Campaign Finance Report

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

Filer Identification 20160113 Report Filed By: CANDIDATE COMMITTEE LOBBYIS								BYIST								
Name of Filing C	Committee, Candid	late or L	obbyist:	F	RIENE	S OF	BRIAN	KIRKLA	AND	_						
Street Address:	P.O. BOX 75	5														
City:	CHESTER						State:	PA			Zip Cod	de: 19	9016			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY P PRIMARY	AY ARY	POST-	3.		AMENDM REPORT		Yes	No					
(place X to the right of	6TH TUESDAY PRE-ELECTION						AY TION	POST-	6.		TERMINA REPORT		Yes	No	•	\
report type)	ANNUAL REPORT	7.	Year 2020				NG MET CHECK				PAPER		$\overline{}$	DISKE	TTE	
Name of Office S	Sought by Candida	ite:	•				DATE	OF EL	ECTI	ON	District Number	Office Code	Par	ty Code	Coun	
							МО	DAY	Y	EAR		10000	DEI	1		
								11	3	2020		(SEE INSTRUCTIONS FOR CODES)				
Summary of Expenditures	Receipts and	МО	DAY YE	AR			МО	DAY	Y	EAR	FC	R OFFI	CE USE	ONLY		
			3 10	20	20	ГО		5	18	2020]					
A. Amount Bro	ught Forward Fro	m Last R	eport			\$;		1,	179.17						
B. Total Moneta	ary Contributions	And Rec	eipts (From Sc	hed	lule I)	\$	5		11,	900.00						
C. Total Funds	Available (Sum O	f Lines A	and B)			\$	5		13,	079.17						
D. Total Expend	ditures (From Sch	edule II	I)			\$	5		2,	095.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)			9	5		10,	984.17						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sche	dule	e II)	9	5			0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			4	5			0.00						
			Al	FFI	[DAV]	IT SE	CTIO	N								
PART I - If this is	s a Committee rep	ort, trea	surer sign her	e. I1	f this i	s a Ca	ndidate	report,	cand	idate sig	gn here.					
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	e attached schedu	ıles	filed or	paper	or by ele	ectronic i	nediur	n, are to	the best o	f my kno	wledge	and beli	ef , trı	ue.
Sworn to and subs	cribed before me thi day of	s	20							Signature	e of Perso	n Submit	ting Re _l	oort		
	Signati	ıre				_					Prin	ted Name	•			_
My Commission Ex	cpires										Ema	il				_
	мо	D	AY '	ΥR				A	rea Co	de	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized Cor	nm	ittee, (Candio	late sha	ıll sign I	nere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and belief t	his į	politica	comn	nittee ha	s not vio	ated a	ny provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333	3,
Sworn to and subsc	ribed before me this	i								s	ignature o	of Candid	ate			-
	day of —— ————					_					Printe	d Name				_
	Signature					_										_
My Commission Exp	-										Ema	il				
	МО	D	AY	YR		_		Are	a Code		D	aytime T	elephor	ne Numb	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period							
FRIENDS OF BRIAN KIRKLAND	From:	3/10/202	<u>0</u> To:	<u>5/18/2020</u>				
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)			\$	100.00				
TOTAL for the Reporting	Period	(2)	\$	100.00				
3. Contributions Received Over \$250.00 (From Part C and Part D)								
Contributions Received From Political Committees (Part C)			\$	5,000.00				
All Other Contributions (Part D)			\$	6,800.00				
TOTAL for the Reporting) Period	(3)	\$	11,800.00				
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)								
TOTAL for the Reporting) 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			\$	11,900.00				

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate valu	-			-			
Name of Filing Committee or Candidate				porting	Period			
			Fro	om:		То	:	
		L			DATE			AMOUNT
Full Name of Contribut	ing Committee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	•	•				-		DAGE TOTAL

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

0.00

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 Candidate

Reporting Period

FRIENDS OF BRIAN KIRKLAND

From: 3/10/2020 To:

5/18/2020

				DATE		AMOUNT
Full Name of Contributor YOLANDA KIRKLAND				DAY	YEAR	
Mailing Address 2312 COCO RD						\$ 100.00
City COLUMBIA	State	Zip Code (Plus 4)	5	11	2020	
	SC	29210				

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

PAGE TOTAL \$ 100.00

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 Pe	Reporting Period						
FRIENDS OF BRIAN KIRKLAND	From:	3/10/2020	То:	<u>5/18/2020</u>				

