

Campaign Finance Report

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

Filer Identification Number :		20200258		Report Filed By :		CANDIDATE		COMMITTEE		✓		LOBBYIST	
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF BRYAN WALTERS													
Street Address:													
City: MALVERN						State: PA				Zip Code: 19355			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	✓			
	6TH TUESDAY PRE-ELECTION	4. X	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	✓			
	ANNUAL REPORT	7.	Year 2020	FILING METHOD () CHECK ONE			PAPER	✓	DISKETTE				
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code	
						MO	DAY	YEAR	REP				
						11	3	2020	(SEE INSTRUCTIONS FOR CODES)				
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY				
		6	23	2020		9	14	2020					
A. Amount Brought Forward From Last Report						\$ 0.00							
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 5,129.74							
C. Total Funds Available (Sum Of Lines A and B)						\$ 5,129.74							
D. Total Expenditures (From Schedule III)						\$ 3,601.99							
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 1,527.75							
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 0.00							
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 0.00							

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF BRYAN WALTERS	From: <u>6/23/2020</u> To: <u>9/14/2020</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 204.74

2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	
Contributions Received From Political Committees (Part A)	\$ 250.00
All Other Contributions (Part B)	\$ 1,100.00
TOTAL for the Reporting Period (2)	\$ 1,350.00

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)	\$ 2,500.00
TOTAL for the Reporting Period (3)	\$ 2,500.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 4,054.74
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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 FRIENDS OF BRYAN WALTERS				Reporting Period From: <u>6/23/2020</u> To: <u>9/14/2020</u>			
				DATE		AMOUNT	
Full Name of Contributing Committee PENNSYLVANIA DENTAL POLITICAL ACTION COMMITTEE				MO	DAY	YEAR	\$ 250.00
Mailing Address				8	19	2020	
City HARRISBURG	State PA	Zip Code (Plus 4) 17105					

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

PAGE TOTAL
\$ 250.00

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 Candidate	Reporting Period
FRIENDS OF BRYAN WALTERS	From: <u>6/23/2020</u> To: <u>9/14/2020</u>

				DATE			AMOUNT
Full Name of Contributor ROBERT STEVEN HEYSER				MO 8	DAY 26	YEAR 2020	\$ 250.00
Mailing Address							
City	PHOENIXVILLE	State PA	Zip Code (Plus 4) 19460				
Full Name of Contributor JOSEPH E. TONER III				MO 8	DAY 8	YEAR 2020	\$ 100.00
Mailing Address							
City	COCHRANVILLE	State PA	Zip Code (Plus 4) 19330				
Full Name of Contributor REBECCA P. CORBIN				MO 8	DAY 8	YEAR 2020	\$ 250.00
Mailing Address							
City	DOWNINGTOWN	State PA	Zip Code (Plus 4) 19335				
Full Name of Contributor JOHN C. MARTIN JR.				MO 8	DAY 10	YEAR 2020	\$ 100.00
Mailing Address							
City	MALVERN	State PA	Zip Code (Plus 4) 19355				
Full Name of Contributor D. W. MOSER				MO 7	DAY 26	YEAR 2020	\$ 100.00
Mailing Address							
City	CHESTER SPRINGS	State PA	Zip Code (Plus 4) 19425				
Full Name of Contributor BRYAN D. WALTERS				MO 8	DAY 9	YEAR 2020	\$ 100.00
Mailing Address							
City	PHOENIXVILLE	State PA	Zip Code (Plus 4) 19460				
Full Name of Contributor RICHARD T. RUZZINI				MO 8	DAY 8	YEAR 2020	\$ 200.00
Mailing Address							
City	WAYNE	State PA	Zip Code (Plus 4) 19087				

PAGE TOTAL

\$ 1,100.00

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:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$	0.00
Mailing Address							
City	State	Zip Code (Plus 4)					

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

PAGE TOTAL
\$ 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 FRIENDS OF BRYAN WALTERS	Reporting Period From: <u>6/23/2020</u> To: <u>9/14/2020</u>
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				DATE			AMOUNT
Full Name of Contributor ROBERT J. LIBERATO				MO	DAY	YEAR	\$ 1,000.00
Mailing Address				8	25	2020	
City MALVERN	State PA	Zip Code (Plus 4) 19355					
Employer Name KELLER WILLIAMS				Occupation REAL ESTATE			
Employer Mailing Address/Principal Place of Business			City EXTON		State PA		Zip Code (Plus 4) 19341
Full Name of Contributor JAMES THOMPSON				MO	DAY	YEAR	\$ 500.00
Mailing Address				8	21	2020	
City PHOENIXVILLE	State PA	Zip Code (Plus 4) 19460					
Employer Name PICKERING VALLEY GOLF CLUB				Occupation GOLF CLUB MANAGER/PART OW			
Employer Mailing Address/Principal Place of Business			City PHOENIXVILLE		State PA		Zip Code (Plus 4) 19460
Full Name of Contributor BRYAN D. WALTERS				MO	DAY	YEAR	\$ 1,000.00
Mailing Address				7	23	2020	
City PHOENIXVILLE	State PA	Zip Code (Plus 4) 19460					
Employer Name CITYWIDE OF PHILADELPHIA				Occupation OPERATION MANAGER			
Employer Mailing Address/Principal Place of Business			City WEST CHESTER		State PA		Zip Code (Plus 4) 19380

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

PAGE TOTAL
\$ 2,500.00

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	Reporting Period From: To:
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				DATE	AMOUNT		
Full Name				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					
Receipt Description							

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

PAGE TOTAL
\$ 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 BRYAN WALTERS		From: <u>6/23/2020</u> To: <u>9/14/2020</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period (1)		\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period (2)		\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period (3)		\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)		\$	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:
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
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 \$ 0.00

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

Name of Filing Committee or Candidate	Reporting Period
	From: To:

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF BRYAN WALTERS	From <u>6/23/2020</u> To: <u>9/14/2020</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
NATIONAL BANK OF MALVERN				
Mailing Address	8	25	2020	\$ 41.50
City MALVERN	State PA	Zip Code (Plus 4) 19355	Description of Expenditure DELUXE CHECKS	
To Whom Paid	MO	DAY	YEAR	
RGB POLITICS				
Mailing Address	8	19	2020	\$ 1,351.50
City CAMP HILL	State PA	Zip Code (Plus 4) 17011	Description of Expenditure LOGO DESIGN AND WEBSITE LAYOUT AND DESIGN	
To Whom Paid	MO	DAY	YEAR	
ROBERT F. JONES				
Mailing Address	8	25	2020	\$ 491.99
City MALVERN	State PA	Zip Code (Plus 4) 19355	Description of Expenditure POSTAGE AND FUND RAISING MAILINGS	
To Whom Paid	MO	DAY	YEAR	
ROBERT F. JONES				
Mailing Address	8	30	2020	\$ 1,717.00
City MALVERN	State PA	Zip Code (Plus 4) 19355	Description of Expenditure REIMBURSEMENT FOR LAWN SIGNS FROM CAPITAL ONE	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.				PAGE TOTAL
				\$ 3,601.99

