

Campaign Finance Report

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

Filer Identification Number :		20160113		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF BRIAN KIRKLAND												
Street Address: P.O. BOX 755												
City: CHESTER						State: PA			Zip Code: 19016			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.X	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2018		FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/>	DISKETTE				
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code
						MO	DAY	YEAR	DEM			
						11	6	2018	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		9	18	2018		10	22	2018				
A. Amount Brought Forward From Last Report						\$		4,460.03				
B. Total Monetary Contributions And Receipts (From Schedule I)						\$		10,151.59				
C. Total Funds Available (Sum Of Lines A and B)						\$		14,611.62				
D. Total Expenditures (From Schedule III)						\$		4,340.00				
E. Ending Cash Balance (Subtract Line D From Line C)						\$		10,271.62				
F. Value Of In-Kind Contributions Received (From Schedule II)						\$		0.00				
G. Unpaid Debts And Obligations (From Schedule IV)						\$		0.00				

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF BRIAN KIRKLAND	From: <u>9/18/2018</u> To: <u>10/22/2018</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting 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)	\$ 1,350.00
TOTAL for the Reporting Period (2)	\$ 1,350.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 2,250.00
All Other Contributions (Part D)	\$ 5,551.59
TOTAL for the Reporting Period (3)	\$ 7,801.59

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 0.00

Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 9,151.59
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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 FRIENDS OF BRIAN KIRKLAND				Reporting Period From: <u>9/18/2018</u> To: <u>10/22/2018</u>			
				DATE		AMOUNT	

Full Name of Contributor THOMAS WHITE			MO	DAY	YEAR	\$ 100.00
Mailing Address			10	9	2018	
City CHESTER	State PA	Zip Code (Plus 4) 19013				

Full Name of Contributor ROBERT SHAUGHNESSY			MO	DAY	YEAR	\$ 100.00
Mailing Address			10	9	2018	
City CHESTER	State PA	Zip Code (Plus 4) 19013				

Full Name of Contributor JOHN BUSH			MO	DAY	YEAR	\$ 200.00
Mailing Address 1609 EDMONT AVE			10	9	2018	
City CHESTER	State PA	Zip Code (Plus 4) 19013				

Full Name of Contributor CALVIN BERNARD			MO	DAY	YEAR	\$ 200.00
Mailing Address 4015 ELSON RD			10	9	2018	
City BROOKHAVEN	State PA	Zip Code (Plus 4) 19015				

Full Name of Contributor DAWN CHAVOUS			MO	DAY	YEAR	\$ 250.00
Mailing Address 2040 ELLSWORTH AVE			10	9	2018	
City PHILA	State PA	Zip Code (Plus 4) 19146				

Full Name of Contributor			MO	DAY	YEAR	\$ 250.00
PORTIA WEST						
Mailing Address			10	9	2018	
2320 WALNUT ST APT F11						
City	State	Zip Code (Plus 4)				
PHILA	PA	19013				

Full Name of Contributor				MO	DAY	YEAR	\$250.00
JOAN NEAL							
Mailing Address				10	9	2018	
1704 W 7TH ST							
City	State		Zip Code (Plus 4)				
CHESTER	PA		19013				

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

PAGE TOTAL
\$ 1,350.00

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 FRIENDS OF BRIAN KIRKLAND	Reporting Period From: <u>9/18/2018</u> To: <u>10/22/2018</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee LABORERS DISTRICT PAC FUND				MO	DAY	YEAR	\$ 500.00
Mailing Address 665 N BROAD ST 5TH FL				10	9	2018	
City PHILA	State PA	Zip Code (Plus 4) 19123					
Full Name of Contributing Committee MONROE ENERGY PAC				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 4101 POST RD				10	9	2018	
City TRAINER	State PA	Zip Code (Plus 4) 19061					
Full Name of Contributing Committee COMMONWEALTH HERITAGE PAC				MO	DAY	YEAR	\$ 750.00
Mailing Address HARRISBURG PA				10	9	2018	
City	State	Zip Code (Plus 4)					

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

PAGE TOTAL
\$ 2,250.00

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 FRIENDS OF BRIAN KIRKLAND	Reporting Period From: <u>9/18/2018</u> To: <u>10/22/2018</u>
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
ALLEN KLENOTIZ							
Mailing Address 37 DARLINGTON RD GLEN MILLS PA				10	9	2018	\$ 750.00
City	State	Zip Code (Plus 4)					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)		

Full Name of Contributor				MO	DAY	YEAR	
NAFIS NICHOLS							
Mailing Address 1832 W. 6TH ST				10	9	2018	\$ 501.59
City	State	Zip Code (Plus 4)					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)		

