Campaign Finance Report

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

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Filer Identificat Number :	tion 2	0210103			Report Filed E		CANDI	DATE	СОМ	MITTEE	\checkmark	LOBI	BYIST	
Name of Filing	Committee, Can	didate or	Lobbyist:		FRIEND	S OF	MEGAN S	GULLIVA	N					
Street Address	:													
City:	WEST CHE	STER					State:	PA		Zip Co	de: 19	380-8	777	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. X	2ND FR PRIMAR	IDAY PRE	- 2.	30 DA PRIMA		POST-	3.	AMENDI REPORT		Yes	Nc	· 🗸
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FR ELECTI	IDAY PRI ON	E- 5.	30 DA ELECT		POST-	6.		TERMINATION REPORT?		Nc) V
report type)	ANNUAL REPO	DRT 7.	Year 20	021			FILING METHOD () CHECK ONE					\checkmark	DISKE	TTE
Name of Office	 Sought by Cand	lidate:					DATE O	F ELEC	TION	District Number		Par	ty Code	County Code
							мо	DAY	YEAR	-1	SPR	REP	•	15
JUDGE OF THE SUPERIOR COURT							11	:	2 2021		(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAF	2		мо	DAY	YEAR	F	OR OFFIC	E USE	ONLY	
Expenditure	s from:		1	4 2	021 T	0	3	2	9 202:	L				
A. Amount Bro	ought Forward I	From Last	Report			\$			0.00)				
B. Total Mone	tary Contributio	ons And Re	ceipts (F	rom Sche	dule I)	\$			42,429.73	3				
C. Total Funds	a Available (Sun	n Of Lines	A and B)			\$			42,429.73	3				
D. Total Exper	nditures (From S	Schedule I	II)			\$			3,417.10	'				
E. Ending Casl	h Balance (Subt	ract Line I	O From Li	ne C)		\$		39,012.63						
F. Value Of In	-Kind Contribut	ions Recei	ved (Fror	m Schedu	le II)	\$		692.03						
G. Unpaid Deb	ots And Obligati	ons (From	Schedule	e IV)		\$			0.00					
				AFF	IDAVI	T SE	CTION							
PART I - If this	is a Committee	report, tre	asurer si	gn here.	If this is	s a Car	ndidate re	eport, ca	andidate si	gn here.				
I swear (or affirm correct and comp	 that this report, lete. 	including t	he attache	d schedule	s filed on	paper	or by elect	ronic me	dium, are to	the best o	of my knov	vledge	and beli	ef , true
Sworn to and sub	scribed before me day of	this	20						Signatu	re of Perso	on Submitt	ing Rep	oort	
	Sigi	nature				_				Prir	nted Name			
My Commission E	-					_				Ema	ail			
	мо		DAY	YR				Area	a Code	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	s a report of a o	candidate's	s authori:	zed Com	nittee, C	Candid	ate shall	sign hei	re.					
I swear (or affirm No 320) as amend		of my know	ledge and	belief this	political	comm	ittee has n	ot violate	ed any provi	sions of th	ne act of Ju	ine 3,1	937 (P.L	1333,
Sworn to and subs	cribed before met day of	this	20						:	Signature	of Candida	ite		
						_				Print	ed Name			
My Commission Ex	Signati pires	ure				_				Ema	ail			
	мо		DAY	YR	ł	_		Area C	ode	D	aytime Te	elephon	e Numb	er

1.00

0.00

0.00

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** FRIENDS OF MEGAN SULLIVAN From: <u>1/4/2021</u> **To:** <u>3/29/2021</u> 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ **Contributions Received From Political Committees (Part A)** 1,020.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 1,020.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 26,408.73 All Other Contributions (Part D) 15,000.00 \$ **TOTAL for the Reporting Period** (3) \$ 41,408.73 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) **TOTAL for the Reporting Period** (4) \$

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.)	\$	42,429.73
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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 Candidat	e		Reporting Period					
				From: To:				
		·			DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	4)					
								PAGE TOTAL
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.							\$	0.00

