Campaign Finance Report

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

| Filer Identificat Number : | ion 2016 | 0113 | | | Report Filed B | | CANDI | DATE | | СОМІ | MITTEE | < | LOBE | BYIST | |
|---|----------------------------------|------------|-----------------------|---------|-------------------|---------------|---------------------|--------------|-------------|----------|--------------------|----------------|--------------|-----------|----------------|
| | Committee, Candid | ate or Lo | bbyist: | | | - | BRIAN KI | I. IRKLAN | D | | | _ | | | |
| Street Address: | P O BOX 755 | | - | | | | | | | | | | | | |
| City: | CHESTER | | | | | | State: | PA | | | Zip Co | de: 19 | 016 | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDA PRIMARY | Y PRE | - 2. | 30 DA PRIM | | POST- | 3. X | | AMENDI REPORT | | Yes | No | \checkmark |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDA ELECTION | Y PRE | 5. | 30 DA ELEC | | POST- | 6. | | TERMIN REPORT | | Yes | No | \checkmark |
| report type) | ANNUAL REPORT | 7. | Year 2020 | | | | NG METHO CHECK O | | | | PAPER | | \checkmark | DISKE | TTE |
| Name of Office | L Sought by Candidat | te: | | | | | DATE O | F ELEC | CTIO | N | District Number | Office Code | Par | ty Code | County Code |
| | | | | | | | мо | DAY | YE | AR | | | DEN | 1 | |
| | | | | | | | 11 | | 3 | 2020 | | (SEE INS | STRUCTIO | ONS FOR (| CODES) |
| | Receipts and | мо | DAY | YEAR | Ł | | мо | DAY | YE | AR | FC | OR OFFIC | E USE | ONLY | |
| Expenditures | s from: | | 5 19 | 2 | 020 T | 0 | 6 | 2 | 2 | 2020 | | | | | |
| A. Amount Bro | ought Forward From | n Last Re | eport | | | \$ | | | 10,9 | 984.17 | | | | | |
| B. Total Monet | ary Contributions | And Rece | eipts (From | 1 Sche | dule I) | \$ | | | 15,0 |)70.77 | | | | | |
| C. Total Funds | Available (Sum Of | Lines A | and B) | | | \$ | | | 26,0 |)54.94 | | | | | |
| D. Total Expen | ditures (From Scho | edule III | .) | | | \$ | | | 11,0 | 15.75 | | | | | |
| E. Ending Cash | Balance (Subtract | t Line D I | From Line | C) | | \$ | | | 15,0 | 39.19 | - | | | | |
| F. Value Of In- | Kind Contributions | Receive | ed (From S | chedu | le II) | \$ | | | | 0.00 | 4 | | | | |
| G. Unpaid Deb | ts And Obligations | (From S | chedule IV | ') | | \$ | | | | 0.00 | | | | | |
| | | | | AFF | IDAVI | T SE | CTION | | | | | | | | |
| | s a Committee rep | • | - | | | | | • • | | | - | | | | |
| I swear (or affirm correct and compl |) that this report, incl ete. | uding the | attached sc | hedules | s filed on | paper | or by elect | ronic me | dium, | , are to | the best o | f my knov | vledge | and beli | ef , true |
| Sworn to and sub | scribed before me this day of | 5 | 20 | | | | | | s | ignatur | e of Perso | n Submitt | ing Rep | ort | |
| | Signatu | re | | | | - | | | | | Prir | ted Name | 1 | | |
| My Commission E | xpires | | | | | _ | | | | | Ema | il | | | |
| | МО | DA | Y | YR | | | | Are | a Cod | e | Daytin | ne Teleph | one Nu | mber | |
| Part II- If this is | a report of a cano | lidate's a | authorized | Comn | nittee, C | andid | ate shall | sign he | re. | | | | | | |
| I swear (or affirm) No 320) as amend |) that to the best of n ed. | ny knowle | dge and beli | ef this | political | comm | ittee has n | ot violat | ed an | y provis | ions of th | e act of Ju | ıne 3,19 | 937 (P.L | . 1333, |
| Sworn to and subse | cribed before me this day of | | 20 | | | | | | | s | ignature | of Candida | ate | | |
| | | | | | | - | | | | | Printe | ed Name | | | |
| My Commission Exp | Signature pires | | | | | - | | | | | Ema | il | | | |
| | мо | DA | Y | YR | 1 | - | | Area (| Code | | D | aytime Te | elephon | e Numb | er |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** FRIENDS OF BRIAN KIRKLAND From: <u>5/19/2020</u> To: 6/22/2020 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 50.00 \$ **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)** 5,393.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 5,393.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 0.00 9,427.77 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 9,427.77 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 \$ 14,870.77 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 Commit | tee 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.

