Campaign Finance Report

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

| Filer Identificati Number : | i on 2014 | 0351 | | | Repo Filed | | | CANDI | DATE | | СОМ | MITTEE | ✓ | LOB | BYIST | | |
|--|---|-----------|----------------------|-----------------------------------|---------------|-----------------------|------|--------------------|-------------------|---------------|------------|--------------------|----------------|--------------|--------|--------------|--------------|
| Name of Filing C | Committee, Candid | ate or Lo | obbyist: | | FRIEN | DS 0 | FD | AVE WH | ITE | | | | | | | | |
| Street Address: | Street Address: 300 WEST STATE STREET,SUITE 206 | | | | | | | | | | | | | | | | |
| City: | MEDIA | | | | | State: PA Zip Code: 1 | | | | de: 19 | 063 | | | | | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDA PRIMARY | 2ND FRIDAY PRE- 2. 3 PRIMARY P | | | | / F RY | POST- 3. X | | | AMENDN REPORT | | Yes | Ν | lo | \checkmark |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. | | | | 30 I ELE | | | POST- 6. | | | TERMIN/ REPORT | Yes | Ν | lo | \checkmark | |
| report type) | ANNUAL REPORT | 7. | Year 2019 |) | | | | G METHO HECK OI | | | | PAPER | | \checkmark | DISK | ETTE | |
| Name of Office S | L Sought by Candidat | te: | | | | | 1 | DATE O | F ELEO | CTIC | N | District Number | Office Code | Par | ty Cod | e Cou Cod | |
| | | | | | | | 1 | мо | DAY | Y | EAR | | 10000 | | | 1000 | - |
| | | | | | | | | 11 | | 5 | 2019 | | (SEE INS | TRUCTI | ONS FO | R CODE | S) |
| | Receipts and | мо | DAY | YEAR | 2 | | | мо | DAY | Y | EAR | FC | R OFFIC | e use | ONLY | 1 | |
| Expenditures | s from: | | 5 7 | 7 2 | 019 | го | Ī | 6 | 1 | LO | 2019 | | | | | | |
| A. Amount Bro | ught Forward Fron | n Last R | eport | | | | \$ | | | 94, | 123.76 |] | | | | | |
| B. Total Monet | ary Contributions | And Rec | eipts (Fror | n Sche | dule I) | | \$ | | 1,000.00 | | | | | | | | |
| C. Total Funds | Available (Sum Of | Lines A | and B) | | | | \$ | | | 95, | 123.76 | | | | | | |
| D. Total Expen | ditures (From Scho | edule II | I) | | | | \$ | | | 4,5 | 500.00 | | | | | | |
| E. Ending Cash | Balance (Subtract | t Line D | From Line | C) | | | \$ | | | 90,6 | 523.76 | | | | | | |
| F. Value Of In- | Kind Contributions | Receiv | ed (From S | Schedu | le II) | | \$ | | | | 0.00 | | | | | | |
| G. Unpaid Deb | ts And Obligations | (From S | Schedule I | V) | | | \$ | | | | 0.00 | | | | | | |
| | | | | AFF | IDAV | IT S | SEC | CTION | | | | | | | | | |
| PART I - If this is | s a Committee repo | ort, trea | surer sign | here. | If this i | s a C | and | didate re | eport, c | andi | date sig | gn here. | | | | | |
| I swear (or affirm correct and compl |) that this report, incl ete. | uding the | e attached so | chedules | s filed o | ı pape | er o | r by electi | ronic me | edium | , are to i | the best o | f my knov | /ledge | and be | lief , t | rue |
| Sworn to and subs | cribed before me this day of | 5 | 20 | | | | | | | 9 | Signature | e of Perso | n Submitt | ing Rep | oort | | - |
| | Signatu | re | | | | _ | | | | | | Prin | ted Name | | | | _ |
| My Commission E | - | | | | | | | | | | | Ema | il | | | | |
| | мо | D | AY | YR | | | | | Are | ea Coo | le | Daytin | e Teleph | one Nu | mber | | |
| Part II- If this is | a report of a cand | lidate's | authorized | l Comn | nittee, | Cand | ida | te shall : | sign he | ere. | | | | | | | |
| I swear (or affirm) No 320) as amende | that to the best of n ed. | ny knowle | edge and bel | lief this | politica | l com | nmit | tee has n | ot violat | ed ar | ıy provis | ions of th | e act of Ju | ine 3,1 | 937 (P | .L. 133 | 33, |
| Sworn to and subso | ribed before me this day of | | 20 | | | | | | | | s | ignature (| of Candida | te | | | - |
| | | | | | | _ | | | | | | Printe | d Name | | | | - |
| My Commission From | Signature | | | | | _ | | | | | | Ema | il | | | | _ |
| My Commission Exp | | | | | | | | | | | | | | | | | |
| | мо | D | AY | YR | | | | | Area | Code | | D | aytime Te | lephor | e Num | ber | |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS 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 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) 1,000.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 1,000.00 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 | | | | | |
|---------------------------------------|-----------------------------|----------------------|------------------|------|------|----|------------|--|
| | | | From: | | То | : | | |
| | | · | | DATE | | | AMOUNT | |
| Full Name of Contributing | g Committee | | мо | DAY | YEAR | | | |
| Mailing Address | | | | | | \$ | 0.00 | |
| City | State | Zip Code (Plus 4) | | | | | | |
| | | | | | | Г | PAGE TOTAL | |
| Enter Grand Total of P | art A on Schedule I, Detail | ed Summary Page, Sec | tion 2. | | | \$ | 0.00 | |