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		Repo	orting Po	eriod			
FRIENDS OF MEGAN SULLIV	AN		From		<u>1/4/2</u>	2 <u>021</u> To	:	<u>3/29/2021</u>
Full Name of Contributor						VEAD		
Kathleen Sullivan				мо	DAY	YEAR		
Mailing Address							\$	100.00
City Flourtown	State PA	•)	3	1	2021			
Full Name of Contributor Melinda Sullivan				мо	DAY	YEAR		
Mailing Address							\$	200.00
City Egg Harbor Twp	State NJ	Zip Code (Plus 4 82340	•)	3	19	2021		
Full Name of Contributor Sarah Serfass				мо	DAY	YEAR		
Mailing Address							\$	220.00
City Holland	State	Zip Code (Plus 4)	3	19	2021		
	PA	18966						
Full Name of Contributor Elizabeth Srinivasan				мо	DAY	YEAR		
Mailing Address							\$	50.00
City West Chester	State PA	Zip Code (Plus 4 19381	•)	3	20	2021		
Full Name of Contributor		•		мо	DAY	YEAR		
Brendan Kelly								
Mailing Address					10	2024	\$	250.00
City Conshohocken	State PA	Zip Code (Plus 4 19428	•)	3	19	2021		
Full Name of Contributor				мо	DAY	YEAR		
Leah Albright								
Mailing Address							\$	200.00
City Glenside	•)	3	19	2021				
	PAGE TOTAL							

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 C	ne of Filing Committee or Candidate Repor			g Period				
FRIENDS OF MEGAN SULLIVA	Ν		From:	<u>1</u>	/4/2021	То:	<u>3/29/2021</u>	
				DA	TE			AMOUNT
Full Name of Contributing Com Friends of Warren Kampf	mittee			мо	DAY	YEAR	\$	15,408.73
Mailing Address City Wayne State Zip Code (Plus 4) PA 19087				- 3	1	2021		,
Full Name of Contributing Com Commonwealth Childrens Cho				мо	DAY	YEAR	\$	10,000.00
Mailing Address City Harrisburg	State PA	Zip Cod 17101	e (Plus 4)	- 3	1	2021		10,000.00
Full Name of Contributing Com Steamfitters Local Union No. 4				мо	DAY	YEAR	\$	1,000.00
Mailing Address				- 3	5	2021		,
City Philadelphia	State PA	Zip Cod 19154	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C	on Schedule I, Detai	led Summary Pa	age, Sectio	n 3.			\$	26,408.73

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			R	eporting Pe	riod			
FRIENDS OF MEGAN SULLIVAN			Fr	om:	<u>1/4/2</u>	<u>021</u> To	<u>3/29/2021</u>	
				DA	ATE		АМО	UNT
Full Name of Contributor				мо	DAY	YEAR		1 000 00
Liam E. Blaney				но	DAT	TLAK	\$	1,000.00
Mailing Address				3	1	2021		
City Newtown Square	State	Zip Cod	e (Plus 4)					
	PA	19073						
Employer Name Susan Kim, Sole Prop	rietor			Occupat	ion	Busines	s Manager	
Employer Mailing Address/Principal Plac	e of Business	City	,		State		Zip Code (Plus 4)
Newtown Sq.					PA		19010	
Full Name of Contributor					-			
Deana Wang				мо	DAY	YEAR	\$	500.00
Mailing Address					24	2024	1	
