Campaign Finance Report

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

Filer Identification 20140351 Number :						port ed B		CAND	IDATE		СОМІ	MITTEE	√	LOB	BYIST		
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		FRI	END:	S OF	DAVE W	HITE		-						
Street Address:																	
City:	MEDIA							State:	PA			Zip Cod	le: 19	9063			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	-	2.	30 DA PRIMA		POST-			AMENDMENT REPORT?		Yes	ľ	lo	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	<u>-</u>	5.	30 DA		POST-	6.		TERMINA REPORT?		Yes	Ī	lo	\
report type)	ANNUAL REPORT	7.	Year 2019					IG METH CHECK C				PAPER		\	DISK	ETTE	
Name of Office S	Sought by Candida	te:			-			DATE ()F EL	ECTI	ON	District Number	Office Code	Pa	rty Cod	e Cou	
	,							МО	DAY	,	YEAR	rtumber	10000			1000	
								11		5	2019	<u> </u>	(SEE IN	STRUCT	ONS FO	R CODES	5)
•	Receipts and	МО	DAY	YEAR	ł			мо	DAY		YEAR	FO	R OFFI	CE USE	ONL	f	
Expenditures	from:		5 7	2	019	T	0	6	5	10	2019						
A. Amount Bro	ught Forward Fror	n Last R	eport				\$			94	1,123.76						
B. Total Moneta	ary Contributions	And Rec	eipts (Fron	n Sche	dule	e I)	\$			1	,000.00						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			95	5,123.76						
D. Total Expend	ditures (From Sch	edule II	I)				\$			4	,500.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)			\$			90	,623.76						
F. Value Of In-	Kind Contributions	Receive	ed (From S	chedu	le II	I)	\$				0.00						
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV	/)			\$				0.00			•			
				AFF	·ID/	AVI	ΓSE	CTION									
	s a Committee rep	-	_						-								
I swear (or affirm) correct and comple) that this report, incl ete.	uding the	e attached sc	hedule	s file	d on	paper	or by elec	tronic	mediu	ım, are to	the best o	f my kno	wledge	and be	lief , tr	rue
Sworn to and subs	cribed before me this day of	;	20								Signatur	e of Perso	n Submit	ting Re	port		_
	Signatu	re	_				- -					Prin	ted Name	e			_
My Commission Ex	cpires						_					Ema	il				
	мо	D/	AY	YR					-	Area C	ode	Daytim	e Teleph	none Nu	ımber		
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nitte	ee, C	andid	ate shall	sign	here.							
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and beli	ief this	poli	itical	comm	ittee has i	not vio	lated	any provis	ions of the	e act of J	une 3,1	937 (P	.L. 133	з,
Sworn to and subsc	ribed before me this		20								S	ignature o	of Candid	ate			_
							-					Printe	d Name				- $ $
My Commission Exp	Signature						-					Ema	il				-
																	_
	МО	DA	AY	YR	1				Are	a Cod	е	Da	aytime T	elepho	ne Nun	ber	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF DAVE WHITE	From:	<u>5/7/201</u>	<u>9</u> То:	6/10/2019
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)			\$	0.00
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
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting) Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	1,000.00
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	1,000.00

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 or Candidat	e	R	Reporting	Period			
		F	rom:		То	:	
				DATE			AMOUNT
Full Name of Contributing Committee			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL\$ 0.00

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

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	Name of Filing Committee or Candidate					Reporting Period					
			Fro	m:		To) :				
		I			DATE			AMOUNT			
Full Name of Contributor				МО	DAY	YEAR					
Mailing Address		_					\$	0.00			
City	State	Zip Code (Plus 4)									

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

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		P	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			0.00
Mailing Address							- \$		0.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTA	AL
Enter Grand Total of Part C on Sche	dule I, Detailed Sun	nmary P	age, Sectio	n 3.			\$	(0.00

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	eriod			
				Fron	n:		Te) :	
					D	ATE			AMOUNT
Full Name of Contributor					МО	DAY	YEAR	\$	0.00
Mailing Address									
City	State	Zip	Code (Plus	s 4)					
Employer Name					Occupa	tion			
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip C	ode (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Sเ	umma	ary Page,	Section	on 3.			_	PAGE TOTAL
								\$	0.00

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 F	Period	
FRIENDS OF DAVE WHITE	From:	<u>5/7/2019</u> To:	6/10/2019
		DATE	AMOUNT

Full Name				DAY	VEAD				
UPPER DARBY REPUBLICAN CAMPAIGN C	OMMITTEE		МО	DAY	YEAR	\$	1,000.00		
Mailing Address			6	3	2019				
City DREXEL HILL	State	Zip Code (Plus 4)		3	2013				
	PA	19026							
Receipt Description (VOID) CAMPAIGN CONTRIBUTION (VOID)									

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

PAGE TOTAL \$ 1,000.00

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>5/7/2019</u> To:	6/10/2019
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (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,		\$	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:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	-	-	•	•	•			
Enter Grand Total of Part F on Sche	dule II, In-Kind	d Contributions Deta	iled Sum	mary Pag	ge,		PAGE TOTA	L
Section 2.						\$		0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Per	iod		
FRIENDS OF DAVE WHITE	From	<u>5/7/2019</u>	То:	6/10/2019

				DATE		AMOUNT	
To Whom Paid			мо	DAY	YEAR		
DELAWARE COUNTY REPUBLICAN FINANCE COMMITTEE			140		ILAN		
Mailing Address			5	8	2019	\$	1,000.00
City MEDIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	19063	CAMPAIGN CONTRIBUTION				
To Whom Paid SPRINGFIELD REPUBLICAN ORGANIZATION			мо	DAY	YEAR		
Mailing Address			5	15	2019	\$	1,000.00
City SPRINGFIELD	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	19064	CAMPAIGN CONTRIBUTION				
To Whom Paid				DAY	YEAR		
RIDLEY TOWNSHIP REPUBLICAN ORGANIZATION			МО		12/11		
Mailing Address			6	6	2019	\$	2,500.00
City WOODLYN	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	19094	CAMPAIGN CONTRIBUTION				
							PAGE TOTAL
Enter Grand Total of Expe	nditures on Page 1, Re	port Cover Page, Item D).			\$	4,500.00