

# 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 : 2002149		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF THADDEUS KIRKLAND										
Street Address:										
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.X	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No <input checked="" type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No <input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2019	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	
				MO	DAY	YEAR				
				11	5	2019	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO		FOR OFFICE USE ONLY			
		4	2	2019	5					
A. Amount Brought Forward From Last Report				\$ 423.28						
B. Total Monetary Contributions And Receipts (From Schedule I)				\$ 31,597.22						
C. Total Funds Available (Sum Of Lines A and B)				\$ 32,020.50						
D. Total Expenditures (From Schedule III)				\$ 11,022.00						
E. Ending Cash Balance (Subtract Line D From Line C)				\$ 20,998.50						
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**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF THADDEUS KIRKLAND	From: <u>4/2/2019</u> To: <u>5/6/2019</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 0.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 875.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 875.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 0.00
<b>All Other Contributions (Part D)</b>	\$ 30,722.22
<b>TOTAL for the Reporting Period (3)</b>	\$ 30,722.22

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

<b>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.)</b>	\$ 31,597.22
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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)**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF THADDEUS KIRKLAND	From: <u>4/2/2019</u> To: <u>5/6/2019</u>

DATE				AMOUNT
<b>Full Name of Contributor</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 75.00
AIGNER CLEVELAND				
<b>Mailing Address</b>				
<b>City</b> CHESTER	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19013	3 28 2019	
<b>Full Name of Contributor</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
HELEN RAINEY				
<b>Mailing Address</b>				
<b>City</b> CHESTER	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19013	3 28 2019	
<b>Full Name of Contributor</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
PORTIA WEST				
<b>Mailing Address</b>				
<b>City</b> CHESTER	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19013	3 28 2019	
<b>Full Name of Contributor</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
DARRYL TURNER				
<b>Mailing Address</b>				
<b>City</b> CHESTER	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19013	3 28 2019	
<b>Full Name of Contributor</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
JAMES NOLAN				
<b>Mailing Address</b>				
<b>City</b> FOLSOM	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19033	3 28 2019	
<b>Full Name of Contributor</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
WILLIAM RIGBY				
<b>Mailing Address</b>				
<b>City</b> ELWYN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19063	3 28 2019	

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

<b>PAGE TOTAL</b>
\$ 875.00

**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:	To:

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

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

<b>PAGE TOTAL</b>
\$ 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.)**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF THADDEUS KIRKLAND	<b>Reporting Period</b>  <b>From:</b> <u>4/2/2019</u> <b>To:</b> <u>5/6/2019</u>
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				DATE	AMOUNT
<b>Full Name of Contributor</b> MICHAEL GALLANTE				<b>MO</b>	<b>DAY</b>
<b>Mailing Address</b> City BLACKWOOD State NJ Zip Code (Plus 4) 08012				3	28
				YEAR	2019
				\$ 500.00	
<b>Employer Name</b>				<b>Occupation</b>	
<b>Employer Mailing Address/Principal Place of Business</b>				City	State
				Zip Code (Plus 4)	
<b>Full Name of Contributor</b> LIVIA SMITH				<b>MO</b>	<b>DAY</b>
<b>Mailing Address</b> City CHESTER State PA Zip Code (Plus 4) 19013				3	28
				YEAR	2019
				\$ 1,000.00	
<b>Employer Name</b>				<b>Occupation</b>	
<b>Employer Mailing Address/Principal Place of Business</b>				City	State
				Zip Code (Plus 4)	
<b>Full Name of Contributor</b> NAFIS NICHOLS				<b>MO</b>	<b>DAY</b>
<b>Mailing Address</b> City CHESTER State PA Zip Code (Plus 4) 19013				3	28
				YEAR	2019
				\$ 1,000.00	
<b>Employer Name</b>				<b>Occupation</b>	
<b>Employer Mailing Address/Principal Place of Business</b>				City	State
				Zip Code (Plus 4)	
<b>Full Name of Contributor</b> RONALD STARR				<b>MO</b>	<b>DAY</b>
<b>Mailing Address</b> City BROOKHAVEN State PA Zip Code (Plus 4) 19015				3	28
				YEAR	2019
				\$ 2,000.00	
<b>Employer Name</b>				<b>Occupation</b>	
<b>Employer Mailing Address/Principal Place of Business</b>				City	State
				Zip Code (Plus 4)	

<b>Full Name of Contributor</b> JOE IACONA III			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 2,222.22
<b>Mailing Address</b>			3	28	2019	
<b>City</b> CHESTER	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19013				
<b>Employer Name</b>			<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>		<b>Zip Code (Plus 4)</b>	

  

<b>Full Name of Contributor</b> PATRICK LARKIN			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 2,500.00
<b>Mailing Address</b>			3	28	2019	
<b>City</b> MEDIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19063				
<b>Employer Name</b>			<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>		<b>Zip Code (Plus 4)</b>	

  