City Berwyn	State	Zip Cod	e (Plus 4)	3	21	2021		
	РА	19312						
Employer Name Self Employed				Occupat	ion	Marketir	าล	
Employer Mailing Address/Principal Plac	e of Business	City	,	•	State		Zip Code (Plus 4)
		Ber	wyn		PA		19312	
Full Name of Contributor					1			
Joseph Martz								
				мо	DAY	YEAR	\$	1,000.00
Mailing Address							\$	1,000.00
Mailing Address City Philadelphia	State	Zip Cod	e (Plus 4)	мо 3	DAY 19	YEAR 2021	\$	1,000.00
Mailing Address City Philadelphia	State	-	e (Plus 4)				\$	1,000.00
City Philadelphia	State PA	Zip Cod 19073	e (Plus 4)	3	19	2021	\$	1,000.00
City Philadelphia Employer Name Merakey USA	PA	19073			19 :ion (
City Philadelphia	PA	19073 City	,	3	ion State	2021	Zip Code (
City Philadelphia Employer Name Merakey USA Employer Mailing Address/Principal Plac	PA	19073 City		3	19 :ion (2021		
City Philadelphia Employer Name Merakey USA Employer Mailing Address/Principal Plac Full Name of Contributor	PA	19073 City	,	3	ion State	2021	Zip Code (Plus 4)
City Philadelphia Employer Name Merakey USA Employer Mailing Address/Principal Plac Full Name of Contributor Kathleen Sullivan	PA	19073 City	,	Occupat	ion State	2021 CEO	Zip Code (19010	
City Philadelphia Employer Name Merakey USA Employer Mailing Address/Principal Place Full Name of Contributor Kathleen Sullivan Mailing Address	PA	19073 City Lafa	, ayette Hill	Occupat	ion State	2021 CEO	Zip Code (19010	Plus 4)
City Philadelphia Employer Name Merakey USA Employer Mailing Address/Principal Plac Full Name of Contributor Kathleen Sullivan	PA se of Business State	19073 City Lafa Zip Cod	,	Occupat	ion State PA DAY	2021 CEO YEAR	Zip Code (19010	Plus 4)
City Philadelphia Employer Name Merakey USA Employer Mailing Address/Principal Place Full Name of Contributor Kathleen Sullivan Mailing Address City Philadelphia	PA	19073 City Lafa	, ayette Hill	- 3 Occupat	ion (State PA DAY	2021 CEO YEAR 2021	Zip Code (19010 \$	Plus 4)
City Philadelphia Employer Name Merakey USA Employer Mailing Address/Principal Place Full Name of Contributor Kathleen Sullivan Mailing Address City Philadelphia Employer Name St. Joseph's Prep	PA se of Business State PA	19073 City Lafa Zip Cod 19137	ayette Hill e (Plus 4)	Occupat	ion 19 State PA DAY 19	2021 CEO YEAR	Zip Code (19010 \$	Plus 4) 1,000.00
City Philadelphia Employer Name Merakey USA Employer Mailing Address/Principal Place Full Name of Contributor Kathleen Sullivan Mailing Address City Philadelphia	PA se of Business State PA	19073 City Lafa Zip Cod 19137	ayette Hill e (Plus 4)	- 3 Occupat	ion (State PA DAY	2021 CEO YEAR 2021	Zip Code (19010 \$	Plus 4) 1,000.00

