# **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 :	i <b>on</b> 2016	0113			Report Filed B		CANDI	DATE	СОМ	MITTEE	✓	LOBI	BYIST	
	Committee, Candid	ate or L	obbyist:			-	ian Kirkla	nd						
Street Address:														
City:	Chester						State: PA Zip Code: 1901					016		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2.	30 D/ PRIM		POST- 3	3.	AMENDI REPORT		Yes	No	, 🔨
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5. <b>X</b>	30 D/ ELEC		POST- 6	5.	TERMIN REPORT		Yes	No	) 🗸
report type)	ANNUAL REPORT	7.	<b>Year</b> 2021				NG METHO CHECK O			PAPER		$\checkmark$	DISKE	TTE
Name of Office	L Sought by Candidat	te:					DATE O	F ELEC	TION	District Number		Par	ty Code	County Code
							мо	DAY	YEAR					
							11	2	2 2021		(SEE INS	STRUCTI	ONS FOR	CODES)
Summary of Expenditure	Receipts and	мо	DAY	YEAR		_	мо	DAY	YEAR	FC	OR OFFIC	E USE	ONLY	
			9 14	20	021 <b>T</b>	-	10	18		4				
	ought Forward Fron		•	Scho		\$			7,956.19	-				
	-			Sche	aule I)	\$				-				
	Available (Sum Of					\$			7,956.19	-				
-	n Balance (Subtract		-	<u></u>		\$			1,350.00	-				
	-Kind Contributions			-	le II)	\$			0.00					
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	')		\$			0.00	1				
				AFF	IDAVI	Г SE	CTION			•				
PART I - If this i	s a Committee rep	ort, trea	surer sign	here. I	If this is	a Ca	ndidate re	eport, ca	ndidate si	gn here.				
I swear (or affirm correct and comp	) that this report, incl lete.	uding the	e attached sc	hedules	s filed on	paper	or by elect	ronic mec	lium, are to	the best o	of my knov	vledge	and beli	ef , true
Sworn to and sub	scribed before me this day of	5	20						Signatur	e of Perso	on Submitt	ing Rep	oort	
	Signatu	re				-				Prir	nted Name			
My Commission E	-					_				Ema	ail			
	мо	D	AY	YR		_		Area	Code	Daytin	ne Teleph	one Nu	mber	
	a report of a canc ) that to the best of m led.				•			•		sions of th	ie act of Ju	ine 3,1	937 (P.I	1333,
Sworn to and subs	cribed before me this day of		20						S	Signature	of Candida	ite		
			_			-				Printe	ed Name			
My Commission Ex	Signature pires									Ema	ail			
	мо	D	AY	YR				Area Co	ode	D	aytime Te	elephon	ie Numb	er

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

	_			
Name of Filing Committee or Candidate	Reportin	g Period		
Friends of Brian Kirkland	<u>9/14/202</u>	<u>1</u> То:	<u>10/18/2021</u>	
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Repo	rting 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 Repo	rting 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 Repo	rting Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Par	tE)			
TOTAL for the Repo	rting Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Ac totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cove			\$	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 Committee or Candidate				Reporting Period					
F									
		·			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 Candida	te		Rep	orting P	eriod				
			Fror	m:		Тс	):		
					DATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address	_	_					\$	0.00	
City	State	Zip Code (Plus 4	)						
								PAGE TOTAL	
Enter Grand Total of Part A on	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	2.		\$	0.00	

## 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 Period					
			From:			То:		
				DA	TE		A	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.00
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Sched	lule I, Detailed Sun	nmary 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	ne of Filing Committee or Candidate Reporting				rting Period				
From				From:			То:		
				D	ATE		АМ	IOUNT	
Full Name of Contributor				мо	DAY	YEAR	\$	0.00	
Mailing Address									
City	State	Zip Code (Pl	ıs 4)						
Employer Name				Occupat	tion				
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page	e, Sectio	on 3.			P#	<b>AGE TOTAL</b> 0.00	

### 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			Report	ing Peric	d				
			From:			То:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (	Plus 4)						
Receipt Description	·	•					•		
		_						PAGE TO	TAL
Enter Grand Total of Part E on Sched	ule 1, Detailed Sumn	nary Page,	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 Period	I	
Friends of Brian Kirkland	From:	<u>9/14/2021</u> <b>то</b> :	<u>10/18/2021</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, 3		\$	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					
F						То:		
				DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address						<b>7</b> \$	0.0	
City	State	Zip Code (Plus 4)						
Description of Contribution:	•	-	- <b>!</b>					
Enter Grand Total of Part F on Sche Section 2.	dule II, In-Kind C	Contributions Deta	iled Sum	mary Pag	ie,		PAGE TOTAL	
						\$	0.0	

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

Name of Filing Committee or Candidate			Rep	porting I	Period		
	Fro	From:					
					DATE		AMOUNT
Full Name of Contributor				мо	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code(Plus 4)					
Employer of Contributor		•		Occupa	ation		
Employer Mailing Address/Principal Plac	e of Business	City	State	e Zip	Code(Plus 4)	Descri	ption of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-Kind	d Contributions D	etaile	d			<b>PAGE TOTAL</b> 0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period					
Friends of Brian Kirkland			From	<u>9/14</u>	То:	<u>10/18/2021</u>		
				DATE			AMOUNT	
To Whom Paid			мо	DAY	YEAR			
Robert Butler								
Mailing Address			9	23	2021	\$	250.00	
City Chester	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
PA 19013				Marcus Hoo	olk Famly	/ Day		
To Whom Paid			мо	DAY	YEAR			
Delco Democratic Committee								
Mailing Address				15	2021	\$	100.00	
City Media	ty Media State Zip Code (Plus 4)			tion of Exp	enditure			
	PA	19063	Donator	n - Delco D	em Com	mittee f	undraisder	
To Whom Paid			мо	DAY	YEAR			
Tie One On for Prostate and Colon Canc	er Fund		no		12/11			
Mailing Address			9	24	2021	\$	500.00	
City Chester	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•		
	РА	19013	Donator	n-Cancer V	Valk			
To Whom Paid			мо	DAY	YEAR			
Quest 2 B Elite,LLC			no		12/11			
Mailing Address			9	22	2021	\$	500.00	
City Chester	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	1		
	PA	19013	Donatio	n- girls ba	sketball t	eam		
							PAGE TOTAL	
Enter Grand Total of Expenditures o	n Page 1, Report C	over Page, Item D	).			\$	1,350.00	