### **Campaign Finance Report**

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

					Repo Filed		<b>/</b> :	CA	NDI	DATE		COM	AITTEE	<b>Y</b>	LUB	D1131	
Name of Filing C	Committee, Candid	ate or L	obbyist:		KIRKL	AN	D, T	HADI	DEU:	S FRIE	NDS	OF					
Street Address:																	
City:	CHESTER							State	e:	PA			Zip Cod	<b>ie:</b> 19	016		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	AY PRE-	- 2.		30 DA PRIMA		P	POST- 3.			AMENDMENT REPORT?		Yes	No	<b>~</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	AY PRE	5.2		30 DA		P	POST-	6.		TERMINA REPORT		Yes	No	<b>~</b>
report type)	ANNUAL REPORT	7.	<b>Year</b> 2019					IG ME					PAPER		⋈	DISKE	TTE
Name of Office S	Sought by Candida	te:	•		•			DAT	ΈO	F ELEC	CTIC	)N	District Number	Office Code	Par	rty Code	County Code
								МО		DAY	YI	EAR			·	·	
									11		5	2019		(SEE IN	STRUCTI	ONS FOR (	CODES)
Summary of Expenditures	Receipts and	МО	DAY	YEAR			_	МО		DAY	Y	EAR	FC	R OFFI	E USE	ONLY	
			9 17	20	019	TC	) 		10	2	21	2019					
A. Amount Brought Forward From Last Report \$											228.50						
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sche	dule I	)	\$				6,	111.11					
C. Total Funds	Available (Sum Of	Lines A	and B)				\$				16,3	339.61					
D. Total Expen	ditures (From Sch	edule II	I)				\$				6,1	195.37					
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)			\$				10,1	L44.24					
	Kind Contributions				le II)		\$					0.00			,		
G. Unpaid Debt	ts And Obligations	(From S	Schedule I\	/)			\$					0.00					
				AFF	IDAV	/IT	SE	CTI	NC								
I swear (or affirm)	s a Committee rep	-	_									_		f my knov	wledge	and beli	ef , true
correct and comple Sworn to and subs	ece. scribed before me this	<b>.</b>										Signature	of Perso	n Submitt	ing De	nort	
	day of		20								,	orginature.	01 1 6130	ii Subiiiici	ing Ke	port	
	Signatu	re				_							Prin	ted Name	•		
My Commission Ex	·					_			,				Ema				
	МО		AY	YR	•••	_					a Coo	ie	Daytim	e Teleph	one Nu	mber	
	a report of a cand				•					_		ny provis	ions of th	e act of Ji	une 3,1	937 (P.L	. 1333,
No 320) as amende	ed. ribed before me this																
	day of		20									S	ignature (	of Candida	ate		
			_										Printe	d Name			
My Commission Exp	Signature pires									Email							
	МО	D	AY	YR						Area	Code		D	aytime To	elephor	ne Numb	er

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	Reporting Period					
KIRKLAND, THADDEUS FRIENDS OF	From:	9/17/201	<u>9</u> To:	10/21/2019			
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)			\$	6,111.11			
TOTAL for the Reporting	) Period	(3)	\$	6,111.11			
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)							
TOTAL for the Reporting	J Period	(4)	\$	0.00			
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	6,111.11			

#### **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 Commit	ttee or Candidate			Report	ting I	Period			
				From:			То	:	
			•			DATE			AMOUNT
Full Name of Contributin	ng Committee			М	0	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 Committe	ee or Candidate	F	Reporting I	Period			
		F	From:		To	<b>)</b> :	
		•		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.

ame 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							<b>-</b>   \$		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.)