Full Name of Contributor		мо	DAY	YEAR					
Daniel Ryan				MO	DAT	TEAR	\$	1,000.00	
Mailing Address				3	19	2021	1		
City Ft. Washington	State	Zip	o Code (Plus 4)	5	15	2021			
	PA	19	034						
Employer Name Churchville Mechanic	al, Inc			Occupat	ion (CEO			
Employer Mailing Address/Principal Pla	ce of Business		City		State		Zip Code (Plus 4)		
			Southampton		PA		18966		
Full Name of Contributor					•				
John J. Egan, Jr.				мо	DAY	YEAR	\$	500.00	
Mailing Address				_			1		
City Ft. Washington	State	Zip	Code (Plus 4)	• 3	19	2021			
	PA		034						
Employer Name JEgan Associates, LL					ion	Presider	nt		
Employer Mailing Address/Principal Pla			City		State	residei	-	de (Plus 4)	
Fort Washington					PA		19034		
					117		15054		
Full Name of Contributor				мо	DAY	YEAR	\$	300.00	
Dennis Sullivan							-		
Mailing Address	Charles	7:	Cada (Diva 4)	3	19	2021			
City Philadelphia	State		Code (Plus 4)						
	I PA I	19	137		•		1		
Employer Name n/a				Occupat	1	Retired			
Employer Mailing Address/Principal Pla	ice of Business		City		State			de (Plus 4)	
			n/a		PA		00000		
Full Name of Contributor				мо	DAY	YEAR	\$	1 500 00	
Joseph Kelly							*	1,500.00	
Mailing Address									
	· · · · · · · ·			3	19	2021			
City Holland	State	Zip	o Code (Plus 4)	3	19	2021			
	State PA		966	3	19	2021			
				3 Occupat		2021 Project	Manage	r	
City Holland	PA						0	r de (Plus 4)	
City Holland Employer Name Frank Kelly Builders	PA		966		ion		0	de (Plus 4)	
City Holland Employer Name Frank Kelly Builders	PA		966 City	Occupat	ion State PA	Project	Zip Coo	de (Plus 4)	
City Holland Employer Name Frank Kelly Builders Employer Mailing Address/Principal Pla	PA		966 City		ion State		Zip Coo	de (Plus 4)	
City Holland Employer Name Frank Kelly Builders Employer Mailing Address/Principal Pla Full Name of Contributor	PA		966 City	Occupat	ion State PA DAY	Project	Zip Coo 18966	de (Plus 4)	
City Holland Employer Name Frank Kelly Builders Employer Mailing Address/Principal Pla Full Name of Contributor Laurence Sullivan	PA	18	966 City	Occupat	ion State PA	Project	Zip Coo 18966	de (Plus 4)	
City Holland Employer Name Frank Kelly Builders Employer Mailing Address/Principal Pla Full Name of Contributor Laurence Sullivan Mailing Address	PA	18 Zi ŗ	966 City Holland	Occupat	ion State PA DAY	Project	Zip Coo 18966	de (Plus 4)	
City Holland Employer Name Frank Kelly Builders Employer Mailing Address/Principal Pla Full Name of Contributor Laurence Sullivan Mailing Address	PA ace of Business State	18 Zi ŗ	966 City Holland	Occupat	ion State PA DAY 19	Project	Zip Coo 18966	de (Plus 4)	
City Holland Employer Name Frank Kelly Builders Employer Mailing Address/Principal Pla Full Name of Contributor Laurence Sullivan Mailing Address City Seaville	PA ace of Business State NJ	18 Zi ŗ	966 City Holland	MO 3	ion State PA DAY 19	Project YEAR 2021	Zip Cod 18966 \$	de (Plus 4)	
City Holland Employer Name Frank Kelly Builders Employer Mailing Address/Principal Pla Full Name of Contributor Laurence Sullivan Mailing Address City Seaville Employer Name n/a	PA ace of Business State NJ	18 Zi ŗ	966 City Holland Code (Plus 4) 230	MO 3	ion PA DAY 19	Project YEAR 2021	Zip Cod 18966 \$	de (Plus 4) 300.00 de (Plus 4)	
City Holland Employer Name Frank Kelly Builders Employer Mailing Address/Principal Pla Full Name of Contributor Laurence Sullivan Mailing Address City Seaville Employer Name n/a Employer Mailing Address/Principal Pla	PA ace of Business State NJ	18 Zi ŗ	966 City Holland Code (Plus 4) 230 City	MO 3	ion State PA DAY 19 ion State	Project YEAR 2021	Zip Coo 18966 \$ Zip Coo	de (Plus 4) 300.00 de (Plus 4)	