| | art to itemize | \$50.03 all other to \$250.0 | 00 in the repo | s wit | th an g peri | aggre iod. | _ | | | rom |
|--|--------------------|------------------------------------|-----------------------------------|-------|-----------------|---------------|------|---------------|----|------------------|
| Name of Filing Committee | or Candidate | | | Repo | orting Po | eriod | | | | |
| FRIENDS OF BRIAN KIRK | LAND | | | From | 1: | <u>5/19</u> | 9/20 | 020 To | : | <u>6/22/2020</u> |
| | | | | | | DATE | | | | AMOUNT |
| Full Name of Contributor CASTELL AND ADREINNE A | BNER, JR | | | | мо | DAY | , | YEAR | | |
| Mailing Address 212 BE/ | AU TREE DR | | | | | | | | \$ | 200.00 |
| City WILMINGTON | State DE | | Zip Code (Plus 4) 19810 | | 6 | | 8 | 2020 | | |
| Full Name of Contributor TERRANCE AND JOY TAYLO | R | | | | мо | DAY | , | YEAR | | |
| Mailing Address 924 MC | DOWELL AVE | | | | ć | | | 2020 | \$ | 250.00 |
| City CHESTER | State PA | | Zip Code (Plus 4) 19013 | | 6 | | 4 | 2020 | | |
| Full Name of Contributor RICK AND SUSAN DENNIS | | | | | мо | DAY | , | YEAR | | |
| Mailing Address 218 ARI | BOR DR | | | | | | | | \$ | 140.00 |
| City CHESTER | State PA | | Zip Code (Plus 4) 19013 | | 6 | | 4 | 2020 | | |
| Full Name of Contributor MICHAEL HURST | | | | | мо | DAY | | YEAR | | |
| Mailing Address 618 W. | 13TH ST | | | | | | | | \$ | 250.00 |
| City CHESTER | State PA | | Zip Code (Plus 4) 19013 | | 6 | | 3 | 2020 | | |
| Full Name of Contributor JOHN BUSH | | | | | мо | DAY | , | YEAR | | |
| Mailing Address 1609 EI | DGMONT AVE | | | | | | | | \$ | 150.00 |
| City CHESTER | State PA | | Zip Code (Plus 4) 19013 | | 6 | | 1 | 2020 | | |

| Full Name of Cont | tributor | | | | DAY | VEAD | |
|---|---|----------------------------|-------------------------------------|---------------|------------------------|------------------------------|----------------------|
| MIA CHEATHAM | | | | мо | DAY | YEAR | |
| Mailing Address | 1702 W. 7TH ST | | | | | | \$ 125.0 |
| City CHESTER | | State | Zip Code (Plus 4) | 6 | 1 | 2020 | |
| | | PA | 19013 | | | | |
| Full Name of Cont FRIENDS OF MAR | | · | | мо | DAY | YEAR | |
| Mailing Address | P.O. BOX 308 | | | | | | \$ 250.0 |
| City LANSDOW | VNE | State | Zip Code (Plus 4) | 5 | 29 | 2020 | |
| | | PA | 19050 | | | | |
| Full Name of Cont | | | | мо | DAY | YEAR | |
| Mailing Address | 138 E. 18TH ST | | | | | | \$ 200.0 |
| City CHESTER | | State | Zip Code (Plus 4) | 5 | 27 | 2020 | |
| | | РА | 19013 | | | | |
| | | | | | | | |
| Full Name of Cont MARTHA LEE | ributor | | | мо | DAY | YEAR | |
| | 403 AVENUE OF TH | IE STATES | | мо | DAY | YEAR | \$ 100.0 |
| MARTHA LEE Mailing Address | 403 AVENUE OF TH | IE STATES | Zip Code (Plus 4) | мо | DAY 27 | YEAR 2020 | \$ 100.0 |
| MARTHA LEE Mailing Address | 403 AVENUE OF TH | | Zip Code (Plus 4) 19013 | | | | \$ 100.0 |
| MARTHA LEE Mailing Address | 403 AVENUE OF TH | State | | | | | \$ 100.0 |
| MARTHA LEE Mailing Address City CHESTER Full Name of Cont | 403 AVENUE OF TH | State | | - 5 | 27 | 2020 | \$ 100.0 \$ 100.0 |
| MARTHA LEE Mailing Address City CHESTER Full Name of Cont ELROY LEWIS Mailing Address | 403 AVENUE OF TH | State | | - 5 | 27 | 2020 | |
| MARTHA LEE Mailing Address City CHESTER Full Name of Cont ELROY LEWIS Mailing Address | 403 AVENUE OF TH | State PA | 19013 | - 5 MO | 27 DAY | 2020 YEAR | |
| MARTHA LEE Mailing Address City CHESTER Full Name of Cont ELROY LEWIS Mailing Address | 403 AVENUE OF TH | State PA State | 19013 Zip Code (Plus 4) | - 5 MO | 27 DAY | 2020 YEAR | |
| MARTHA LEE Mailing Address City CHESTER Full Name of Cont ELROY LEWIS Mailing Address City CHESTER Full Name of Cont | 403 AVENUE OF TH | State PA State | 19013 Zip Code (Plus 4) | мо 5 | 27 DAY 27 | 2020 YEAR 2020 | |
| MARTHA LEE Mailing Address City CHESTER Full Name of Cont ELROY LEWIS Mailing Address City CHESTER Full Name of Cont JOHN SHELTON Mailing Address | 403 AVENUE OF TH ributor 702 VILLA DRIVE ributor 138 E. 18TH ST | State PA State | 19013 Zip Code (Plus 4) | мо 5 | 27 DAY 27 | 2020 YEAR 2020 | \$ 100.0 |
| MARTHA LEE Mailing Address City CHESTER Full Name of Cont ELROY LEWIS Mailing Address City CHESTER Full Name of Cont JOHN SHELTON Mailing Address | 403 AVENUE OF TH ributor 702 VILLA DRIVE ributor 138 E. 18TH ST | State PA State PA | 19013 Zip Code (Plus 4) 19013 | мо 5 мо | 27 DAY 27 DAY | 2020 YEAR 2020 YEAR | \$ 100.0 |

