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 201	50282			Re _l File	ported E		CAN	IDI	DATE		COM	4ITTEE	✓	LOBI	BYIS		
Name of Filing C	ommittee, Cand	idate or L	obbyist:		DAV	VKII	NS, JA	SON I	RII	ENDS	OF							
Street Address:	6333 GLENI	OCH STR	REET															
City:	PHILADELPH -	IIA						State:			PA			le: 19	135			_
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	-	2.	30 DA		Р	OST-	3. X		AMENDM REPORT?		Yes	\	No	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA	AY PRE	≣-	5.	30 DA		Р	OST-	6.		TERMINA REPORT?		Yes		No	\
report type)	ANNUAL REPOR	T 7.	Year 2022					NG MET		_			PAPER		\checkmark	DIS	ETTE	
Name of Office S	Sought by Candid	late:	-					DATE	0	F ELE	CTIC	N	District Number	Office Code	Par	ty Co	le Cou Cod	
REPRESENTATI	VE IN THE GENI	ERAL ASS	SEMBLY					МО		DAY	Y	EAR	179	STH	DEN	1	51	
									11		8	2022		(SEE INS	TRUCTI	ONS FO	R CODES	5)
Summary of Expenditures		МО	DAY	YEAR		_	•	МО		DAY		EAR	FO	R OFFIC	E USE	ONL	Y	
-			5 3	3 2	022	ı	0		6		6	2022						
	ught Forward Fr		-	- Caba	ما ا م		\$					957.34 000.00						
	ary Contribution		• `	n Scne	auie	: 1)	\$				٠,٠							
	Available (Sum (-				\$					957.34						
D. Total Expenditures (From Schedule III)							\$					550.00						
E. Ending Cash Balance (Subtract Line D From Line C)					1		\$				5,3	307.34						
	Kind Contributio				ie 11	.)	\$					0.00						
G. Olipaid Debi	s And Obligation	is (FIOIII)	Schedule 1				\$					0.00						
DADT I Ifabicio	- Committee no							CTIO			d:	data a:-						
PART I - If this is I swear (or affirm) correct and comple	that this report, ir	-	_									_		f my knov	/ledge	and b	elief , tı	rue.
·	cribed before me tl	nis	20						•			Signature	of Perso	n Submitt	ing Rep	oort		-
							-						Prin	ted Name				_
My Commission Ex	Signa opires	ture							-				Emai	il				_
	МО	D	AY	YR			_		•	Are	ea Co	de	Daytim	e Teleph	one Nu	mber		_
Part II- If this is	a report of a ca	ndidate's	authorized	Comn	nitte	e, C	andid	ate sh	all s	sign he	ere.							
I swear (or affirm) No 320) as amende		f my knowl	edge and bel	ief this	polit	tical	comm	ittee ha	s no	ot viola	ted ar	ny provis	ions of the	e act of Ju	ine 3,1	937 (I	P.L. 133	з,
Sworn to and subsc	ribed before me th	is	20									s	ignature o	of Candida	te			_
							-						Printe	d Name				-
My Commission 5	Signatur	e					-		-				Ema	il				_
My Commission Exp							_						2					_
	МО	D	AY	YR	1					Area	Code		Da	aytime Te	lephor	e Nur	nber	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
DAWKINS, JASON FRIENDS OF	From:	5/3/202	<u>2</u> To:	6/6/2022
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)			\$	5,000.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	y Period	(3)	\$	5,000.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	J Period	(4)	\$	0.00
			· I	
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			\$	5,000.00

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 Candidat	e	F	Reporting	Period			
		F	rom:		То	:	
				DATE			AMOUNT
Full Name of Contributing Committee			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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

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	or Candidate		Rep	oorting P	eriod			
			Fro	m:		To) :	
					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, 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 Per	iod		
DAWKINS, JASON FRIENDS OF	From:	5/3/2022	То:	6/6/2022

DATE AMOUNT

Full Name of Contributing Committee				DAY	YEAR	
FRIENDS OF MARIA			МО	DAI	ILAK	\$ 5,000.00
Mailing Address PO BOX 60811		5	19	2022	. 5,252.52	
City PHILADELPHIA	State	Zip Code (Plus 4)	J		2022	
	PA	19133				

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL \$ 5,000.00

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:		т	o:	
				D/	ATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac	e of Business	City		•	State		Zip	Code (Plus 4)
Enter Grand Total of Part C on Schee	dule I, Detailed Su	ımmary Page,	Section	on 3.			\$	PAGE TOTAL 0.00
							т	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 Committe	ee or Candidate		Report	ing Perio	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (F	Plus 4)					
Receipt Description					•	I	<u> </u>	
Enter Crand Total of Da	wt E on Schodulo I. Dotailed	Summany Daga	Costion					PAGE TOTAL
enter Grand Total of Pa	rt E on Schedule I, Detailed	Summary 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		
DAWKINS, JASON FRIENDS OF	From:	<u>5/3/2022</u> To:	<u>6/6/2022</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,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Car	ndidate		Reportin	g 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 o	n Schedule II, In-Ki	nd Contributions Detai	led Sun	mary Pa	ge,		PAGE TOTAL	•
Section 2.						\$	(0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Rep	porting	Period			
				Fro	m:		То:		
						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	у	State	e Zip	Code(Plus 4)	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, In-Kin	nd C	Contributions D	etaile	ed				PAGE TOTAL
Summary Page, Section 3.									0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period From 5/3/2022 To: 6/6					
DAWKINS, JASON FRIENDS OF	From	5/3/2022	То:	6/6/2022		

				DATE		AMOUNT	
To Whom Paid			мо	DAY	YEAR		
Philadelphia City Committee			FIG		12/11		
Mailing Address 923 Herbert Street			5	6	2022	\$	2,500.00
City Philadelphia	State	Zip Code (Plus 4)	Description of Expenditure Contribution				
	PA	19124					
To Whom Paid			мо	DAY	YEAR		
Philadelphia City Committee			1.10		1 Z/IIX		
Mailing Address 923 Herbert Street			5	6	2022	\$	150.00
City Philadelphia	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	19124	Contribution				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
						\$	2,650.00