City Holland Employer Name Frank Kelly Builders Employer Mailing Address/Principal Pla Full Name of Contributor Laurence Sullivan Mailing Address City Seaville Employer Name n/a Employer Mailing Address/Principal Pla Full Name of Contributor	PA ace of Business State NJ	18 Zi ŗ	966 City Holland Code (Plus 4) 230 City	MO 3	ion State PA DAY 19 ion State	Project YEAR 2021	Zip Coo 18966 \$ Zip Coo	de (Plus 4) 300.00 de (Plus 4)	
City Holland Employer Name Frank Kelly Builders Employer Mailing Address/Principal Pla Full Name of Contributor Laurence Sullivan Mailing Address City Seaville Employer Name n/a Employer Mailing Address/Principal Pla Full Name of Contributor Christoper Myers	PA ace of Business State NJ	18 Zi ŗ	966 City Holland Code (Plus 4) 230 City	MO 3 Occupat	ion PA DAY 19 State NJ DAY	Project YEAR 2021 retired YEAR	Zip Coo 18966 \$ Zip Coo 00000	de (Plus 4) 300.00 de (Plus 4)	
City Holland Employer Name Frank Kelly Builders Employer Mailing Address/Principal Pla Full Name of Contributor Laurence Sullivan Mailing Address City Seaville Employer Name n/a Employer Mailing Address/Principal Pla Full Name of Contributor Christoper Myers Mailing Address	PA ace of Business State NJ	18 Zi f	966 City Holland Code (Plus 4) 230 City	MO 3 Occupat	ion PA DAY 19 ion State NJ	Project YEAR 2021 retired	Zip Coo 18966 \$ Zip Coo 00000	de (Plus 4) 300.00 de (Plus 4)	
City Holland Employer Name Frank Kelly Builders Employer Mailing Address/Principal Pla Full Name of Contributor Laurence Sullivan Mailing Address City Seaville Employer Name n/a Employer Mailing Address/Principal Pla Full Name of Contributor Christoper Myers	PA ace of Business State NJ ace of Business State State	18 Zip 08	966 City Holland Code (Plus 4) 230 City n/a City n/a	MO 3 Occupat	ion PA DAY 19 State NJ DAY	Project YEAR 2021 retired YEAR	Zip Coo 18966 \$ Zip Coo 00000	de (Plus 4) 300.00 de (Plus 4)	
City Holland Employer Name Frank Kelly Builders Employer Mailing Address/Principal Pla Full Name of Contributor Laurence Sullivan Mailing Address City Seaville Employer Name n/a Employer Mailing Address/Principal Pla Full Name of Contributor Christoper Myers Mailing Address City Blue Bell	PA ace of Business State NJ ace of Business	18 Zip 08	966 City Holland O Code (Plus 4) 230 City n/a	MO 3 Occupat	ion PA PA 19 ion State NJ DAY 19	Project YEAR 2021 retired YEAR 2021	Zip Coo 18966 \$ Zip Coo 00000	de (Plus 4) 300.00 de (Plus 4)	
City Holland Employer Name Frank Kelly Builders Employer Mailing Address/Principal Pla Full Name of Contributor Laurence Sullivan Mailing Address City Seaville Employer Name n/a Employer Mailing Address/Principal Pla Full Name of Contributor Christoper Myers Mailing Address City Blue Bell Employer Name n/a	PA ace of Business State NJ ace of Business State PA	18 Zip 08	966 City Holland Code (Plus 4) 230 City n/a City 0 Code (Plus 4) 422	MO 3 Occupat	ion PA DAY 19 ion State NJ DAY 19	Project YEAR 2021 retired YEAR	Zip Coo 18966 \$ Zip Coo 00000 \$	de (Plus 4) 300.00 de (Plus 4) 1,000.00	
City Holland Employer Name Frank Kelly Builders Employer Mailing Address/Principal Pla Full Name of Contributor Laurence Sullivan Mailing Address City Seaville Employer Name n/a Employer Mailing Address/Principal Pla Full Name of Contributor Christoper Myers Mailing Address City Blue Bell	PA ace of Business State NJ ace of Business State PA	18 Zip 08	966 City Holland Code (Plus 4) 230 City n/a City n/a	MO 3 Occupat	ion PA PA 19 ion State NJ DAY 19	Project YEAR 2021 retired YEAR 2021	Zip Coo 18966 \$ Zip Coo 00000 \$	de (Plus 4) 300.00 de (Plus 4) 1,000.00 de (Plus 4)	

