	ion State DAY 22 22	2017 YEAR	Zip Cod	le (Plus 4) 10,000.00 le (Plus 4)
PAUL A. LYNCH Mailing Address City SCHWENKSVILLE Employer Name Employer Mailing Address/Principal Full Name of Contributor ROBERT MCGREEVY Mailing Address City WEST CHESTER Employer Name Employer Mailing Address/Principal Full Name of Contributor DAVID W. COX	PA Place of Business State PA		City P Code (Plus 4) 0382	MO 5 0ccupat	ion State DAY 22 22 22 22 30 35 35	2017 YEAR 2015	Zip Cod	le (Plus 4) 10,000.00
PAUL A. LYNCH Mailing Address City SCHWENKSVILLE Employer Name Employer Mailing Address/Principal Full Name of Contributor ROBERT MCGREEVY Mailing Address City WEST CHESTER Employer Mailing Address/Principal Full Name of Contributor David Mailing Address Full Name of Contributor DAVID W. COX Mailing Address	PA Place of Business State PA Place of Business	10	City Code (Plus 4) 0382 City	MO 5 0ccupat	ion State DAY 22 22 22 22 30 35 35	2017 YEAR 2015	Zip Cod	le (Plus 4) 10,000.00 le (Plus 4)
PAUL A. LYNCH Mailing Address City SCHWENKSVILLE Employer Name Employer Mailing Address/Principal Full Name of Contributor ROBERT MCGREEVY Mailing Address City WEST CHESTER Employer Name Employer Mailing Address/Principal Full Name of Contributor DAVID W. COX	PA Place of Business State PA	10	City P Code (Plus 4) 0382	MO Occupat	ion State DAY 22 22 22 22 22 30 50 5tate	2017 YEAR 2015 YEAR	Zip Cod	le (Plus 4) 10,000.00 le (Plus 4)
PAUL A. LYNCH Mailing Address City SCHWENKSVILLE Employer Name Employer Mailing Address/Principal Full Name of Contributor ROBERT MCGREEVY Mailing Address City WEST CHESTER Employer Mailing Address/Principal Full Name of Contributor David Mailing Address Full Name of Contributor DAVID W. COX Mailing Address	PA Place of Business State PA Place of Business	19	City Code (Plus 4) 0382 City	MO Occupat	ion State DAY 22 22 22 22 22 30 50 5tate	2017 YEAR 2015 YEAR	Zip Cod	le (Plus 4) 10,000.00 le (Plus 4)
PAUL A. LYNCH Mailing Address City SCHWENKSVILLE Employer Name Employer Mailing Address/Principal Full Name of Contributor ROBERT MCGREEVY Mailing Address City WEST CHESTER Employer Mailing Address/Principal Full Name of Contributor David Mailing Address Full Name of Contributor DAVID W. COX Mailing Address	PA Place of Business State PA Place of Business Place of Business State	19	City P Code (Plus 4) 9382 City p Code (Plus 4)	MO Occupat	22 State DAY 22 22 22 22 30 22 30 22 22 22 22 22 22 22 22 22 2	2017 YEAR 2015 YEAR	Zip Cod	le (Plus 4) 10,000.00 le (Plus 4)