DATE AMOUNT

Full Name of Contributing Co	МО	DAY	YEAR			
Mailing Address 11951 FREEDOM DRIVE #810				11		\$ 5,000.00
City RESTON	State VA				2020	

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

PAGE TOTAL 5,000.00

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				Repo	orting Pe	riod				
FRIENDS OF BRIAN KIRKLAND				Fron	n:	3/10/2	<u>020</u> To	: <u>5/18/2020</u>		
					D/	ATE		AMOUNT		
Full Name of Contributor						DAY	VEAD			
DRAKE NAKAISHI					МО	DAY	YEAR			
Mailing 541 COLONEL DEWEE Address	S RD							\$ 300.00		
City WAYNE	State	Zip	Code (Plus	4)	3	26	2020			
	PA	19	087							
Employer Name					Occupat	tion		•		
Employer Mailing Address/Principal Place	e of		City			State		Zip Code (Plus 4)		
Business										
						<u> </u>	l			
Full Name of Contributor					МО	DAY	YEAR			
MICHAEL GALANTE					MO	DAT	TEAR			
Mailing 76 ARGYLE AVE								\$ 500.00		
City BLACKWOOD	State	Zip	Code (Plus	4)	3	19	2020			
	NJ	080	012							
Employer Name					Occupation			•		
Employer Mailing Address/Principal Place Business	e of		City			State		Zip Code (Plus 4)		
Business										
Full Name of Contributor										
VAHAN GUREGHIAN					МО	DAY	YEAR			
Mailing 841 MERION SQUARE	RD							\$ 1,000.00		
City GLADWYNNE	State	Zip	Code (Plus	4)	4	21	2020			
	PA	19	035							
Employer Name				Occupation						
Employer Mailing Address/Principal Plac Business	e of		City		•	State		Zip Code (Plus 4)		
- Lasiniess										

Full Name of Contributor CHESTER CAMPAIGN					DAY	YEAR	
Mailing Address P.O. BOX 755 City CHESTER State Zip Code (Plus 4) PA 19016				4	29	2020	\$ 5,000.00
Employer Name		I		Occupat	ion		
Employer Mailing Address/Principal Place of Business			City	State			Zip Code (Plus 4)

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

PAGE TOTAL \$ 6,800.00

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 Co	Name of Filing Committee or Candidate			ting Perio	bd			
			From:			То:		
				D	ATE		AN	10UNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	•						
Enter Grand Total of Part E or	Schedule T Detaile	d Summary Page	Section	4			PA	GE TOTAL
Lines Grana Fotal of Fair 2 of	r benedule 1/ betanet	z Summary r uge,	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 Perio	d	
FRIENDS OF BRIAN KIRKLAND	From:	3/10/2020 To:	<u>5/18/2020</u>
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, 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:						
				DATE			AMOUNT
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 S	chedule II, In-Kir	nd Contributions Deta	iled Sun	ımary Pa	ge,		PAGE TOTAL
Section 2.						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Re	porting l	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									- \$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupation				
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iptio	n of Contribution
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Des Summary Page, Section 3.				etaile	ed				PAGE TOTAL 0.00	

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate FRIENDS OF BRIAN KIRKLAND			Reporting Period				
			From	<u>3/10</u>	0/2020	То:	5/18/2020
				DATE			AMOUNT
To Whom Paid CHESTER CAMPAIGN			мо	DAY	YEAR		
Mailing Address P.O. BOX 755			1	10	2020	\$	800.00
City CHESTER	State PA	Zip Code (Plus 4) 19016	Description of Expenditure TICKETS FOR DEMOCRATIC BALL				
To Whom Paid THADDEUS KIRKLAND			МО	DAY	YEAR		
Mailing Address 1027 WEST EIGHTH ST			4	21	2020	\$	500.00
City CHESTER	State PA	Zip Code (Plus 4) 19013	Description of Expenditure REIMBURSEMENT FOR CAMPAIGN LITERATURE				
To Whom Paid CHARLIE DIXON/DYNAGRAHIX			мо	DAY	YEAR		
Mailing Address 4324 TACKAWANNA ST			5	7	2020	\$	695.00
City PHILA	State PA	Zip Code (Plus 4) 19124	Description of Expenditure CAMPAIGN LITERATURE				
To Whom Paid BRIAN KIRKLAND			МО	DAY	YEAR		
Mailing Address P.O. BOX 755			5	7	2020	\$	100.00
City CHESTER State PA Zip Code (Plus 4) Description of Expendi REIMBURSEMENT FOR							ITERATURE
	<u> </u>	<u> </u>					PAGE TOTAL

2,095.00