| | | | | | | | PAGL | |
|--|-----------------|-------------------------|-----------------------------------|-----------|---------------|---------------------|------|--------|
| Full Name of Contribu | tor | | | | DAY | VEAD | | |
| SHAYLA GORTMAN | | | | мо | DAY | YEAR | | |
| Mailing Address 1 | 34 MOUNTAIN MA | PLE LANE | | | | | \$ | 250.00 |
| City BYTHEWOOD | | State | Zip Code (Plus 4) | 5 | 26 | 2020 | | |
| | | SC | 29016 | | | | | |
| Full Name of Contribu LIBRA JACKSON | tor | | | мо | DAY | YEAR | | |
| Mailing Address 4 | 324 TACKAWANNA | A ST | | | | | \$ | 200.00 |
| City PHILA | | State | Zip Code (Plus 4) | 5 | 26 | 2020 | | |
| | | РА | 19124 | | | | | |
| Full Name of Contribut | or | | | мо | DAY | YEAR | | |
| Mailing Address 4 | 324 TACKAWANNA | A ST | | | | | \$ | 200.00 |
| City PHILA | | State | Zip Code (Plus 4) | 5 | 26 | 2020 | | |
| | | РА | 19124 | | | | | |
| Full Name of Contribut | tor | | | мо | DAY | YEAR | | |
| Mailing Address P | O. BOX 1132 | | | | | | \$ | 100.00 |
| City BROOKHAVEN | | State | Zip Code (Plus 4) | 5 | 26 | 2020 | | |
| | | PA | 19015 | | | | | |
| Full Name of Contribu | or | | | | | | | |
| DAVID CLARK | | | | мо | DAY | YEAR | | |
| Mailing Adduses | 14 CHESTNUT PKV | VY | | мо | DAY | YEAR | \$ | 100.00 |
| Mailing Address 1 | 14 CHESTNUT PK | VY State | Zip Code (Plus 4) | мо | DAY 26 | YEAR 2020 | \$ | 100.00 |
| Mailing Address 1 | 14 CHESTNUT PK | | Zip Code (Plus 4) 19086 | | | | \$ | 100.00 |
| Mailing Address 1 | 14 CHESTNUT PKV | State | | | | | \$ | 100.00 |
| Mailing Address 1 City WALLINGFORM | 14 CHESTNUT PKV | State PA | | - 5 | 26 | 2020 | \$ | 250.00 |
| Mailing Address 1 City WALLINGFORM Full Name of Contribut ERWIN LANIER Mailing Address 4 | 14 CHESTNUT PK | State PA | | - 5 | 26 | 2020 | | |
| Mailing Address 1 City WALLINGFORM Full Name of Contribut ERWIN LANIER Mailing Address 4 | 14 CHESTNUT PK | State PA E STATES | 19086 | 5 | 26 DAY | 2020 YEAR | | |