Full Name of Contributor				мо	DAY	VEA	_		
Andrew Reilly				мо	DAY	YEA	ĸ	\$	1,000.00
Mailing Address	-			3	19	202	21		
City Media	State	Zi	p Code (Plus 4)		15				
	PA	19	9063						
Employer Name Swartz Campbell LLC				Occupat	tion ,	Attorr	ney		
Employer Mailing Address/Principal Pla	ce of Business		City		State		Z	Zip Cod	e (Plus 4)
			Wilmington		DE		1	19801	
Full Name of Contributor									
Patricia Albright				мо	DAY	YEA	R	\$	1,000.00
Mailing Address				3	19	202	21		
City Sea Isle City	State Zip Code (Plus 4)				19				
	l _{NJ}								
Employer Name n/a				Occupat	tion	retire	d		
Employer Mailing Address/Principal Plac	ce of Business		City		State		Z	Zip Cod	e (Plus 4)
n/a				IJ		0	00000		
Full Name of Contributor									
Susan Kim				мо	DAY	YEA	R	\$	2,900.00
Mailing Address					10	207			
City Bryn Mawr	State	Zi	p Code (Plus 4)	- 3	19	202	21		
	PA								
Employer Name Susan Kim, Sole Proprietor									
Employer Name Susan Kim, Sole Prop	rietor			Occupat	tion	Presid	lent		
Employer Name Susan Kim, Sole Prop Employer Mailing Address/Principal Plac			City	Occupat	State	Presid			e (Plus 4)
			City Bryn Mawr	Occupat	1	Presid	Z		e (Plus 4)
Employer Mailing Address/Principal Plac			-	Occupat	State	Presid	Z	Zip Cod	e (Plus 4)
Employer Mailing Address/Principal Plac Full Name of Contributor			-	MO	State	Presid YEA	2 1	Zip Cod	e (Plus 4) 500.00
Employer Mailing Address/Principal Plac Full Name of Contributor Brendan Sullivan			-	мо	State PA DAY	YEA	R	Zip Cod 19010	
Employer Mailing Address/Principal Plac Full Name of Contributor		Zi	-		State PA		R	Zip Cod 19010	
Employer Mailing Address/Principal Plac Full Name of Contributor Brendan Sullivan Mailing Address	ce of Business		Bryn Mawr	мо	State PA DAY	YEA	R	Zip Cod 19010	
Employer Mailing Address/Principal Plac Full Name of Contributor Brendan Sullivan Mailing Address City Norristown	ce of Business		Bryn Mawr Defer (Plus 4)	мо	State PA DAY 19	YEA 202	21	Zip Cod 19010	
Employer Mailing Address/Principal Plac Full Name of Contributor Brendan Sullivan Mailing Address City Norristown Employer Name YSC Academy	ce of Business State PA		Bryn Mawr Defer (Plus 4)	MO 3	State PA DAY 19	YEA	21 er	Zip Cod 19010 \$	500.00
Employer Mailing Address/Principal Plac Full Name of Contributor Brendan Sullivan Mailing Address City Norristown	ce of Business State PA		p Code (Plus 4) 9401 City	MO 3	State PA DAY 19 tion State	YEA 202	21 21 er 22	Zip Cod 19010 \$	
Employer Mailing Address/Principal Plac Full Name of Contributor Brendan Sullivan Mailing Address City Norristown Employer Name YSC Academy Employer Mailing Address/Principal Plac	ce of Business State PA		Bryn Mawr p Code (Plus 4) 9401	MO 3	State PA DAY 19	YEA 202	21 21 er 22	Zip Codd 19010 \$ Zip Codd	500.00
Employer Mailing Address/Principal Plac Full Name of Contributor Brendan Sullivan Mailing Address City Norristown Employer Name YSC Academy Employer Mailing Address/Principal Plac Full Name of Contributor	ce of Business State PA		p Code (Plus 4) 9401 City	MO 3	State PA DAY 19 tion State	YEA 202	21 er 21	Zip Codd 19010 \$ Zip Codd	500.00
Employer Mailing Address/Principal Place Full Name of Contributor Brendan Sullivan Mailing Address City Norristown Employer Name YSC Academy Employer Mailing Address/Principal Place Full Name of Contributor Kathleen Sullivan	ce of Business State PA		p Code (Plus 4) 9401 City	MO 3 Occupat	State PA DAY 19 tion State PA DAY	YEA 202 Teach	21 R 21 er 21 R	Zip Codd 19010 \$ Zip Codd 19087	500.00 e (Plus 4)
Employer Mailing Address/Principal Plac Full Name of Contributor Brendan Sullivan Mailing Address City Norristown Employer Name YSC Academy Employer Mailing Address/Principal Plac Full Name of Contributor Kathleen Sullivan Mailing Address	ce of Business State PA ce of Business	19	Bryn Mawr p Code (Plus 4) 9401 City Wayne	MO 3 Occupat	State PA DAY 19 tion State PA	YEA 202 Teach	21 R 21 er 21 R	Zip Codd 19010 \$ Zip Codd 19087	500.00 e (Plus 4)
