# **Campaign Finance Report**

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

Filer Identification 20190083							t 3v:	CANDI	DATE		СОМІ	MITTEE	✓	LOBE	BYIST		
Name of Filing C	Committee	e, Candida	ate or L	obbyist:			-	N FRIEND	S OF								
Street Address:	11 CI	HURCH R	D														
City:	HATF	IELD						State:	PA			Zip Co	<b>de:</b> 19	440-1	206		
TYPE OF REPORT	6TH TUES PRE-PRIM		1. <b>X</b>	2ND FRIDA PRIMARY	Y PRE	- 2.	30 DA PRIMA		POST-	3.		AMENDMENT REPORT?		Yes	No	D	
(place X to the right of	6TH TUES PRE-ELEC		4.	2ND FRIDA ELECTION	Y PRE	≣- 5.	30 DA ELEC		POST-	6.		TERMIN REPORT		Yes	No	D N	
report type)	ANNUAL	REPORT	7.	Year 2019 FILING METHOD ( ) CHECK ONE							PAPER		$\checkmark$	DISKI	TTE		
Name of Office Sought by Candidate:						DATE O	F ELE	СТІО	N	District Number	Office Code	Par	ty Code	Count Code	V		
JUDGE OF THE SUPERIOR COURT								мо	DAY	YE	AR	-1	SPR	REP		15	
JUDGE OF THE SUPERIOR COURT								11		5	2019	<b> </b>	(SEE INS	TRUCTIO	ONS FOR	CODES)	
Summary of		and	мо	DAY	YEAR	2		мо	DAY	YE	AR	FC	OR OFFIC	e use	ONLY		
Expenditures	s from:			1 1	2	019 <b>T</b>	0	4		1	2019						
A. Amount Bro	ught Forv	vard From	n Last R	eport			\$				0.00						
B. Total Monet	ary Contri	ibutions A	And Rec	eipts (Fron	1 Sche	dule I)	\$			42,501.00							
C. Total Funds	Available	(Sum Of	Lines A	and B)			\$			42,5	501.00						
D. Total Expen	ditures (F	rom Sche	edule II	I)			\$			24,6	78.16						
E. Ending Cash	Balance	(Subtract	: Line D	From Line	C)		\$			17,8	22.84						
F. Value Of In-	Kind Cont	ributions	Receiv	ed (From S	chedu	le II)	\$			1,2	84.26						
G. Unpaid Deb	ts And Ob	ligations	(From S	Schedule IV	()		\$				0.00						
					AFF	IDAVI	T SE	CTION									
PART I - If this is		•		-													l
I swear (or affirm correct and compl		eport, inclu	uding the	e attached sc	hedule	s filed on	paper	or by elect	ronic me	edium	, are to t	the best o	f my knov	/ledge a	and bel	ief , tru	9
Sworn to and subs	day of	ore me this		20						s	ignature	e of Perso	n Submitt	ing Rep	oort		
		Signatur	re				_					Prin	ted Name				-
My Commission E	xpires						_					Ema	il				
		мо	D	AY	YR				Are	ea Cod	e	Daytin	ne Teleph	one Nu	mber		
Part II- If this is	a report	of a cand	lidate's	authorized	Comm	nittee, C	Candid	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende		e best of m	ny knowle	edge and beli	ef this	political	comm	ittee has n	ot viola	ted an	y provis	ions of th	e act of Ju	ine 3,19	937 (P.I	L. 1333,	
Sworn to and subso	ribed befor day of	e me this		20							s	ignature	of Candida	te			•
							_					Printe	ed Name				•
My Commission Exp	Signature My Commission Expires								Email					-			
	_						_										
		мо	D	AY	YR	2			Area	Code		D	aytime Te	lephon	e Numl	ber	

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** KING, MEGAN FRIENDS OF From: <u>1/1/2019</u> **To:** 4/1/2019 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)** 200.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 200.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 26,000.00 16,301.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 42,301.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 42,501.00 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 Candidate					Reporting Period						
Fro						:					
					DATE			AMOUNT			
Full Name of Contributing Committee				мо	DAY	YEAR					
Mailing Address							\$	0.00			
City State Zip Code (Plus 4)											
							Γ	PAGE TOTAL			

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

\$

0.00

5/4/2024 10:53:46 AM

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										
KING, MEGAN FRIENDS OF										
					DATE			AMOUNT		
Full Name of Contributor William Forester				мо	DAY	YEAR				
Mailing Address 2 Collette Cir.							\$	100.00		
<b>City</b> Brigantine	State NJ	<b>Zip Code (Plus 4)</b> 08203		- 3	22	2019				
Full Name of Contributor Nicole Feliciano				мо	DAY	YEAR				
Mailing Address 70 Washington St.	, 12G			3			\$	100.00		
City     Brooklyn     State     Zip Code (Plus 4)       NY     11201					31	2019				
Enter Grand Total of Part A on	\$	<b>PAGE TOTAL</b> 200.00								