PAGE 7

| | | | | | | | PAGL / |
|-------------------------------------|-------------------|-------|-------------------|----|-----|------|------------------|
| Full Name of Cont | tributor | | | мо | DAY | YEAR | |
| CALVIN BERNARI | C | | | 10 | DAT | TLAK | |
| Mailing Address | 4016 ELSON RD | | | | | | \$ 250.00 |
| City BROOKHA | AVEN | State | Zip Code (Plus 4) | 5 | 22 | 2020 | |
| | | PA | 19015 | | | | |
| Full Name of Cont LIVIA SMITH | tributor | | | мо | DAY | YEAR | |
| Mailing Address | 930 E. 18TH ST | | | | | | \$ 250.00 |
| City CHESTER | | State | Zip Code (Plus 4) | 5 | 19 | 2020 | |
| | | РА | 19013 | | | | |
| Full Name of Cont SUSIE KIRKLAND | | · | | мо | DAY | YEAR | |
| Mailing Address | 1027 1/2 W. 8TH S | Т | | | | | \$ 250.00 |
| City CHESTER | | State | Zip Code (Plus 4) | 5 | 19 | 2020 | |
| | | PA | 19013 | | | | |
| Full Name of Cont THADDEUS KIRK | | | | мо | DAY | YEAR | |
| Mailing Address | 1027 1/2 W. 8TH S | Т | | | | | \$ 250.00 |
| City CHESTER | | State | Zip Code (Plus 4) | 5 | 19 | 2020 | |
| | | PA | 19013 | | | | |
| Full Name of Cont SHAREETA JOE | tributor | | | мо | DAY | YEAR | |
| Mailing Address | 209 E. 13TH ST | | | | | | \$ 250.00 |
| City CHESTER | | State | Zip Code (Plus 4) | 5 | 19 | 2020 | |
| | | РА | 19013 | | | | |
| Full Name of Cont ANTHONY MOOR | | | | мо | DAY | YEAR | |
| Mailing Address | 112 W. ELKINTON | AVE | | | | | \$ 200.00 |
| City CHESTER | | State | Zip Code (Plus 4) | 5 | 19 | 2020 | |
| | | РА | 19013 | | | | |
| | | | | | | | |

| Full Name of Contributor EDITH BLACKWELL Mail DAY VER Mailing Address 46.3 LEFFREY ST Total | | | | | | | | |
|---|---|----------------|-------------|-------------------|---------------|--------------------------------|------------------------------------|--------------|
| City City City City City City State Zip Code (Plus 4) Total Total PA Zip Code (Plus 4) Total Pa Pa <t< td=""><td></td><td></td><td></td><td></td><td>мо</td><td>DAY</td><td>YEAR</td><td></td></t<> | | | | | мо | DAY | YEAR | |
| City PACity 19013City Code (Fils 4) 19013MODAYYEARFull Name of Contributor | Mailing Address | 463 JEFFREY ST | | | | | | \$ 200.00 |
| JOAN NEAL MO PAY YEAR Moiling Address 1704 W. 7TH ST $21p$ Code (Plus 4) 51 1913 | City CHESTER | L. | | | 5 | 19 | 2020 | |
| Total in the problem of the problem o | | tributor | | | мо | DAY | YEAR | |
| City PACHESTERState PALP Gue (Fits F) 19013MODAYYEARFull Name of Contributor | Mailing Address | 1704 W. 7TH ST | | | | | | \$ 200.00 |
| MARK ALEXANDER MO DAY YEAR Mailing Address 233 E. 13TH ST $Z13 E. T = T = T = T = T = T = T = T = T = T $ | City CHESTER | | | | 5 | 19 | 2020 | |
| City CHESTER State Zip Code (Plus 4) 5 19 2020 \$ 100.00 Full Name of Contributor PA 19013 MO DAY YEAR Mailing Address 214 EDWARDS ST State Zip Code (Plus 4) 5 19 2020 \$ 100.00 City CHESTER State Zip Code (Plus 4) 5 19 2020 \$ 100.00 Full Name of Contributor PA Zip Code (Plus 4) 5 19 2020 \$ 100.00 Full Name of Contributor PA Zip Code (Plus 4) 5 19 2020 \$ 100.00 Full Name of Contributor PA Zip Code (Plus 4) 5 19 2020 \$ 100.00 Full Name of Contributor PA Zip Code (Plus 4) 9050 4 92 2020 \$ 100.00 Full Name of Contributor PA Zip Code (Plus 4) 90 DAY YEAR \$ 100.00 Full Name of Contributor PA Zip Code (Plus 4) 90 DAY YEAR \$ 100.0 | | | | | мо | DAY | YEAR | |
| City CHESTER State Zip Code (Plus 4) C <thc< th=""> C <thc< th=""> C C C</thc<></thc<> | Mailing Address | 233 E. 13TH ST | | | | | | \$ 100.00 |
| MO DAY YEAR Mailing Address 214 EDWARDS ST TO AVONDALE RD APT 6C To Code (Plus 4) 19013 A To DAY PA | City CHESTER | L | | | 5 | 19 | 2020 | |
| CityCHEENERState PAZip Code (Plus 4) 190135192020\$100.00Full Name of Contributor PETER RKARDPAZip Code (Plus 4) 19050MoDAYYEAR YEARYEARMailing Address178 PARK PLACEZip Code (Plus 4) 190505192020\$100.00CityYEADONState PAZip Code (Plus 4) 190505192020\$100.00Full Name of Contributor TYRA STARRState | | | | | мо | DAY | YEAR | |
| City CHESTER State Zip Code (Plus 4) Image: Code (Plus 4) Im | Mailing Address | 214 EDWARDS ST | | | | | | \$ 100.00 |
| PETER RKARD MO DAY YEAR Mailing Address 178 PARK PLACE To be the second | City CHESTER | L. | | Zip Code (Plus 4) | 5 | 10 | | |
| State PAZip Code (Plus 4) 190505192020\$100.00Full Name of Contributor TYRA STARRPA19050MODAYYEAR\$100.00Mailing Address | | | PA | 19013 | | 19 | 2020 | |
| City YEADON State Zip Code (Plus 4) Image: Code (Plus 4) Image: Code (Plus 4) PA 19050 19050 Mo DAY YEAR Full Name of Contributor TYRA STARR Mo DAY YEAR Mailing Address 700 AVONDALE RD APT 6C Total Code (Plus 4) 5 19 City WALLINGFORD State Zip Code (Plus 4) 5 19 2020 | | tributor | PA | 19013 | | | | |
| MO DAY YEAR Mailing Address 700 AVONDALE RD APT 6C Apt 6C City WALLINGFORD State Zip Code (Plus 4) | PETER RKARD | | PA | 19013 | | | | \$ 100.00 |
| City WALLINGFORD State Zip Code (Plus 4) 5 19 2020 \$ 100.00 | PETER RKARD | | State | Zip Code (Plus 4) | мо | DAY | YEAR | \$ 100.00 |
| City WALLINGFORD | PETER RKARD Mailing Address City YEADON Full Name of Con | 178 PARK PLACE | State | Zip Code (Plus 4) | мо 5 | DAY 19 | YEAR 2020 | \$ 100.00 |
| | PETER RKARD Mailing Address City YEADON Full Name of Con TYRA STARR | 178 PARK PLACE | State PA | Zip Code (Plus 4) | мо 5 мо | DAY 19 DAY | YEAR 2020 YEAR | |