ame of Contributor				мо	DAV	VEAD		
ANN C. BABIN				мо	DAT	TEAR	\$	2,000.00
g Address				5	22	2017		
MEDIA	State	Zij	o Code (Plus 4)	J	22	2017		
	I _{PA}	19	063					
yer Name				Occupation				
Employer Mailing Address/Principal Place of Business City				State		Zip Code	e (Plus 4)	
Full Name of Contributor					DAY	VEAD		
L C. KILLION				мо	DAT	TEAR	\$	1,000.00
g Address				5	22	2017		
GLEN MILLS	State	Zij	o Code (Plus 4)	J	22	2017		
	I _{PA}	₁₉	342					
yer Name				Occupat	ion			
yer Mailing Address/Pri	ncipal Place of Business		City		State		Zip Code	e (Plus 4)
		_		_		Г	PA	AGE TOTAL
Grand Total of Part C	on Schedule I, Detailed	Sumn	nary Page, Sectio	on 3.			\$	18,800.00
	ANN C. BABIN g Address MEDIA yer Name yer Mailing Address/Prin me of Contributor L C. KILLION g Address GLEN MILLS yer Name yer Mailing Address/Prin	ANN C. BABIN g Address MEDIA yer Name yer Mailing Address/Principal Place of Business me of Contributor L C. KILLION g Address GLEN MILLS State PA yer Name yer Name yer Mailing Address/Principal Place of Business	ANN C. BABIN g Address MEDIA State Zig PA 19 yer Name yer Mailing Address/Principal Place of Business ame of Contributor L C. KILLION g Address GLEN MILLS State Zig PA 19 yer Name yer Name yer Name	ANN C. BABIN g Address Zip Code (Plus 4) MEDIA PA 19063 yer Name City yer Mailing Address/Principal Place of Business City Imme of Contributor State Zip Code (Plus 4) L C. KILLION State Zip Code (Plus 4) g Address State Zip Code (Plus 4) g Address I 19342 yer Name City yer Mailing Address/Principal Place of Business City	ANN C. BABIN g Address MEDIA State PA 19063 yer Name of Contributor L C. KILLION g Address GLEN MILLS State PA State PA State PA State State PA State PA State State PA State State PA State PA State State State PA State State State State State State State State State State PA State State State PA State State PA State State PA State State PA State State State PA State Stat	MO DAY g Address State Zip Code (Plus 4) 5 22 MEDIA State Zip Code (Plus 4) 5 22 yer Name PA 19063 Occupation yer Mailing Address/Principal Place of Business City State g Address City DAY g Address State Zip Code (Plus 4) g Address State Zip Code (Plus 4) g Address PA 19342 ger Name Occupation yer Name Occupation yer Mailing Address/Principal Place of Business City	MO DAY YEAR MO DAY YEAR MO DAY YEAR Address MEDIA State Zip Code (Plus 4) PA 19063 yer Name yer Mailing Address/Principal Place of Business City MO DAY Cuty MO DAY VEAR Cuty MO DAY VEAR Cuty MO DAY VEAR Cuty MO DAY VEAR Cuty MO DAY VEAR Cuty Cuty MO DAY VEAR Cuty C	MO DAY YEAR \$ g Address State Zip Code (Plus 4) 5 22 2017 MEDIA State Zip Code (Plus 4) 19063 5 22 2017 yer Name Occupation City State Zip Code yer Mailing Address/Principal Place of Business City State Zip Code g Address State Zip Code (Plus 4) 5 g Address City State Zip Code g Address/Principal Place of Business City State Zip Code g Address/Principal Place of Business City State Zip Code

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 Candi	Name of Filing Committee or Candidate R		Report	ting Perio	d			
FRIENDS OF DAVE WHITE From:				From: <u>5/2/2017</u> To:				<u>6/5/2017</u>
				D	ATE			AMOUNT
Full Name GLENOLDEN REPUBLICAN COMMITT	ΈĒ			мо	DAY	YEAR	\$	5,000.00
Mailing Address				5	22	201	7	
City GLENOLDEN	State PA	Zip Code (19036	Plus 4)			201		
Receipt Description VOID CHEC	K #177: CONTRIBU	TION ORIGINALLY	ISSUED	1/26/20:	17			
				_				PAGE TOTAL
Enter Grand Total of Part E on Sc	hedule I, Detailed	Summary Page,	Section	4.			\$	5,000.00

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>5/2/2017</u> то:	<u>6/5/2017</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 PAR	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			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	e,		PAGE TOTA	<u></u>
						\$		0.00

PAGE 13

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

Name of Filing Committee or Candidate			Rep	oorting I	Period		
			Fro	From:			
					DATE		AMOUNT
Full Name of Contributor				мо	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code(Plus 4)					
Employer of Contributor	L			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 Schedule II, In-Kind Contributions De Summary Page, Section 3.				d			PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate					Reporting Period					
FRIENDS OF DAVE WHITE					From	<u>5/2</u>	2/2017	То:	<u>6/5/2017</u>	
					DATE				AMOUNT	
To Whom Paid					мо	DAY	YEAR			
RIDLEY TOWNSHIP REPUBLICAN ORGANIZATION					••••					
Mailing Address					5	17	2017	\$	10,000.00	
City	WOODLYN	State	Zip Code (Plu	s 4)	Description of Expenditure					
		PA	19094		CAMPAIGN CONTRIBUTIO			1		
To W	To Whom Paid					DAY	YEAR			
BAKER PRINT + DESIGN					мо					
Mailing Address					5	22	2017	\$	7,451.15	
City	City MEDIA State Zip Code (Plus 4)					Description of Expenditure				
		PA	19063		POSTAGE, DELIVERY, PRINTING					
To W	To Whom Paid					DAY	YEAR			
COMMITTEE FOR DELAWARE COUNTY'S FUTURE323					мо		TEAN			
Mailing Address					5	31	2017	\$	25,000.00	
City	MEDIA	State	Zip Code (Plu	s 4)	Description of Expenditure					
		PA	19063		CAMPAIGN CONTRIBUTION			1		
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.									PAGE TOTAL	
Ente	r Grand Total of Expe	nditures on Page 1,	Report Cover Page, It	em D.				\$	42,451.15	