Full Name of Contributor				MO	DAY	YEAR	
RONALD STARR							
Mailing Address 32 HILL ST				10	9	2018	\$ 500.00
City	State	Zip Code (Plus 4)					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)		

Full Name of Contributor RA-TAH JOHNSON			MO	DAY	YEAR	\$ 500.00
Mailing Address 761 W SPROUL RD			10	9	2018	
City SPRINGFIELD	State PA	Zip Code (Plus 4) 19064				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

Full Name of Contributor EVAN PROCHNIAK			MO	DAY	YEAR	\$ 500.00
Mailing Address 20 GUERNSEY RD			10	9	2018	
City SWARTHMORE	State PA	Zip Code (Plus 4) 19081				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

Full Name of Contributor HARRY OXMAN			MO	DAY	YEAR	\$ 500.00
Mailing Address 233 S. 6TH ST APT 2302			10	9	2018	
City PHILA	State PA	Zip Code (Plus 4) 19106				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

Full Name of Contributor MICHAEL LENZA			MO	DAY	YEAR	\$ 500.00
Mailing Address 54 CAMP ST			10	9	2018	
City MILFORD	State MA	Zip Code (Plus 4) 01757				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

Full Name of Contributor LIVIA SMITH			MO	DAY	YEAR	\$ 500.00
Mailing Address 930 W 18TH ST			10	9	2018	
City CHESTER	State PA	Zip Code (Plus 4) 19013				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

Full Name of Contributor KENNETH SCHUSTER			MO	DAY	YEAR	\$ 500.00
Mailing Address 334 W FRONT ST			10	9	2018	
City MEDIA	State PA	Zip Code (Plus 4) 19063				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

Full Name of Contributor DRAKE NAKAISHI			MO	DAY	YEAR	\$ 500.00
Mailing Address 541 COLONEL DEWEES RD			10	9	2018	
City WAYNE	State PA	Zip Code (Plus 4) 19087				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

Full Name of Contributor RICHARD KNOX			MO	DAY	YEAR	\$ 300.00
Mailing Address			10	9	2018	
City BROOKHAVEN	State PA	Zip Code (Plus 4) 19015				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

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

PAGE TOTAL	
\$	5,551.59

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:

			DATE		AMOUNT	
Full Name			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Receipt Description						

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 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 BRIAN KIRKLAND		From: <u>9/18/2018</u> To: <u>10/22/2018</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period (1)		\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period (2)		\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period (3)		\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)		\$	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: To:
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					
Description of Contribution:							
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:		To:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF BRIAN KIRKLAND	From <u>9/18/2018</u> To: <u>10/22/2018</u>

DATE				AMOUNT		
To Whom Paid MAHKI LITTLE			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 2001 EDMONT AVE			8	7	2018	
City CHESTER	State PA	Zip Code (Plus 4) 19013	Description of Expenditure SCHOLARSHIP			
To Whom Paid NKOYA KABBAH			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 400 W. 21ST ST			8	7	2018	
City CHESTER	State PA	Zip Code (Plus 4) 19013	Description of Expenditure SCHOLARSHIP			
To Whom Paid DELAWARE COUNTY LITERACY COUNCIL			MO	DAY	YEAR	\$ 70.00
Mailing Address			9	13	2018	
City CHESTER	State PA	Zip Code (Plus 4) 19013	Description of Expenditure TWO TICKETS FOR ANNUAL AWARDS			
To Whom Paid CHARLES DIXON/DYNAGRAPHIX			MO	DAY	YEAR	\$ 450.00
Mailing Address 4324 TACKAWANNA ST UNIT 2A			9	17	2018	
City PHILA	State PA	Zip Code (Plus 4) 19124	Description of Expenditure CAMPAIGN LITERATURE			
To Whom Paid DAVID CARTER			MO	DAY	YEAR	\$ 400.00
Mailing Address			10	9	2018	
City CHESTER	State PA	Zip Code (Plus 4) 19013	Description of Expenditure CAMPAIGN CAPS			

To Whom Paid CHARLES DIXON/DYNAGRAPHIX			MO	DAY	YEAR	
Mailing Address 4324 TACKAWANNA ST UNIT 2A			10	16	2018	
City PHILA	State PA	Zip Code (Plus 4) 19124	Description of Expenditure ELECTION DAY PALM CARDS			
To Whom Paid MARCUS HOOK/TRAINER FIRE DEPARTMENT			MO	DAY	YEAR	
Mailing Address P.O. BOX 369			10	15	2018	
City MARCUS HOOK	State PA	Zip Code (Plus 4) 19061	Description of Expenditure DONATION FOR OPEN HOUSE			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 4,340.00