<b>Full Name of Contributor</b> ANTHONY MOORE			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 2,500.00
<b>Mailing Address</b>			3	28	2019	
<b>City</b> UPPER CHICHESTER	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19061				
<b>Employer Name</b>			<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>		<b>Zip Code (Plus 4)</b>	

  

<b>Full Name of Contributor</b> ALLEN AND ANNMARIE KLENOTIZ			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 2,500.00
<b>Mailing Address</b>			3	28	2019	
<b>City</b> GLEN MILLS	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19342				
<b>Employer Name</b>			<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>		<b>Zip Code (Plus 4)</b>	

  

<b>Full Name of Contributor</b> HARRY AND ELEANOR OXMAN			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,500.00
<b>Mailing Address</b>			3	28	2019	
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19106				
<b>Employer Name</b>			<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>		<b>Zip Code (Plus 4)</b>	

  

<b>Full Name of Contributor</b> HORACE STRAND			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 2,500.00
<b>Mailing Address</b>			3	28	2019	
<b>City</b> CHESTER	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19013				
<b>Employer Name</b>			<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>		<b>Zip Code (Plus 4)</b>	

<b>Full Name of Contributor</b> BETTER DELCO			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 2,500.00
<b>Mailing Address</b>			3	28	2019	
<b>City</b> DREXEL HILL	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19023				
<b>Employer Name</b>			<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>		<b>Zip Code (Plus 4)</b>	

<b>Full Name of Contributor</b> MICHAEL LENZA			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 5,000.00
<b>Mailing Address</b>			3	28	2019	
<b>City</b> MILFORD	<b>State</b> MA	<b>Zip Code (Plus 4)</b> 01857				
<b>Employer Name</b>			<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>		<b>Zip Code (Plus 4)</b>	

<b>Full Name of Contributor</b> VAHAN AND DANIELLE GUREGHIAN			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 5,000.00
<b>Mailing Address</b>			3	28	2019	
<b>City</b> GLADWYNE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19035				
<b>Employer Name</b>			<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b>	<b>State</b>		<b>Zip Code (Plus 4)</b>	

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

<b>PAGE TOTAL</b>
<b>\$</b> 30,722.22



## 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: <span style="float: right;">To:</span>
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				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.

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
FRIENDS OF THADDEUS KIRKLAND		From: <u>4/2/2019</u> To: <u>5/6/2019</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period		(1)	\$ 0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period		(2)	\$ 0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
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: <span style="float: right;">To:</span>
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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.						<b>PAGE TOTAL</b>  \$ 0.00

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

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
				DATE		AMOUNT	
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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF THADDEUS KIRKLAND	From <u>4/2/2019</u> To: <u>5/6/2019</u>

				DATE	AMOUNT		
To Whom Paid THREE SHADES OF BLACKNESS				MO	DAY	YEAR	\$ 500.00
Mailing Address				3	28	2019	
City	CHESTER	State	PA	Zip Code (Plus 4)	19013	Description of Expenditure FUND RAISER VENUE	
To Whom Paid CHESTER DEMOCRATIC COMMITTEE				MO	DAY	YEAR	\$ 1,150.00
Mailing Address				3	28	2019	
City	CHESTER	State	PA	Zip Code (Plus 4)	19013	Description of Expenditure REIMBURSEMENT FOR FUNDRAISER CATERING COSTS	
To Whom Paid FRIENDS OF JOY TAYLOR				MO	DAY	YEAR	\$ 1,635.00
Mailing Address				4	3	2019	
City	CHESTER	State	PA	Zip Code (Plus 4)	19013	Description of Expenditure DONATION TO JOY TAYLOR FOR MAGISTRATE	
To Whom Paid THADDEUS KIRKLAND				MO	DAY	YEAR	\$ 472.00
Mailing Address				4	5	2016	
City	CHESTER	State	PA	Zip Code (Plus 4)	19013	Description of Expenditure REIMBURSEMENT FOR FUNDRAISER COSTS	
To Whom Paid CHARLES DIXON/DYNAGRAPHIX				MO	DAY	YEAR	\$ 4,500.00
Mailing Address				4	16	2019	
City	PHILA	State	PA	Zip Code (Plus 4)	19124	Description of Expenditure ELECTION PALM CARDS, LITERATURE	
To Whom Paid FRIENDS OF ROHAN HEPKINS				MO	DAY	YEAR	\$ 200.00
Mailing Address				4	24	2019	
City	YEADON	State	PA	Zip Code (Plus 4)	19050	Description of Expenditure DONATION	

<b>To Whom Paid</b> JOAN NEAL			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 50.00
<b>Mailing Address</b>			5	2	2019	
<b>City</b> CHESTER	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19013	<b>Description of Expenditure</b> AD			

  

<b>To Whom Paid</b> BRYN MAWR TRUST			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 2,515.00
<b>Mailing Address</b>			4	2	2019	
<b>City</b> CHESTER	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19013	<b>Description of Expenditure</b> CHARGEBACK AND FEES-INSUFFICIENT FUNDS FROM DON			

  

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						<b>\$</b> 11,022.00