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

\$

| 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 | te | | Rep | orting P | eriod | | | |
| From: To: | | | | | | | | |
| | | | | | 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, Detai | led 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 | | А | MOUNT |
| Full Name of Contributing Committe | e | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Cod | e (Plus 4) | | | | | |
| | | | | | | ſ | | PAGE TOTAL |
| Enter Grand Total of Part C on S | chedule I, Detai | led Summary 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 | Reporting Period | |
|---------------------------------------|------------------|-----|
| | From: | То: |

| | | | D | ATE | | AMOU | JNT |
|---|---------------------|---------------------|---------|-------|------|-------------|------------------------|
| Full Name of Contributor | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | \$ | 0.00 |
| City | State | Zip Code (Plus 4) | | | | | |
| Employer Name | | | Occupat | tion | | | |
| Employer Mailing Address/Principal Plac Business | e of | City | | State | | Zip Code (F | Plus 4) |
| Enter Grand Total of Part C on Sche | dule I, Detailed Su | ımmary Page, Sectio | on 3. | | \$ | | E 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 Repo | | | Report | Reporting Period | | | | | |
|---|--------------------|----------------------------|--------------------------|------------------|-----|--------------|------------------|------------|--|
| FRIENDS OF DAVE WHITE | | | From: <u>5/7/2019</u> To | | | <u>9</u> To: | <u>6/10/2019</u> | | |
| | | | | | ATE | AMOUNT | | | |
| Full Name UPPER DARBY REPUBLICAN CA | AMPAIGN COMMITTEE | | | мо | DAY | YEAR | | | |
| Mailing Address 5035 TOWNSHIP LINE ROAD | | | | | | | \$ | 1,000.00 | |
| City DREXEL HILL | State PA | Zip Code (19026 | Plus 4) | 6 | 3 | 2019 |) | | |
| Receipt Description (VOID) CAMPAIGN CONTRIBUTION (VOID) | | | | | | | | | |
| Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section | | | | | | | | PAGE TOTAL | |
| | | culling ruge, | | | | | \$ | 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> то: | <u>6/10/2019</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) | \$ | 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 | | АМС | DUNT | |
| 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 Schedule II, In-Kind Contributions Detail Section 2. | | | iled Sum | mary Pag | je, | PAGE | TOTAL | |
| | | | | | 4 | 5 | 0.00 | |

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

| Name of Filing Committee or Candidate | | | | Rep | Reporting 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 | | | | | Occupat | tion | | 1 | | |
| Employer Mailing Address/Principal Place of City State Business | | | | Zip 4) | Code(Plus | Descri | ption of | Contribution | | |

| Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed | PAGE TOTAL |
|--|------------|
| Summary Page, Section 3. | 0.00 |
| | |

SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate | 9 | | Reporti | ng Period | | | | |
|--|--------------------|-----------------------------------|---------|---------------------------------|--------|-----|------------------|--|
| FRIENDS OF DAVE WHITE | | | From | <u>5/</u> | 7/2019 | То: | <u>6/10/2019</u> | |
| | | | | DATE # | | | | |
| To Whom Paid DELAWARE COUNTY REPUBLICAN FINANCE COMMITTEE | | | мо | DAY | YEAR | | | |
| Mailing Address 323 WEST FRONT STREET | | | 5 | 8 | 2019 | \$ | 1,000.00 | |
| City MEDIA | State PA | Zip Code (Plus 4) 19063 | - | otion of Exp IGN CONT | | | | |
| To Whom Paid SPRINGFIELD REPUBLICAN ORGANIZA | ATION | | мо | DAY | YEAR | | | |
| Mailing Address PO BOX 423 | | | 5 | 15 | 2019 | \$ | 1,000.00 | |
| City SPRINGFIELD | State PA | Zip Code (Plus 4) 19064 | | otion of Exp IGN CONT | | | | |
| To Whom Paid RIDLEY TOWNSHIP REPUBLICAN ORG | ANIZATION | | мо | DAY | YEAR | | | |
| Mailing Address PO BOX 9 | | | 6 | 6 | 2019 | \$ | 2,500.00 | |
| CityWOODLYNStateZip Code (Plus 4)PA19094 | | | | otion of Exp IGN CONT | | | | |
| Enter Grand Total of Expenditures | on Page 1 Penor | t Cover Page Item I | | | | | PAGE TOTAL | |
| | on rage 1, Repor | t cover Page, Item | | | | \$ | 4,500.00 | |