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 2016	0113			Report Filed B		CANDI	DATE	COM	MITTEE	✓	LOB	BYIST	
Name of Filing	Committee, Candid	ate or Lo	obbyist:			-	BRIAN KI	IRKLAN	D					
Street Address:														
City:	CHESTER						State:	PA		Zip Co	de: 19	016		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2. X	30 DA PRIMA		POST-	3.		AMENDMENT REPORT?		No	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 DA ELEC		POST-	6.	TERMIN REPORT		Yes	Nc	\checkmark
report type)	ANNUAL REPORT	7.	Year 2018				NG METHO			PAPER		\checkmark	DISKE	TTE
Name of Office	L Sought by Candidat	te:					DATE O	F ELEC	TION	District Number		Par	ty Code	County Code
							мо	DAY	YEAR			DEN	1	
							11		6 2018	3	(SEE INS	STRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR			мо	DAY	YEAR	FC	OR OFFIC	E USE	ONLY	
Expenditures	s from:		3 27	20	018 T	0	4	3	0 2018	3				
A. Amount Brought Forward From Last Report									13,057.23	3				
B. Total Monet	tary Contributions	And Rece	eipts (From	Schee	dule I)	\$	\$ 200.00							
C. Total Funds	Available (Sum Of	Lines A	and B)			\$			13,257.23	3				
D. Total Expen	nditures (From Scho	edule III	[)			\$			3,460.00	2				
E. Ending Cash	n Balance (Subtract	t Line D	From Line	C)		\$			9,797.23					
F. Value Of In-	-Kind Contributions	Receive	ed (From S	chedul	le II)	\$			0.00					
G. Unpaid Deb	ts And Obligations	(From S	chedule IV	')		\$			0.00					
				AFF	IDAVI	T SE	CTION							
	is a Committee rep		-							-				
I swear (or affirm correct and compl	i) that this report, incl lete.	uding the	attached sc	hedules	filed on	paper	or by elect	ronic me	dium, are to	the best o	of my knov	vledge	and beli	ef , true
Sworn to and sub	scribed before me this day of	5	20						Signatu	re of Perso	on Submitt	ing Rep	oort	
	Signatu	re				-				Prir	nted Name			
My Commission E	-									Ema	ail			
	мо	DA	NY	YR				Area	a Code	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a can	lidate's a	authorized	Comm	nittee, C	andid	ate shall	sign he	re.					
I swear (or affirm No 320) as amend) that to the best of n led.	ny knowle	dge and beli	ef this	political	comm	ittee has n	ot violate	ed any provi	sions of th	e act of Ju	ine 3,1	937 (P.L	. 1333,
Sworn to and subs	cribed before me this day of		20							Signature	of Candida	ite		
						-				Printe	ed Name			
My Commission Ex	Signature pires					-				Ema	ail			
						-								
	мо	DA	NY .	YR				Area C	ode	D	aytime Te	elephor	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** FRIENDS OF BRIAN KIRKLAND From: <u>3/27/2018</u> To: 4/30/2018 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) 200.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 200.00 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 Candidat	Name of Filing Committee or Candidate			orting I	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	

Use this Part to it	emize all other 50.01 to \$250.0	1 TO \$250.00 contribution 00 in the repo	s wi ortin	ith an ng per	aggreg iod.			rom
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		A	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR	\$	0.00
Mailing Address							7 *	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			Rep	orting Pe	riod			
			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			
FRIENDS OF BRIAN KIRKLAND		From: <u>3/27/201</u>		<u>/2018</u> То:		<u>4/30/2018</u>		
				D	ATE			AMOUNT
Full Name CHESTER TOWNSHIP COUGARS				мо	DAY	YEAR	\$	200.00
Mailing Address		-		12	6	201	7	
City CHESTER	State	Zip Code (Plus 4)		Ű			
	PA	19016						
Receipt Description CHECK WAS NE	VER CASHED BY RECI	PIENT					•	
		_		_				PAGE TOTAL
Enter Grand Total of Part E on Schedu	ile I, Detailed Sumn	nary Page,	Section	4.			\$	200.00

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 BRIAN KIRKLAND	From:	<u>3/27/2018</u> То:	<u>4/30/2018</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	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			мо	DAY	YEAR			
Mailing Address		_				7 \$		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			Rep	porting I	Period		
			Fro	From: To			
					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	e of Filing Committee or Candidate			Reporti	ng Period				
FRIE	NDS OF BRIAN KIRKLAND			From	<u>3/2</u>	7/2018	То:	<u>4/30/2018</u>	
					DATE			AMOUNT	
To Wh	iom Paid			мо	DAY	YEAR			
LIVIA	SMITH								
Mailin	g Address			1	16	2018	\$	40.00	
City	CHESTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		РА	19013	REIMBU BREAKF	IRSEMENT AST	-2 TICKE	TS FOR	RMILK	
To Wh	iom Paid			мо	DAY	YEAR			
CHES	TER CAMPAIGN								
Mailin	g Address			1	19	2018	\$	240.00	
City	CHESTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	1		
		PA	19013	4 TICKE	TS - BANC	QUET			
To Whom Paid 3 SHADES OF BLACKNESS			мо	DAY	YEAR				
Mailin	g Address			2	26	2018	\$	300.00	
City	CHESTER	State	Zip Code (Plus 4)	Descrip	i tion of Exp	enditure			
		PA	19013	VENUE RENTAL					
To Wh	om Paid			мо	DAY	YEAR			
BOYS	AND GIRLS CLUB OF CHESTER								
Mailin	g Address			4	13	2018	\$	500.00	
City	CHESTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		PA	19013	DONAT	ION .				
To Wh	om Paid			мо	DAY	YEAR			
KIRKL	AND FOR CONGRESS				2	12/11			
Mailin	g Address			4	20	2018	\$	2,000.00	
City	CHESTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		РА	19013	CONTRI		O THADD	EUS KI	RKLAND FOR	
To Wh	oom Paid			мо	DAY	YEAR			
MALC	MALCOM YATES								
Mailin	g Address			4	20	2018	\$	30.00	
City	MARCUS HOOK	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		PA	19061	REIMBU	IRSEMENT	- EVENT	TICKET	Г	

To Whom Paid			мо	DAY	YEAR				
NCBW DELCO CHAPTER			MO		TEAR				
Mailing Address			4	24	2018	\$	50.00		
City SWARTHMORE	State	Zip Code (Plus 4)	Description of Expenditure						
PA 19081				AD					
To Whom Paid			мо	DAY	YEAR				
CHESTER CHAPTER NAACP			МО						
Mailing Address			4	24	2018	\$	50.00		
City CHESTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•			
	PA	19016	TICKET	-BANQUE	г <u> </u>				
To Whom Paid			мо	DAY	YEAR				
FRIENDS OF EMILIO			MO						
Mailing Address			4	26	2018	\$	250.00		
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•			
	PA	17108	CONRIE	BUTION TO	FRIENDS	S OF EMILI	0		
						F	PAGE TOTAL		
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.					\$	3,460.00			