Employer Mailing Address/Principal Place Full Name of Contributor Brendan Sullivan Mailing Address City Norristown Employer Name YSC Academy Employer Mailing Address/Principal Place Full Name of Contributor Kathleen Sullivan	ce of Business State PA ce of Business State State	z i	Bryn Mawr p Code (Plus 4) 9401 City Wayne p Code (Plus 4)	MO 3 Occupat	State PA DAY 19 tion State PA DAY	YEA 202 Teach	21 R 21 er 21 R	Zip Codd 19010 \$ Zip Codd 19087	500.00 e (Plus 4)
Employer Mailing Address/Principal Place Full Name of Contributor Brendan Sullivan Mailing Address City Norristown Employer Name YSC Academy Employer Mailing Address/Principal Place Full Name of Contributor Kathleen Sullivan Mailing Address City Flourtown	ce of Business State PA ce of Business	z i	Bryn Mawr p Code (Plus 4) 9401 City Wayne	MO 3 Occupat	State PA DAY 19 tion State PA DAY 19	YEA 202 Teach YEA 202	21 er 21 R 21 21	Zip Codd 19010 \$ Zip Codd 19087	500.00 e (Plus 4)
Employer Mailing Address/Principal Place Full Name of Contributor Brendan Sullivan Mailing Address City Norristown Employer Name YSC Academy Employer Mailing Address/Principal Place Full Name of Contributor Kathleen Sullivan Mailing Address City Full Name of Contributor Kathleen Sullivan Mailing Address City Flourtown Employer Name n/a	ce of Business State PA ce of Business State PA State PA	z i	Bryn Mawr P Code (Plus 4) 9401 City Wayne P Code (Plus 4) 9031	MO 3 Occupat	State PA DAY 19 State PA DAY 19	YEA 202 Teach	21 er 21 21 21 21 d	Zip Code 19010 \$ Zip Code 19087 \$	500.00 e (Plus 4) 1,500.00
Employer Mailing Address/Principal Place Full Name of Contributor Brendan Sullivan Mailing Address City Norristown Employer Name YSC Academy Employer Mailing Address/Principal Place Full Name of Contributor Kathleen Sullivan Mailing Address City Flourtown	ce of Business State PA ce of Business State PA State PA	z i	Bryn Mawr P Code (Plus 4) 9401 City Wayne P Code (Plus 4) 9031 City City	MO 3 Occupat	State PA DAY 19 tion PA DAY 19	YEA 202 Teach YEA 202	21 er 21 21 21 21 21 21 21	Zip Code 19010 \$ Zip Code 19087 \$ Zip Code	500.00 e (Plus 4)
Employer Mailing Address/Principal Place Full Name of Contributor Brendan Sullivan Mailing Address City Norristown Employer Name YSC Academy Employer Mailing Address/Principal Place Full Name of Contributor Kathleen Sullivan Mailing Address City Full Name of Contributor Kathleen Sullivan Mailing Address City Flourtown Employer Name n/a	ce of Business State PA ce of Business State PA State PA	z i	Bryn Mawr P Code (Plus 4) 9401 City Wayne P Code (Plus 4) 9031	MO 3 Occupat	State PA DAY 19 State PA DAY 19	YEA 202 Teach YEA 202	21 er 21 21 21 21 21 21 21	Zip Code 19010 \$ Zip Code 19087 \$ Zip Code 200000	500.00 e (Plus 4) 1,500.00 e (Plus 4)
Employer Mailing Address/Principal Place Full Name of Contributor Brendan Sullivan Mailing Address City Norristown Employer Name YSC Academy Employer Mailing Address/Principal Place Full Name of Contributor Kathleen Sullivan Mailing Address City Full Name of Contributor Kathleen Sullivan Mailing Address City Flourtown Employer Name n/a	State PA	z i 19	Bryn Mawr P Code (Plus 4) 9401 City Wayne P Code (Plus 4) 0031 City n/a	MO 3 Occupat	State PA DAY 19 tion PA DAY 19	YEA 202 Teach YEA 202	21 er 21 21 21 21 21 21 21	Zip Code 19010 \$ Zip Code 19087 \$ Zip Code 200000	500.00 e (Plus 4) 1,500.00
Employer Mailing Address/Principal Place Full Name of Contributor Brendan Sullivan Mailing Address City Norristown Employer Name YSC Academy Employer Mailing Address/Principal Place Full Name of Contributor Kathleen Sullivan Mailing Address City Flourtown Employer Name n/a Employer Mailing Address/Principal Place	State PA	z i 19	Bryn Mawr P Code (Plus 4) 9401 City Wayne P Code (Plus 4) 0031 City n/a	MO 3 Occupat	State PA DAY 19 tion PA DAY 19	YEA 202 Teach YEA 202	21 er 21 21 21 21 21 21 21	Zip Code 19010 \$ Zip Code 19087 \$ Zip Code 200000	500.00 e (Plus 4) 1,500.00 e (Plus 4)