ame of Filing Committee of Candidate			Reporting Period					
KIRKLAND, THADDEUS FRIENDS OF			Fron	n:	9/17/2	<u>019</u> To	: 10/21/2019	<u>9</u>
				DA	ATE		AMOUNT	
Full Name of Contributor				МО	DAY	VEAD		
EVAN AND JAIME PROCHNIAK				МО	DAY	YEAR	\$ 1,000	0.00
Mailing Address				10	21	2019	7	
City	State	Zip Code (Plus	s 4)	10	21	2019		
Employer Name			Occupation					
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip Code (Plus 4)	
Full Name of Contributor				мо	DAY	YEAR	4 1,000	
KENNETH SCHUSTER				110	DAI	ILAK	\$ 1,000	0.00
Mailing Address				10	17	2019	1	
City MEDIA State Zip Code (Plus 4)			s <b>4</b> )					
PA 19063							l	
Employer Name				Occupat	ion			
Employer Name  Employer Mailing Address/Principal Place of Business City				Occupat				
• •	e of Business	City		Ссарис	State		Zip Code (Plus 4)	
• •	e of Business	City			State	VEAD		
Employer Mailing Address/Principal Plac	e of Business	City		мо		YEAR	<b>Zip Code (Plus 4)</b> \$ 1,111	.11
Employer Mailing Address/Principal Place	e of Business	City		мо	State			.11
Employer Mailing Address/Principal Place  Full Name of Contributor  JOE IACONA, III	e of Business	City Zip Code (Plus	s 4)		State	<b>YEAR</b> 2019		.11
Employer Mailing Address/Principal Place  Full Name of Contributor  JOE IACONA, III  Mailing Address			s 4)	мо	State			11
Employer Mailing Address/Principal Place  Full Name of Contributor  JOE IACONA, III  Mailing Address	State	Zip Code (Plus	; 4)	мо	DAY 18			11
Employer Mailing Address/Principal Place  Full Name of Contributor  JOE IACONA, III  Mailing Address  City CHESTER	<b>State</b> PA	Zip Code (Plus	s 4)	<b>MO</b> 10	DAY 18			.11
Employer Mailing Address/Principal Place  Full Name of Contributor  JOE IACONA, III  Mailing Address  City CHESTER  Employer Name  Employer Mailing Address/Principal Place  Full Name of Contributor	<b>State</b> PA	Zip Code (Plus 19013	s 4)	<b>MO</b> 10	DAY 18		\$ 1,111 Zip Code (Plus 4)	
Employer Mailing Address/Principal Place  Full Name of Contributor  JOE IACONA, III  Mailing Address  City CHESTER  Employer Name  Employer Mailing Address/Principal Place  Full Name of Contributor  ALLEN AND ANNMARIE KLENOTIZ	<b>State</b> PA	Zip Code (Plus 19013	s 4)	MO 10 Occupat	DAY  18  cion State	2019	\$ 1,111 Zip Code (Plus 4)	
Employer Mailing Address/Principal Place  Full Name of Contributor  JOE IACONA, III  Mailing Address  City CHESTER  Employer Name  Employer Mailing Address/Principal Place  Full Name of Contributor  ALLEN AND ANNMARIE KLENOTIZ  Mailing Address	State PA e of Business	Zip Code (Plus 19013		MO 10 Occupat	DAY  18  cion State	2019	\$ 1,111 Zip Code (Plus 4) \$ 1,000	
Employer Mailing Address/Principal Place  Full Name of Contributor  JOE IACONA, III  Mailing Address  City CHESTER  Employer Name  Employer Mailing Address/Principal Place  Full Name of Contributor  ALLEN AND ANNMARIE KLENOTIZ	State PA e of Business State	Zip Code (Plus 19013  City  Zip Code (Plus		MO 10 Occupat	DAY  18  cion State  DAY	2019 YEAR	\$ 1,111 Zip Code (Plus 4) \$ 1,000	
Employer Mailing Address/Principal Place  Full Name of Contributor  JOE IACONA, III  Mailing Address  City CHESTER  Employer Name  Employer Mailing Address/Principal Place  Full Name of Contributor  ALLEN AND ANNMARIE KLENOTIZ  Mailing Address	State PA e of Business	Zip Code (Plus 19013		MO  10  Occupat	DAY  18  cion State  DAY  15	2019 YEAR	\$ 1,111 Zip Code (Plus 4) \$ 1,000	
Employer Mailing Address/Principal Place  Full Name of Contributor  JOE IACONA, III  Mailing Address  City CHESTER  Employer Name  Employer Mailing Address/Principal Place  Full Name of Contributor  ALLEN AND ANNMARIE KLENOTIZ  Mailing Address	State PA e of Business State PA	Zip Code (Plus 19013  City  Zip Code (Plus		MO 10 Occupat	DAY  18  cion State  DAY  15	2019 YEAR	\$ 1,111 Zip Code (Plus 4) \$ 1,000	

									17102 /	
Full N	lame of Contributor				МО	DAY	YEAR			
VAHA	N AND DANIELLE GUREG	HIAN			МО	DAT	TEAR	\$	1,000.00	
Mailir	ng Address				10	10	2019	7		
City	GLADWYNNE	State	Zi	p Code (Plus 4)	] 10	10	2019			
		l <sub>PA</sub>	1 19	9036						
Employer Name					Occupat	tion				
Employer Mailing Address/Principal Place of Business City						State		Zip Cod	e (Plus 4)	
Full N	lame of Contributor				NO.	DAY	VEAD			
RONA	ALD STARR				МО	DAY	YEAR	\$	1,000.00	
Mailir	ng Address				10	9	2019	1		
City	BROOKHAVEN	State	Zi	p Code (Plus 4)	] 10	9	2019			
		l <sub>PA</sub>	1 19	9015						
Empl	oyer Name				Occupat	tion				
Empl	oyer Mailing Address/Prin	cipal Place of Business		City		State		Zip Code (Plus 4)		
				•		•		PAGE TOTAL		
Enter	Grand Total of Part C	on Schedule I, Detailed	Sumr	nary Page, Secti	on 3.			-	AGE TOTAL	
							!	\$	6 111 11	