| Full Name of Contributor LEO HOLMES | | | мо | DAY | YEAR | |
|--|--------------------|-----------------------------------|----|-----|------|------------------|
| Mailing Address 244 BLANC | CHARD RD | | | | | \$ 100.00 |
| City DREXEL HILL | State PA | Zip Code (Plus 4) 19026 | 5 | 19 | 2020 | |
| Full Name of Contributor LEOLA WILLIAMS | | | мо | DAY | YEAR | |
| Mailing Address 1006 W. 7 | TH ST | | | | | \$ 100.00 |
| City CHESTER | State PA | Zip Code (Plus 4) 19013 | 5 | 19 | 2020 | |

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

PAGE TOTAL

5,393.00

\$

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 Cand | idate | | Reporting | Period | | | | |
|----------------------------------|--------------------|---------------|-------------|--------|-----|------|----|------------|
| | | | From: | | | То: | | |
| | | | | DA | TE | | А | MOUNT |
| Full Name of Contributing Commit | ttee | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Cod | e (Plus 4) | | | | | |
| | | | | | | ſ | | PAGE TOTAL |
| Enter Grand Total of Part C on | Schedule I, Detail | ed 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 | | | | Repo | orting Pe | riod | | |
|---|--------------------|-----------------------|-----------------|------|-----------|---------------|---------------|--------------------|
| FRIENDS OF BRIAN KIRKLAND | | | | Fron | n: | <u>5/19/2</u> | <u>020</u> Ta | : <u>6/22/2020</u> |
| | | | | | DA | ATE | | AMOUNT |
| Full Name of Contributor DEXTER AND MICHELLE DAVIS | | | | | мо | DAY | YEAR | |
| Mailing 1107 MARSH RD Address | | | | | _ | | | \$ 400.00 |
| City WILMINGTON | State DE | Zip Co 1980 | ode (Plus | 4) | 5 | 19 | 2020 | |
| Employer Name | | | | | Occupat | ion | | |
| Employer Mailing Address/Principal Plac Business | e of | | City | | | State | | Zip Code (Plus 4) |
| Full Name of Contributor SHAKUR ABDUL-ALI | | | | | мо | DAY | YEAR | |
| Mailing 403 AVENUE OF THE | STATES | | | | | | | \$ 500.00 |
| City CHESTER | State PA | Zip Co | ode (Plus .3 | 4) | 5 | 20 | 2020 | |
| Employer Name | | | | | Occupat | ion | 1 | |
| Employer Mailing Address/Principal Plac Business | e of | | City | | <u> </u> | State | | Zip Code (Plus 4) |
| Full Name of Contributor KENNETH SCHUSTER | | | | | мо | DAY | YEAR | |
| Mailing 334 W. FRONT ST Address | | | | | _ | | | \$ 500.00 |
| City MEDIA | State PA | Zip C | ode (Plus | 4) | 5 | 20 | 2020 | |
| Employer Name | | | | | Occupat | ion | | |
| Employer Mailing Address/Principal Plac Business | e of | | City | | | State | | Zip Code (Plus 4) |