# 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	ame of Filing Committee or Candidate Rep								
KING, MEGAN FRIENDS OF			From:	<u>1/</u>	1/2019	То:	<u>4/1/2019</u>		
				DA	TE		Α	MOUNT	
Full Name of Contributing Committee COMMONWEALTH LEADERS FUND				мо	DAY	YEAR			
Mailing Address 11 CHURCH RD					26	2010	\$	25,000.00	
City HATFIELD	<b>State</b> PA	<b>Zip Code</b> 19440-1	e <b>(Plus 4)</b> 1206	2	26	201			
Full Name of Contributing Committee PRCCC (PA REP CAUCUS OF COUNTY C	OMMISSIONERS			мо	DAY	YEAR			
Mailing Address 1207 CALKINS ROAD	)						\$	1,000.00	
City MILANVILLE	<b>State</b> PA	<b>Zip Code</b> 18443	e (Plus 4)	3	29	2019			
								PAGE TOTAL	
Enter Grand Total of Part C on Scheo	lule I, Detailed Sum	imary Pa	ige, Sectio	n 3.			\$	26,000.00	

# 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				Repo	porting Period				
KING, MEGAN FRIENDS OF				From	n:	<u>1/1/2</u>	019 To	<b>:</b> <u>4/1/2019</u>	
					DA	ATE		AMOUNT	
Full Name of Contributor Terry Murphy					мо	DAY	YEAR		
Mailing 483 Raven Circle								<b>\$</b> 1,000.00	
City Camden	State	Zip	p Code (Plus	; 4)	3	29	2019		
	DE	19	934						
Employer Name BayHealth Medical Cer	r Name BayHealth Medical Center, Inc.					i <b>on</b> P	residen	t & CEO	
Employer Mailing Address/Principal Place of City Business						State		Zip Code (Plus 4)	
640 South State Street Dover					DE		19901		
Full Name of Contributor					мо	DAY	YEAR		
Andrew McReynolds					MO	DAT	TEAN		
Mailing 489 Prussian Lane								<b>\$</b> 300.00	
City Wayne	State	Zir	p Code (Plus	; 4)	3	29	2019		
	РА	19	087						
Employer Name Ricoh USA, Inc.	·				Occupation Assistant General Counsel				
Employer Mailing Address/Principal Place Business	e of		City		State Zip Code (Plus 4)				
1265 Drummers Ln			Wayne			PA		19087	
Full Name of Contributor						DAY	VEAD		
David King					мо	DAY	YEAR		
Mailing 8341 Auburn Ridge W	ау							<b>\$</b> 501.00	
City San Diego	State	Zir	p Code (Plus	; 4)	3	25	2019		
	СА	92	129						
Employer Name SWB HIDTA / San Diego – Imperial Valley Region				Occupation Director					
Employer Mailing Address/Principal Place of City Business				State 2			Zip Code (Plus 4)		
600 B Street, Suite 1450			San Dieg	0		CA		92101	

