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 2018	0169				port ed B		CAND	DATE		СОМ	1ITTEE	✓	LOBE	YIST		
Name of Filing C	Committee, Candid	ate or L	obbyist:		FRIE	END	S OF I	DAVE DE	LLOSC)							
Street Address:	2136 HIGHLA	ND AVE															
City:	MORTON							State:	PA			Zip Cod	le: 19	9070			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. X	2ND FRIDAY F PRIMARY	PRE-		2.	30 DA PRIMA		POST-	3.		AMENDM 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 2022					IG METH				PAPER		\checkmark	DISKE	ГТЕ	
Name of Office S	Sought by Candida	te:	•					DATE C	F ELE	CTIC	N	District Number	Office Code	Part	y Code	County Code	
	- ,							МО	DAY	YI	AR		10000	DEM			
								11		8	2022						
Summary of Expenditures	Receipts and	МО	DAY YE	AR			_	МО	DAY	ΥI	EAR	FO	R OFFI	CE USE	ONLY		
			1 1	20)22	Т	<u> </u>	3	3	28	2022						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$			123,0)41.39						
B. Total Monet	ary Contributions	And Rec	eipts (From So	che	dule	e I)	\$				30.00						
C. Total Funds	Available (Sum Of	f Lines A	and B)				\$			123,0	71.39						
D. Total Expen	ditures (From Sch	edule II	I)				\$			27,0	67.92						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)				\$			96,0	03.47						
F. Value Of In-	Kind Contributions	s Receiv	ed (From Sche	dul	e II	I)	\$				50.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$				0.00			•			
			А	FF	IDA	AVI	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign her	e. I	f th	nis 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	e attached sched	ules	file	d on	paper (or by elect	tronic m	edium	, are to t	he best o	f my kno	wledge a	nd belie	f , true	
Sworn to and subs	cribed before me this	5	20							5	ignature	of Perso	1 Submit	ting Rep	ort		
			_				- -					Prin	ted Name	<u> </u>			
My Commission Ex	Signatu «pires	ie										Emai	il				
	МО	D	AY	YR			_		Are	ea Coo	le	Daytim	e Teleph	none Nur	nber	_	
Part II- If this is	a report of a can	didate's	authorized Co	mm	itte	ee, C	andida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende		ny knowl	edge and belief	this	polit	tical	commi	ittee has r	not viola	ted an	y provisions of the act of June 3,1937 (P.L. 1333,						
Sworn to and subsc	ribed before me this										s	ignature o	f Candid	ate			
	day of ————————————————————————————————————						_					D=:-+-	d Name				
	Signature						-					Frinte	d Name				
My Commission Exp	-											Ema	il				
	МО	D	AY	YR			•		Area	Code		Da	ytime T	elephon	e Numbe	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF DAVE DELLOSO	From:	1/1/202	<u>2</u> To:	3/28/2022
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	30.00
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			\$	30.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate val							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
		From: To:		То:				
		•			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
	•	•		•	•	•	$\overline{}$	PAGE TOTAL

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

PAGE TOTAL \$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	e or Candidate		Rep	oorting P	eriod			
F			From: To:					
					DATE		A	AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						

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

PAGE TOTAL \$ 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	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule I, Detailed Sum	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:		То	:	
				D	ATE		АМО	DUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plu	s 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page,	Section	on 3.			PAG	GE 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	ting Perio	bd			
			From:			To:		
				D	ATE		AM	OUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	•	•		•	•	•	_	
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			PAG	E TOTAL
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	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 DAVE DELLOSO	From:	<u>1/1/2022</u> To:	<u>3/28/2022</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	50.00
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,		\$	50.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candid	ate		Reporting	g Period			
			From:			To:	
				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 Sum	mary Pag	ле Г		PAGE TOTAL
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	, ,		PAGE TOTAL
						\$	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						Occupa	ition		•	
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iption	of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, I	in-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period				
FRIENDS OF DAVE DELLOSO	From	1/1/2022	То:	3/28/2022	

				DATE			AMOUNT
To Whom Paid PNC BANK			мо	DAY	YEAR		
Mailing Address PO BOX 747	066		1	11	2021	\$	56.82
City PITTSBURGH	State PA	Zip Code (Plus 4) 152747066	1	otion of Exp	penditure		
To Whom Paid PNC BANK			МО	DAY	YEAR		
Mailing Address PO BOX 747	066		2	9	2022	\$	24.84
City PITTSBURGH State Zip Code (Plus 4) PA 152747066				otion of Exp	penditure		
To Whom Paid PNC BANK			МО	DAY	YEAR		
Mailing Address PO BOX 747	066		3	9	2022	\$	24.54
City PITTSBURGH	State PA	Zip Code (Plus 4) 152747066	Description of Expenditure ACH BANK FEES				
To Whom Paid MARLENE RICHMOND			МО	DAY	YEAR		
Mailing Address 219 GRAYLIN	NG AVE #3		1	6	2022	\$	7,000.00
City NARBERTH	State PA	Zip Code (Plus 4) 19072	Descrip CONSU	otion of Exp	penditure		
To Whom Paid MORTON BOROUGH			МО	DAY	YEAR		
Mailing Address 500 HIGHLA	iling Address 500 HIGHLAND AVE			12	2022	\$	1,777.33
City MORTON State Zip Code (Plus 4) PA 19070			Descrip COBRA	otion of Exp	penditure		