| Full Name of Contributor | | | мо | DAY | YEAR | |
|---|---------------------|------------------------------------|---------|---------------------------|------|--------------------------------|
| PORTIA WEST | | | | | | |
| Mailing 112 W. ELKINTON AVI Address | E | | | | | \$ 500.00 |
| City CHESTER | State | Zip Code (Plus 4) | 5 | 20 | 2020 | |
| | PA | 19013 | | | | |
| Employer Name | | | Occupat | ion | | |
| Employer Mailing Address/Principal Place Business | e of | City | | State | | Zip Code (Plus 4) |
| Full Name of Contributor WILBUR KIRKLAND | | | мо | DAY | YEAR | |
| Mailing 127 KIMBERWICK CIR Address | | | | | | \$ 500.00 |
| City GLENMOORE | State | Zip Code (Plus 4) | - 5 | 20 | 2020 | |
| | РА | 19343 | | | | |
| Employer Name | | | Occupat | ion | | |
| Employer Mailing Address/Principal Place Business | e of | City | | State | | Zip Code (Plus 4) |
| Full Name of Contributor JOSEPH IACONA III | | | мо | DAY | YEAR | |
| Mailing601 CONCORD AVEAddress | | | | | | |
| | | | | | | \$ 777.77 |
| City CHESTER | State PA | Zip Code (Plus 4) 19013 | - 5 | 20 | 2020 | \$ 777.77 |
| | | | Occupat | | 2020 | \$ 777.77 |
| City CHESTER | РА | | | | | \$ 777.77 Zip Code (Plus 4) |
| City CHESTER Employer Name Employer Mailing Address/Principal Place | РА | 19013 | | ion | | |
| City CHESTER Employer Name Employer Mailing Address/Principal Place Business Full Name of Contributor | PA e of | 19013 | MO | ion State DAY | YEAR | |
| City CHESTER Employer Name Employer Mailing Address/Principal Place Business Full Name of Contributor ELAINE KIRKLAND Mailing 127 KIMBEDWICK CIP | PA e of | 19013 | Occupat | ion State | | Zip Code (Plus 4) |
| City CHESTER Employer Name Employer Mailing Address/Principal Place Business Full Name of Contributor ELAINE KIRKLAND Mailing Address 127 KIMBERWICK CIR | PA e of | 19013 City | MO | ion State DAY | YEAR | Zip Code (Plus 4) |
| City CHESTER Employer Name Employer Mailing Address/Principal Place Business Full Name of Contributor ELAINE KIRKLAND Mailing Address 127 KIMBERWICK CIR | PA e of State | 19013 City Zip Code (Plus 4) | MO | ion State DAY 20 | YEAR | Zip Code (Plus 4) |

