Campaign Finance Report

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

Filer Identificati Number :	on 2016	50113			Repo			CANDI	DATE		СОМ	4ITTEE	✓	LOBE	BYIST		
Name of Filing C	Committee, Candid	late or L	obbyist:	ŀ	KIRK	LAI	ND, B	RIAN FR	IENDS	OF							
Street Address:																	
City:	CHESTER							State:	PA			Zip Code: 19013					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY F PRIMARY	RE-	2.	.x	30 DA PRIMA		POST-			AMENDMENT REPORT?		Yes	No	•	/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE-	- 5.		30 DA ELECT		POST-	6.		TERMINA REPORT		Yes	No		/
report type)	ANNUAL REPORT	7.	Year 2021					IG METH				PAPER		/	DISKE	TTE	
Name of Office S	Sought by Candida	te:	-					DATE C	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Coun	
	- ,							МО	DAY	YE	AR	Number	10000	DEN	1	23	
								11		2	2021		(SEE IN	STRUCTIO	ONS FOR C	ODES)	
	Receipts and	МО	DAY YE	AR				МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
Expenditures	s from:		1 1	20)21	T	0	5	5	3	2021						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			10,5	50.00						
B. Total Moneta	ary Contributions	And Rec	eipts (From So	chec	dule 1	I)	\$				0.00						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			10,5	50.00						
D. Total Expend	ditures (From Sch	edule II	I)				\$			1,6	90.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)				\$			8,8	60.00						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sche	dul	e II)		\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$				0.00			•			
			А	(FF)	IDA'	VI	ΓSE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign her	e. I	f this	s is	a Can	didate r	eport, d	candi	date sig	ın here.					
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	attached sched	ules	filed	on p	paper (or by elect	tronic m	edium	, are to t	he best o	f my knov	wledge	and belie	ef , tru	1e
Sworn to and subs	cribed before me thi day of	S	20							S	ignature	of Perso	n Submit	ting Rep	ort		_
	Signatu	ire	-				-					Prin	ted Name	e			_
My Commission Ex	cpires											Ema	il				_
	мо	D	AY	YR					Are	ea Cod	e	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized Co	mm	ittee	, Ca	andida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of e	ny knowl	edge and belief	this	politio	cal	commi	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,19	937 (P.L	. 1333	s,
Sworn to and subsc	ribed before me this								-		S	ignature o	of Candid	ate			-
	day of						-					Printe	d Name				-
My Commission Exp	Signature						-					Ema	il				-
my commission exp																	
	МО	D	AY	YR					Area	Code		Da	aytime T	elephon	e Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
KIRKLAND, BRIAN FRIENDS OF	From:	1/1/202	<u>1</u> To:	5/3/2021
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)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	0.00
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			\$	0.00

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 Comm	ittee or Candidate	e		Re	eporting	Period			
				Fr	om:		То	:	
				•		DATE			AMOUNT
Full Name of Contributi	ng Committee				мо	DAY	YEAR		
Mailing Address								\$	0.00
City		State	Zip Code (Plu	s 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 Commi	tee or Candidate		Rep	oorting P	eriod			
			Fro	m:		To) :	
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
							1	
Mailing Address							\$	0.00
Mailing Address City	State	Zip Code (Plus	4)				\$	0.00

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:			То:			
				DA	TE		А	MOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR	\$		0.00
Mailing Address							7 *		0.00
City	State	Zip Cod	e (Plus 4)						
1	I	ı			ı	<u> </u>			
		_		_				PAGE TOT	AL
Enter Grand Total of Part C on Scheo	lule I, Detailed Sun	nmary Pa	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.)

Name of Filing Committee or Candidate			Rep	orting Pe	riod			
			Fron	n:		To):	
				D	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupa	tion			
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			\$	PAGE TOTAL 0.00

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 Candidate		Report	ing Peri	od			
			From:			To:		
		'			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	'	1					<u> </u>	
	- C		. .:	_				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	d						
KIRKLAND, BRIAN FRIENDS OF	From:	<u>1/1/2021</u> To:	5/3/2021					
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS 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

ailing Address			Reporting Period					
			From:			To:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	-	-	•	•	•			
Enter Grand Total of Part F on Sche	dule II, In-Kind	d Contributions Deta	iled Sum	mary Pag	ge,		PAGE TOTA	L
Section 2.						\$		0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						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	′	Stat	e Zip	Code(Plus 4)	Desci	ript	ion of Contribution	on
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	ontributions De	etaile	ed				PAGE TO	ΓAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting) Period		
KIRKLAND, BRIAN FRIENDS OF	From	<u>1/1/2021</u>	То:	<u>5/3/2021</u>
		DATE		AMOUNT

				DATE			AMOUNT
To Whom Paid			мо	DAY	YEAR		
Gainey For Mayor			1-10				
Mailing Address			4	2	2021	\$	500.00
City Pittsburgh	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA	15206	Donatio	n			
To Whom Paid			мо	DAY	YEAR		
Jon Robinson			1-10				
Mailing Address			3	25	2021	\$	550.00
City Marcus Hook	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	Donatio	n - War RE	ady Box	ing			
To Whom Paid			мо	DAY	YEAR		
Friends of Tinu Moss			1-10		I LAK		
Mailing Address			4	9	2021	\$	250.00
City Chester	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA	19016	Donatio	n			
To Whom Paid			мо	DAY	YEAR		
Graham Graphics			140		ILAK		
Mailing Address			4	15	2021	\$	390.00
City Woodlyn	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA	19094	Candida	ite shirts			
							PAGE TOTAL
Enter Grand Total of Expe	nditures on Page 1, Re	port Cover Page, Item D).			\$	1,690.00
						I	