Full Name of Con	II Name of Contributor					DAY	YEAR		
William Beatty					мо	DAY	TEAR		
Mailing Address	77 Parker Rd.							\$	1,000.00
City Plainsbor	0	State	Zij	p Code (Plus 4)	3	22	2019		
		Ŋ	08	536					
Employer Name	AIG				Occupat	ion C	Compliar	nce Officer	
Employer Mailing Business	Address/Principal Plac	e of		City		State		Zip Code (	Plus 4)
180 Maiden Ln.				New York	NY 10038				
Full Name of Con	tributor				мо	DAY	YEAR		
Megan King									
Mailing Address	1460 Byrd Rd.							\$	5,000.00
City Berwyn		State	Zij	p Code (Plus 4)	3	22	2019		
20.11/1		РА	19	312					
Employor Name	Employer Name Chester County District Attorney's Office				Occupation				
Employer Name Chester County District Attorney's Office			eccupat	Attorney					
Employer Mailing Address/Principal Place of City Business				State		Zip Code (	Plus 4)		
Business201 W. Market St., Suite 4450West Chester			West Chester		PA		19328		
						•	I 1		
								1	
Full Name of Con Thomas and Car					мо	DAY	YEAR		
		rive			мо	DAY	YEAR	\$	5,000.00
Thomas and Carr Mailing Address	rol McCarthy	rive State	Zij	p Code (Plus 4)	<b>мо</b> 3	<b>DAY</b>	<b>YEAR</b> 2019		5,000.00
Thomas and Carr Mailing Address	rol McCarthy	-	-	<b>p Code (Plus 4)</b> 1403					5,000.00
Thomas and Carr Mailing Address	rol McCarthy	State	-			1			5,000.00
Thomas and Carr Mailing Address City Audobon Employer Name Employer Mailing	rol McCarthy 23201 Shannondell D	<b>State</b> PA	-		3	1	2019		
Thomas and Carr Mailing Address City Audobon Employer Name	rol McCarthy 23201 Shannondell D N/A Address/Principal Plac	<b>State</b> PA	-	1403	3	ion R	2019		
Thomas and Carr Mailing Address City Audobon Employer Name Employer Mailing Business 23201 Shannond	rol McCarthy 23201 Shannondell D N/A Address/Principal Plac lell Drive	<b>State</b> PA	-	0403 City	3	ion R	2019	Zip Code (	
Thomas and Carr Mailing Address City Audobon Employer Name Employer Mailing Business	rol McCarthy 23201 Shannondell D N/A Address/Principal Plac lell Drive tributor	<b>State</b> PA	-	0403 City	3	ion R	2019	Zip Code (	
Thomas and Carr Mailing Address City Audobon Employer Name Employer Mailing Business 23201 Shannonc	rol McCarthy 23201 Shannondell D N/A Address/Principal Plac lell Drive tributor	State PA e of	-	0403 City	3 Occupat	ion R State PA DAY	2019 Letired	<b>Zip Code (</b> 19403 <b>\$</b>	
Thomas and Carr Mailing Address City Audobon Employer Name Employer Mailing Business 23201 Shannond Full Name of Con Carrie and Kerry Mailing	rol McCarthy 23201 Shannondell D N/A Address/Principal Plac lell Drive tributor Johnson 3125 Grande Oak Plac	State PA e of	19	0403 City	- 3 Occupat	ion R State PA	2019 Letired	<b>Zip Code (</b> 19403 <b>\$</b>	Plus 4)
Thomas and Carr Mailing Address City Audobon Employer Name Employer Mailing Business 23201 Shannond Full Name of Con Carrie and Kerry Mailing Address City	rol McCarthy 23201 Shannondell D N/A Address/Principal Plac lell Drive tributor Johnson 3125 Grande Oak Plac	State PA e of	19 2ij	Audobon	3 Occupat	ion R State PA DAY	2019 Letired	<b>Zip Code (</b> 19403 <b>\$</b>	Plus 4)
Thomas and Carr Mailing Address City Audobon Employer Name Employer Mailing Business 23201 Shannond Full Name of Con Carrie and Kerry Mailing Address City	rol McCarthy 23201 Shannondell D N/A Address/Principal Plac lell Drive tributor Johnson 3125 Grande Oak Plac	State PA e of State PA	19 2ij	City Audobon	3 Occupat	ion R DAY	2019 Letired	<b>Zip Code (</b> 19403 <b>\$</b>	Plus 4)
Thomas and Carr Mailing Address City Audobon Employer Name Employer Mailing Business 23201 Shannonc Full Name of Con Carrie and Kerry Mailing Address City Lancaster Employer Name	rol McCarthy 23201 Shannondell D N/A Address/Principal Plac lell Drive tributor Johnson 3125 Grande Oak Plac r	State PA e of Ce State PA ncaster	19 2ij	City Audobon	MO 3	ion R DAY	2019 Letired YEAR 2019	<b>Zip Code (</b> 19403 <b>\$</b>	Plus 4) 500.00

Full Name of Contributor Beth Ann King						YEAR		
Mailing 50 Partridge Rd							<b>\$</b> 500.00	
City Duxbury	<b>State</b> MA		<b>p Code (Plus 4)</b> 2332	- 3	1	2019		
Employer Name <sub>N/A</sub>					ion ⊦	lomema	aker	
Employer Mailing Address/Principal Place of City Business					State		Zip Code (Plus 4)	
50 Partridge Rd Duxbury					МА		02332	
Full Name of Contributor Dillon McCandless King Coulter & Graham LLP					DAY	YEAR		
Mailing Address 128 W. Cunningh	am St.						<b>\$</b> 2,500.00	
City Butler	<b>State</b> PA		<b>p Code (Plus 4)</b>	- 3	29	2019		
Employer Name N/A	<b>I</b>			Occupat	Occupation N/A			
Employer Mailing Address/Principal Business	Place of		City	1	State		Zip Code (Plus 4)	
128 W. Cunningham St. Butler					PA		16001	
Enter Grand Total of Part C on S	chedule I, Deta	iled Sumn	nary Page, Secti	on 3.			<b>PAGE TOTAL</b> \$ 16,301.00	