| Mailing Address 1832 W. 6TH ST Zip Code (Plus 4) PA 5 22 2020 \$ 250.00 City CHESTER State PA Zip Code (Plus 4) 19013 5 22 2020 \$ \$ 2020 \$ \$ 2020 \$ 2020 \$ 2020 \$ 2020 \$ \$ 2020 \$ \$ 2020 \$ 2020 \$ \$ 2020 \$ \$ 2020 \$ \$ 2020 \$ \$ 2020 \$ \$ 2020 \$ \$ 20200 |
|---|
| City CHESTER State Zip Code (Flus 4) PA 19013 Occupation Employer Name Occupation Full Name of Contributor RONALD STARR City State Zip Code (Plus 4) Mailing Address 32 HILL ST MO DAY YEAR Mailing Address 32 HILL ST State Zip Code (Plus 4) 5 22 2020 \$ 500.00 City BROOKHAVEN State Zip Code (Plus 4) 19015 5 22 2020 \$ 500.00 Employer Name Occupation City State Zip Code (Plus 4) 5 21 2020 \$ 500.00 Employer Name Occupation City State Zip Code (Plus 4) 2020 \$ 500.00 Employer Name Occupation State Zip Code (Plus 4) 2020 \$ 500.00 Employer Mailing Address/Principal Place of Business City State Zip Code (Plus 4) \$ 500.00 Full Name of Contributor FRIENDS OF MATT BRADFORD MO DAY YEAR YEAR |
| PA 19013 I |
| Employer Mailing Address/Principal Place of Business City State Zip Code (Plus 4) Full Name of Contributor RONALD STARR MO DAY YEAR Mailing Address 32 HILL ST MO DAY YEAR Mailing Address 32 HILL ST 5 22 2020 \$500.00 City BROOKHAVEN State Zip Code (Plus 4) 19015 5 22 2020 \$500.00 Employer Name Occupation City State Zip Code (Plus 4) \$19015 \$2020 \$1000 Full Name of Contributor FRIENDS OF MATT BRADFORD MO DAY YEAR YEAR \$10000 \$10000 < |
| Business MO DAY YEAR Full Name of Contributor RONALD STARR 32 HILL ST MO DAY YEAR Mailing Address 32 HILL ST T T T T City BROOKHAVEN State PA Zip Code (Plus 4) 19015 T T T Employer Name City City State Business City State State Zip Code (Plus 4) 19015 T T Employer Mailing Address/Principal Place of Business City State Zip Code (Plus 4) Full Name of Contributor FRIENDS OF MATT BRADFORD MO DAY YEAR |
| RONALD STARR MO DAY YEAR Mailing Address 32 HILL ST |
| Address S2 INLEST State Zip Code (Plus 4) 5 22 2020 \$ \$ City BROOKHAVEN PA 19015 Occupation Employer Name Occupation Employer Mailing Address/Principal Place of Business City State Zip Code (Plus 4) Full Name of Contributor MO DAY YEAR Mailing P.O. BOX 240 D.O. BOX 240 D.O. BOX 240 |
| City BROOKHAVEN State Zip Code (Plus 4) Image: State Image: State< |
| PA 19015 Employer Name Occupation Employer Mailing Address/Principal Place of Business City State Zip Code (Plus 4) Full Name of Contributor FRIENDS OF MATT BRADFORD MO DAY YEAR |
| Employer Mailing Address/Principal Place of Business City State Zip Code (Plus 4) Full Name of Contributor FRIENDS OF MATT BRADFORD MO DAY YEAR |
| Business MO DAY YEAR Full Name of Contributor FRIENDS OF MATT BRADFORD MO DAY YEAR Mailing D.O. BOX 340 D.O. BOX 340 D.O. BOX 340 |
| FRIENDS OF MATT BRADFORD MO DAY YEAR Mailing D.O. BOX 340 D.O. BOX 340 D.O. BOX 340 |
| |
| Address F.0. BOX 349 \$ 1,000.00 |
| City NORRISTOWN State Zip Code (Plus 4) 5 27 2020 |
| PA 19404 |
| Employer Name Occupation |
| Employer Mailing Address/Principal Place of City State Zip Code (Plus 4) Business |
| Full Name of Contributor MO DAY YEAR FRIENDS OF MATT BRADFORD MO DAY YEAR |
| Mailing Address P.O. BOX 349 \$ 500.00 |
| City NORRISTOWN State Zip Code (Plus 4) 6 1 2020 PA 19404 |
| Employer Name Occupation |
| |

| Full Name of Contributor FRIENDS OF FRANK DERMODY | | мо | DAY | YEAR | | | | | |
|--|---------------------|-----------------------------------|---------|------------|------|--------------------|--|--|--|
| Mailing P.O. BOX 274 Address | | | | | | \$ 1,000.00 | | | |
| City TARENTUM | State | Zip Code (Plus 4) | 5 | 28 | 2020 | | | | |
| | PA | 15084 | | | | | | | |
| Employer Name | | | Occupat | tion | 1 | | | | |
| Employer Mailing Address/Principal Plac Business | e of | City | | State | | Zip Code (Plus 4) | | | |
| Full Name of Contributor CITIZENS FOR JORDAN HARRIS | | | мо | DAY | YEAR | | | | |
| Mailing P.O. BOX 32097 Address | - | | - 6 | 1 | 2020 | \$ 1,000.00 | | | |
| City PHILA | State PA | Zip Code (Plus 4) 19145 | 0 | | 2020 | | | | |
| Employer Name | | | | Occupation | | | | | |
| Employer Mailing Address/Principal Plac Business | e of | City | 1 | State | | Zip Code (Plus 4) | | | |
| Full Name of Contributor | | | мо | DAY | YEAR | | | | |
| WILLIAM JACOBS Mailing Address 2424 UPLAND ST | | | | | | \$ 1,000.00 | | | |
| City CHESTER | State PA | Zip Code (Plus 4) 19013 | 6 | 1 | 2020 | | | | |
| Employer Name | | | Occupat | tion | | | | | |
| Employer Mailing Address/Principal Plac Business | e of | City | 1 | State | | Zip Code (Plus 4) | | | |
| Enter Grand Total of Part C on Sche | dule I, Detailed Su | ummary Page, Secti | on 3. | | | PAGE TOTAL | | | |
| | | | | | 5 | 9,427.77 | | | |