6,111.11

## 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 Peri	od			
			From:			To:		
		<b>'</b>			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	lus 4)					
Receipt Description	<b>'</b>	<b>.</b>					<u> </u>	
				_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	Section	4.			\$	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 Perio	od	
KIRKLAND, THADDEUS FRIENDS OF	From:	<u>9/17/2019</u> <b>To:</b>	10/21/2019
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER 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	lame of Filing Committee or Candidate					Reporting Period					
	From:			То:							
				DATE			AMOUNT				
Full Name of Contributor			мо	DAY	YEAR						
Mailing Address		_				<b> </b>		0.00			
City	State	Zip Code (Plus 4)									
Description of Contribution:		•	•			•					
Enter Grand Total of Part F on Sche Section 2.	dule II, In-Kind (	Contributions Detai	iled Sum	mary Pag	je,		PAGE TOTAL				
						\$	(	0.00			

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate				Rep	porting	Period			
				Fro	m:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address				-				\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occup	ation			
Employer Mailing Address/Principal Plac	e of Business	City	у	State	e Zip	Code(Plus 4)	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, In-Kin	nd C	Contributions D	etaile	ed				PAGE TOTAL
Summary Page, Section 3.									0.00

### STATEMENT OF EXPENDITURES

Name of Filing Committee or	Candidate		Reporti	ng Period			
KIRKLAND, THADDEUS FRIE	NDS OF		From	9/1	7/2019	То:	10/21/2019
				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
BERRY AND HOMER							
Mailing Address				8	2019	\$	1,500.00
City CHESTER State Zip Code (Plus 4)				tion of Exp	enditure	•	
PA 19013				IGNS FOR	CHESTE	R TOWNSI	HIP
To Whom Paid			МО	DAY	YEAR		
THADDEUS KIRKLAND			1-10				
Mailing Address			7	8	2019	\$	500.00
City CHESTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA	19013	REIMBURSEMENT - FUNDRAISER FOR NUSRAT RACHID				
To Whom Paid			МО	DAY	YEAR		
FISHEAD FISHING CLUB			l l l		ILAN		
Mailing Address			7	30	2019	\$	500.00
City CHESTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA	19013	DONAT	ION			
To Whom Paid			МО	DAY	YEAR		
KLINE FOR JUDGE			1.10				
Mailing Address	lailing Address			28	2019	\$	500.00
City MEDIA State Zip Code (Plus 4)			Description of Expenditure				
PA 19063				ION			

DAY

DAY

**Description of Expenditure** 

**Description of Expenditure** 

PALM CARDS FOR ELECTION

МО

мо

Zip Code (Plus 4)

Zip Code (Plus 4)

19013

19124

8

YEAR

REIMBURSEMENT - DEL CNTY BREAKFAST

**YEAR** 

2019

\$

2019

**To Whom Paid** 

**Mailing Address** 

To Whom Paid

DYNAGRAPHIX

**Mailing Address** 

PHILA

City

City

THADDEUS KIRKLAND

CHESTER

State

State

PA

PA

8/29	/2025	3:34:47	PM

455.57

525.00

To Whom Paid					DAY	YEAR		
CHESTER HIGH SCHOOL CLASS OF 1979				МО		ILAK		
Mailing Address			9	6	2019	\$	100.00	
City (	CHESTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	19013	DONATI	ON			
To Whom Paid				мо	DAY	YEAR		
DYNAGRAPHIX/CHARLIE DIXON				МО	DAT	TEAR		
Mailing Address			10	11	2019	\$	1,990.00	
City F	PHILADELPHIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	19124	ELECTIO	ON PRINT I	MATERIA	L	
To Whom Paid				мо	DAY	YEAR		
TANISHA JENIFER				MO	DA1	ILAK		
Mailing Address			10	7	2019	\$	100.00	
City (	CHESTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	19013	DONATION				
To Whon	m Paid			мо	DAY	YEAR		
BONNIE	BREESE BENTUM			MO	DA1	ILAK		
Mailing Address			10	7	2019	\$	25.00	
City (	City CHESTER State Zip Code (Plus 4) Description				cription of Expenditure			
		PA	19013	DONATION				
								PAGE TOTAL
Enter G	Grand Total of Expenditures of	on Page 1, Report C	over Page, Item D	•			\$	6,195.57
								,