## 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	od				
			From:			То:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$	;	0.00
City	State	Zip Code (	Plus 4)						
Receipt Description						•	•		
Enter Grand Total of Part E on Schedu	le T. Detailed Summ	nary Page	Section	4				PAGE TO	TAL
		iiai y i uge,	Section				\$		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		
KING, MEGAN FRIENDS OF	From:	<u>1/1/2019</u> <b>To:</b>	<u>4/1/2019</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	T F)		
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)	\$	1,284.26
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		\$	1,284.26

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

### VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reportin	g Period			
						То:	
				DATE		ΑΜΟυΙ	NT
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	je,	PAGE T	OTAL
					4	5	0.00

### PAGE 12

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

Name of Filing Committee or Candidate					Re	eporting Period					
KING, MEGAN FRIENDS OF					Fro	m:		<u>1/1/201</u>	<u>19</u> <b>To:</b>	<u>4/1/2019</u>	
								DATE		AMOUNT	
Full Name of Contributor Goth Aircraft, LLC						мо	•	DAY	YEAR		
Mailing Address 11 CHURCH RD										<b>\$</b> 739.38	
City Hatfield	<b>State</b> PA					3		7	2019		
Employer of Contributor N/A						Occupation N/A					
Employer Mailing Address/Principal Place of City State Business							Zip ( 4)	Code(Plus	Descri	ption of Contribution	
11 Church Rd PA						<b>.</b> , 194	40	Travel			
Full Name of Contributor Republican Party of Pennsylvania						MO DAY		DAY	YEAR		
Mailing Address 112 State Street										<b>\$</b> 344.88	
City Harrisburg	<b>State</b> PA		<b>Zip Code(I</b> 17101	Plus 4)			2	22	2019		
Employer of Contributor N/A						Occupation N/A					
Employer Mailing Address/Principal Plac Business	ce of	City		State			Zip 4)	Code(Plus	Descri	ption of Contribution	
112 State Street		Harrist	ourg	PA			, 171	01	Campa	ign Literature	
Full Name of Contributor Republican Party of Pennsylvania						мо		DAY	YEAR		
Mailing Address 112 State Street										<b>\$</b> 200.00	
City Harrisburg	<b>State</b> PA		<b>Zip Code(1</b> 17101	Plus 4)			3	6	2019		
Employer of Contributor N/A					Occ	upat	ion N	I/A			
Employer Mailing Address/Principal Place of City State Business			State		Zip Code(Plus 4)			Descri	cription of Contribution		
112 State Street		Harrist	ourg	РА			17101 Filing Fee				

**PAGE TOTAL** 1,284.26

# SCHEDULE III STATEMENT OF EXPENDITURES

ame of Filing Committee or Candidate				Reporting Period				
KING, MEGAN FRIENDS OF			From	<u>1/</u>	1/2019	То:	<u>4/1/2019</u>	
				DATE			AMOUNT	
To Whom Paid Churchill Strategies, LLC			мо	DAY	YEAR			
Mailing Address 23 North Front Stree	et		2	26	2019	\$	18,017.34	
City Harrisburg	State PA	<b>Zip Code (Plus 4)</b> 17106		<b>otion of Exp</b> sing and P				
<b>To Whom Paid</b> Goldstein Law Partners, LLC	мо	DAY	YEAR					
Mailing Address 11 CHURCH RD	3	13	2019	\$	1,648.92			
City Hatfield	-	<b>ional Fees</b>	benditure	2				
To Whom Paid Goldstein Law Partners, LLC			мо	DAY	YEAR			
Mailing Address 11 CHURCH RD			3	29	2019	\$	500.00	
City Hatfield	State PA	<b>Zip Code (Plus 4)</b> 19440	Description of Expenditure Professional Fees					
<b>To Whom Paid</b> Mary Louise Doyle			мо	DAY	YEAR			
Mailing Address 1810 Alyssa Lane			3	25	2019	\$	3,600.00	
City North Coventry	State PA	<b>Zip Code (Plus 4)</b> 19465		<b>ional Fees</b>		3		
To Whom Paid Upper St. Clair Republican Committee			мо	DAY	YEAR			
Mailing Address 470 Miranda Drive			3	25	2019	\$	250.00	
City Upper St. Clair	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15241		Description of Expenditure Advertising and Promotion				

To Whom Paid ASAP Mailing & Marketing			мо	DAY	YEAR		
Mailing Address 6473 Ruch Road			3	26	2019	\$	647.44
City Bethlehem	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18017	Description of Expenditure Office supplies				
To Whom Paid WSFS Bank			мо	DAY	YEAR		
Mailing Address 500 Delaware Ave			3	22	2019	\$	14.46
City Wilmington	<b>State</b> DE	<b>Zip Code (Plus 4)</b> 19801	Description of Expenditure Bank Service Charges				
Enter Grand Total of Expenditure	s on Page 1 Pa	aport Cover Page Item D					PAGE TOTAL
	s on rage 1, Re	sport cover Page, Item D	•			\$	24,678.16