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 Candidat	e		Report	ing Peric	d				
	From: To:								
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (Plus 4)						
Receipt Description									
		_	.					PAGE TO	TAL
nter Grand Total of Part E on Schedule I, Detailed Summary Page, 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 MEGAN SULLIVAN	From:	<u>1/4/2021</u> To:	<u>3/29/2021</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)	\$	67.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (3)	\$	625.03
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		\$	692.03

SCHEDULE II PART F **IN-KIND CONTRIBUTIONS RECEIVED**

VALUE OF \$50.01 TO \$250.00

Name of Filing Comm	nittee or Candidate			Reporting	Period			
FRIENDS OF MEGAN	FRIENDS OF MEGAN SULLIVAN			From:	-	1/4/2021	То:	<u>3/29/2021</u>
					DATE			AMOUNT
Full Name of Contrib	outor			мо	DAY	YEAR		
William R Christman				MO	DA.	1 Ean	\$	67.00
Mailing Address				2	12	2021	1*	07.00
City DOWNINGTO	WN	State	Zip Code (Plus 4)			2021		
		PA	19335					
Description of Contri	bution: PO Box	l payment	ł	4	•			
Enter Grand Total Section 2.	of Part F on Sche	dule II, In-Ki	nd Contributions Deta	iled Sum	mary Pag	je,		PAGE TOTAL
							\$	67.00

PAGE 12

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

Name of Filing Committee or Candidate				Rep	porti	ing P	eriod				
FRIENDS OF MEGAN SULLIVAN				Fro	om:		<u>1/4/202</u>	2 <u>1</u> To: <u>3/29/2</u>		<u>3/29/2021</u>	
							DATE			AMOUNT	
Full Name of Contributor					мс	5	DAY	YEAR			
Liam E. Blaney									\$	345.55	
Mailing Address						3	19	2021	Ŧ	545.55	
City Newtown Square	State		Zip Code(Plus 4)		1						
	PA		19073								
Employer of Contributor Susan Kim,	, Sole Proprietor		Į		Occupation E			usiness Manager			
Employer Mailing Address/Principal Place of Business City			State	e Zip Code(Plus 4)		Code(Plus 4)	Descri	otion	of Contribution		
		Ne	ewtown Square	PA		190	10	Fundra	iser	expenses	
Full Name of Contributor		_			мо		DAY	YEAR			
Christopher Myers									÷	279.48	
Mailing Address						3	19	2021	\$	2/9.40	
City Blue Bell	State		Zip Code(Plus 4)								
	PA		19422								
Employer of Contributor n/a					Oc	cupa	tion re	tired			
Employer Mailing Address/Principal Plac	ce of Business	Cit	ty	State	e	Zip	Code(Plus 4)	Descri	otion	of Contribution	
		n/	a	PA		000	00	Fundra	iser	expenses	
Enter Grand Total of Part G on Sch	edule II In-Ki	nd (Contributions D	etaile	ъч					PAGE TOTAL	
Summary Page, Section 3.		nu .		ctanc	u					625.03	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate				Reporting Period					
FRIENDS OF MEGAN SULLIVAN				From	<u>1/4</u>	<u>4/2021</u>	То:	<u>3/29/2021</u>	
				DATE				AMOUNT	
To Whom Paid				мо	DAY	YEAR			
PayPal									
Mailing Address				3	29	2021	\$	30.50	
City	ty San Jose State Zip Code (Plus 4)				Description of Expenditure				
		СА	95131	Fees					
To Whom Paid				мо	DAY	YEAR			
Philadelphia Police Home Association				-	_		\$	432.00	
Mailing Address				3	5	2021	7	452.00	
City				Description of Expenditure					
PA 19154				Event food & beverages					
To Whom Paid Commonwealth of PA				мо	DAY	YEAR			
Mailing Address				3	4	2021	\$	200.00	
				Description of Expenditure					
City	City Harrisburge State Zip Code (Plus 4) PA 17120			Petition filing fee					
To Whom Paid									
Bonn Allen				мо	DAY	YEAR			
Mailing Address				3	23	2021	\$	1,500.00	
City	Malvern	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•		
		РА	19355	Consult	Consultation Fee				
To Whom Paid				мо	DAY	YEAR			
ColdSpark								900.00	
Mailing Address			3	26	2021	\$	900.00		
City	Pittsburgh	State	Zip Code (Plus 4)						
PA 15222			Digital A	Digital Advertising					
To Whom Paid				мо	DAY	YEAR			
Megan Sullivan									
Mailing Address				3	29	2021	\$	354.60	
City	y Paoli State Zip Code (Plus 4)			Description of Expenditure					
PA 19301				Various reimbursements					
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.								PAGE TOTAL	
							\$	3,417.10	