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: | | | То: | | | |
| | | | | D | ATE | | | AMOUNT | |
| Full Name | | | | мо | DAY | YEAR | | | |
| Mailing Address | | | | | | | \$ | 5 | 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 | Д | | | | PAGE TO | TAL |
| | | iaiy raye, | 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 | | |
|---|------------------|----------------------|------------------|
| FRIENDS OF BRIAN KIRKLAND | From: | <u>5/19/2020</u> То: | <u>6/22/2020</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 | TF) | | |
| 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 | | AMOUN | іт |
| 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 Detailed Summary Page, Section 2. | | | | | | PAGE TOTAL | |
| | | | | | 4 | • | 0.00 |

0.00

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

| Name of Filing Committee or Candidate | | | Reporting Period | | | | | | | | |
|---|---------------------------------|--|------------------|---------|-----|-----------------------------|------|------|--------------------------|------------|--|
| | | | | | Fro | om: | | То: | | | |
| | | | | | I | | DATE | | | AMOUNT | |
| Full Name of Contributor | | | | | | мо | DAY | YEAR | | | |
| Mailing Address | | | | | | | | | \$ | 0.00 | |
| City | State | | Zip Code(P | Plus 4) | | | | | | | |
| Employer of Contributor | | | | | | Occupat | tion | | | | |
| Employer Mailing Address/Principa Business | Address/Principal Place of City | | | State | | Zip Code(Plus 4) Desc | | | cription of Contribution | | |
| | | | | | | | | | | PAGE TOTAL | |

| _ 1 | Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3. | PAG |
|-----|--|-----|

SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate | | | Reporti | Reporting Period | | | | | |
|---|--------------------|-----------------------------------|---|---|---------------|-----|------------------|--|--|
| FRIENDS OF BRIAN KIRKLAND | | | From | <u>5/19</u> | <u>9/2020</u> | То: | <u>6/22/2020</u> | | |
| | | | | DATE | AMOUNT | | | | |
| To Whom Paid ROE FABRICATORS | | | мо | DAY | YEAR | | | | |
| Mailing Address 3304 W. 2ND ST | | | 5 | 19 | 2020 | \$ | 2,500.00 | | |
| City CHESTER State Zip Code (Plus 4) PA 19013 | | | | Description of Expenditure CAMPAIGN YARD SIGNS | | | | | |
| To Whom Paid CHARLIE DIXON/DYNAGRAPHIX | | | | DAY | YEAR | | | | |
| Mailing Address 4324 TACKAWANNA | ST | | 5 | 22 | 2020 | \$ | 1,450.00 | | |
| CityPHILAStateZip Code (Plus 4)PA19124 | | | | Description of Expenditure CAMPAIGN LITERATURE | | | | | |
| To Whom Paid TIFFANY BEAUFORD | | | | DAY | YEAR | | | | |
| Mailing Address 403 AVENUE OF TH | E STATES | | 5 | 29 | 2020 | \$ | 190.00 | | |
| City CHESTER | State PA | Zip Code (Plus 4) 19013 | Description of Expenditure CUSTOM FACE MASK FOR POLL WORKERS | | | | | | |
| To Whom Paid DELAWARE COUNTY LINEN CO. | | | мо | DAY | YEAR | | | | |
| Mailing Address 2626 W. 4TH ST | | | 6 | 1 | 2020 | \$ | 457.20 | | |
| City CHESTER | State PA | Zip Code (Plus 4) 19013 | - | SANITIZER | | | DR ELECTION DAY | | |
| To Whom Paid CASH | | | мо | DAY | YEAR | | | | |
| Mailing Address | | | 6 | 1 | 2020 | \$ | 5,800.00 | | |
| City CHESTER | State PA | Zip Code (Plus 4) 19013 | | Description of Expenditure ELECTION DAY EXPENSES | | | | | |

| To Whom Paid BRIAN KIRKLAND | | | | DAY | YEAR | | | | |
|--------------------------------------|-------------------|--------------------------|----------------------------|-------------|-----------|----------|-------------|--|--|
| Mailing Address P.O. BOX 755 | - P.O. BOX 733 | | | 10 | 2020 | \$ | 318.55 | | |
| City CHESTER State Zip Code (Plus 4) | | | Description of Expenditure | | | | | | |
| | PA | 19016 | REIMBU DAY | JRSEMENT | For Vai | N RENTAL | ON ELECTION | | |
| To Whom Paid MAKE A CHANGE GROUP | | | мо | DAY | YEAR | | | | |
| Mailing Address P.O. 1115 | | | 6 | 16 | 2020 | \$ | 300.00 | | |
| City CHESTER | State | Zip Code (Plus 4) | Descrip | tion of Exp | penditure | | | | |
| | PA | 19016 | SPONS DISPLA | | DR JUNET | EENTH FI | REWORKS | | |
| | _ | | | | | | PAGE TOTAL | | |
| Enter Grand Total of Expenditu | res on Page 1, Re | eport Cover Page, Item D | • | | | \$ | 11,015.75 | | |