To Whom Paid MARLENE RICHMOND	мо	DAY	YEAR				
Mailing Address 219 GRAYLING AVE #3	2	3	2022	\$		7,000.00	
City NARBERTH State Zip Code (Plus 4 PA 19072	Descrip	Description of Expenditure CONSULTING					
To Whom Paid DROPBOX	мо	DAY	YEAR				
Mailing Address 1800 OWENS STE 200	2	14	2022	\$		119.88	
City SAN FRANCISCO State CA State 2ip Code (Plus 4 94158	Descrip	Description of Expenditure DROPBOX					
To Whom Paid MARLENE RICHMOND	МО	DAY	YEAR				
Mailing Address 219 GRAYLING AVE #3	3	3 18 2022				7,000.00	
City NARBERTH State Zip Code (Plus 4	Descrip	Description of Expenditure CONSULTING					
PA 19070	CONSC	ILTING					
To Whom Paid STAPLES	MO	DAY	YEAR				
To Whom Paid			YEAR 2022	\$		140.21	
To Whom Paid STAPLES	MO 3	DAY 21 ption of Exp	2022			140.21	
To Whom Paid STAPLES Mailing Address 933 MONTGOMERY AVE City NARBERTH State Zip Code (Plus 4)	MO 3 Descrip	DAY 21 ption of Exp	2022			140.21	
To Whom Paid STAPLES Mailing Address 933 MONTGOMERY AVE City NARBERTH State Zip Code (Plus 4 19072) To Whom Paid	MO 3 Description COPIES	DAY 21 otion of Exp	2022 penditure			140.21	
To Whom Paid STAPLES Mailing Address 933 MONTGOMERY AVE City NARBERTH State Zip Code (Plus 4 19072 To Whom Paid DUNKIN	MO 3 Description MO 3 Description MO Description Description Description Description MO	DAY 21 Otion of Exp	2022 penditure YEAR 2022 penditure	\$			
To Whom Paid STAPLES Mailing Address 933 MONTGOMERY AVE City NARBERTH State PA 19072 To Whom Paid DUNKIN Mailing Address 600 CHESTER PIKE City NORWOOD State Zip Code (Plus 4	MO 3 Description MO 3 Description MO Description Description Description Description MO	DAY 21 DAY DAY 22 Dation of Exp	2022 penditure YEAR 2022 penditure	\$			
To Whom Paid STAPLES Mailing Address 933 MONTGOMERY AVE City NARBERTH State PA 19072 To Whom Paid DUNKIN Mailing Address 600 CHESTER PIKE City NORWOOD State PA 19074 To Whom Paid	MO 3 Description MO 3 Description And And And And And And And A	DAY 21 DAY DAY 22 Dation of Exp IGN FOOD	2022 Penditure YEAR 2022 Penditure	\$			

				1	1					
To Whom Paid			мо	DAY	YEAR					
STAPLES										
Mailing Address 124 MORTON AVE			3	25	2022	\$	37.78			
City NARBERTH	State	Zip Code (Plus 4)	Description of Expenditure							
· · · · · · - <u>-</u> ·	PA	19072	COPIES							
To Whom Paid MORTON BOROUGH	·	·	МО	DAY	YEAR					
Mailing Address 500 HIGHI	LAND AVE		3	18	2022	\$	1,777.33			
City MORTON	State	Zip Code (Plus 4)	Description of Expenditure							
	PA	19070	COBRA							
To Whom Paid MORTON BOROUGH			МО	DAY	YEAR					
Mailing Address 500 HIGHLAND AVE			3	18	2022	\$	1,777.33			
City MORTON	y MORTON State Zip Code (Plus 4) D					Description of Expenditure				
	PA	19070	COBRA							
To Whom Paid DAVID DIANO	·	·	МО	DAY	YEAR					
Mailing Address 236 CORNERSTONE DR			3	3	2022	\$	300.00			
City NEWTOWN SQ	State	Zip Code (Plus 4)	Description of Expenditure							
new rount oq	PA	19073	VOTERWEB							
			·				PAGE TOTAL			
Enter Grand Total of Exper	iditures on Page 1, Re	port Cover Page, Item D	-			\$	27,067.92			