### **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	2022	C0163				port		CAND	IDATE	<b>√</b>	CC	MMITTEE		LOBI	BYIST		
Name of Filing C	Committe	e, Candida	ate or L	obbvist:				y : J. WH	L ITE		<u> </u>						<u> </u>	—
																		_
Street Address:													1					
City:									State:					e: 19	018			
TYPE OF REPORT	6TH TUES	_	1.	2ND FRIDA PRIMARY	Y PRE	-	2. <b>X</b>	30 DA PRIMA		POST-	3.		AMENDMENT REPORT?		Yes	No	•	
(place X to the right of	6TH TUES		4.	2ND FRIDA ELECTION	Y PRI	<b>E</b> -	5.	30 DA		POST-	6.		TERMINAT REPORT?	ΓΙΟΝ	Yes	No		
report type)	ANNUAL	. REPORT	7.	<b>Year</b> 2022					IG METH				PAPER		$\checkmark$	DISKE	TTE	
Name of Office S	Sought by	, Candidat							DATE	OF ELE	CTIC	DN .	District	Office	Par	ty Code		y
Name of Office 5	ought by	Candidat	.e.						МО	DAY	YI	EAR	Number -1	GOV GOV		Code		
GOVERNOR									1	1	8	2022	<u> </u>	ONS FOR (	CODES)			
Summary of	Receipts	s and	МО	DAY	YEAR	2			МО	DAY	Y	EAR	FOF	R OFFIC	E USE	ONLY		
Expenditures	from:			3 29	2	022	Т	0		5	2	2022						
A. Amount Bro	ught For	ward Fron	1 Last R	eport				\$			•	0.00						
B. Total Moneta	ary Contr	ibutions A	And Rec	eipts (From	Sche	dule	e I)	\$				0.00						
C. Total Funds	Available	(Sum Of	Lines A	and B)				\$				0.00						
D. Total Expend	ditures (I	From Sche	edule II	I)				\$		1,	000,0	00.00						
E. Ending Cash	Balance	(Subtract	Line D	From Line (	C)			\$				0.00						
F. Value Of In-	Kind Con	tributions	Receiv	ed (From S	chedu	le I	I)	\$				0.00						
G. Unpaid Debt	s And Ob	oligations	(From S	Schedule IV	')			\$				0.00		•				
					AFF	ID	AVI	T SE	CTION									
PART I - If this is	s a Comm	nittee repo	ort, trea	surer sign	here.	If th	nis is	a Car	ndidate	report,	candi	date sig	gn here.					
I swear (or affirm) correct and comple		report, incl	uding the	attached scl	hedule	s file	d on	paper	or by elec	tronic m	edium	, are to	the best of	my know	/ledge	and beli	ef , tru	e,
Sworn to and subs	cribed bef day of	ore me this		20							5	Signature	e of Person	Submitt	ing Rep	ort		-
-	_	Signatur	re .					- -					Printe	ed Name				-
My Commission Ex	cpires												Email					-
		мо	D	AY	YR					Ar	ea Co	de	Daytime	Teleph	one Nu	mber		
Part II- If this is	a report	of a cand	lidate's	authorized	Comr	nitte	ee, C	andid	ate shal	l sign h	ere.							
I swear (or affirm) No 320) as amende		ne best of m	y knowle	edge and beli	ef this	poli	itical	comm	ittee has	not viola	ited ar	ny provis	ions of the	act of Ju	ine 3,1	937 (P.L	. 1333	,
Sworn to and subsc		re me this									Signature of Candidate							-
	day of —			_ 20				_					Duit- '	No				-
		Signature						_					Printed	ivame				
My Commission Exp		o.g.iatui e											Email					-
	-	МО	D	AY	YR	l		-		Area	Code		Day	time Te	lephon	e Numb	er	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
DAVID J. WHITE	From:	3/29/202	<u>22</u> To:	5/2/2022
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g 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	g 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	g Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	0.00
			1	
Total Monetary Contributions and Receipts During this Reporting Period (Add ar 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

	this Part to itemize onl with an aggregate value		\$2	250.00	) in the			
Nume of Fining Comm		Reporting Period From: To			Го:			
					DATE			AMOUNT
Full Name of Contribut	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	)					
	<b>!</b>	<b>I</b>	!		<u> </u>			DAGE 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 Fining Committee of Candidate					Reporting Period From: To:			
					DATE			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		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule 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 Candid	date			Rep	orting Pe	riod			
				Fror	m:		To	):	
					D	ATE		A	MOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	ip Code (Plus	5 4)					
Employer Name					Occupa	tion			
Employer Mailing Address/Principal Business	Place of		City		•	State		Zip Cod	le (Plus 4)
Enter Grand Total of Part C on S	Schedule I, Detail	led Sumr	mary Page,	Section	on 3.			P	O.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		Repor	ting Perio	od			
			From:			To:		
			•	D	ATE		AI	MOUNT
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. Detailed	d Summary Page	Section	4			PA	GE TOTAL
- Inc. Statia Total of Fall E	Jonedane 1, Betanet	. Jammary rage,	500.011				\$	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 Peri	od	
DAVID J. WHITE	From:	3/29/2022 <b>To:</b>	5/2/2022
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	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	TF)		
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** 

Name of Filing Committee or Candidat	:e		Reporting	g Period			
			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate	е				Re	porting	Period			
					Fro	om:		То:		
					•		DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor	1		•			Occupa	ation			
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, I	in-Kind	Contributi	ons De	etaile	ed				<b>PAGE TOTAL</b> 0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporti	ng Period			
DAVID J. WHITE	From	3/29	9/2022	To:	5/2/2022
		DATE			AMOUNT
To Whom Paid	МО	DAY	YEAR		

				DAIL		APIOUNI	
To Whom Paid FRIENDS OF DAVE WHITE			МО	DAY	YEAR		
Mailing Address 300 WEST STATE STREET SUITE 206			4	4	2022	\$	1,000,000.00
City MEDIA	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	19063	LOAN TO CAMPAIGN				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
						\$	1,000,000.00