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	80169			Repo Filed			CANDI	DATE		соми	ITTEE	✓	LOBI	BYIST		
Name of Filing C	Committee, Candid	late or L	obbyist:	F	RIEN	DS OF	F D	AVE DE	LLOSC)							
Street Address:	219 GRAYLIN	G AVE.	3														
City:	NARBERTH						s	State:	PA			Zip Cod	ie: 19	072			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PE PRIMARY	RE-	2.	30 E PRIN			POST-	3. X		AMENDM REPORT		Yes	No		\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY P ELECTION	RE-	5.	30 E		-	POST-	6.		TERMINA REPORT		Yes	No		√
report type)	ANNUAL REPORT	7.	Year 2022					METHO				PAPER		/	DISKE	TTE	
Name of Office S	Sought by Candida	te:					ŀ	DATE O	F ELE	CTIC	N	District Number	Office Code	Par	ty Code	Cour	
	· ,						N	10	DAY	ΥI	AR	Number	Couc	DEN	1	couc	
								11		8	2022	 	(SEE IN	STRUCTI	ONS FOR (CODES)
Summary of Expenditures	Receipts and	МО	DAY YE	AR			N	МО	DAY	Y	EAR	FO	R OFFI	CE USE	ONLY		
			5 3	20	22	то		6		6	2022]					
A. Amount Bro	ught Forward Froi	m Last R	eport				\$			89,3	368.34						
B. Total Monet	ary Contributions	And Rec	eipts (From Scl	ned	lule I)		\$				40.00						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			89,	108.34						
D. Total Expen	ditures (From Sch	edule II	I)				\$			17,3	353.47						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)				\$			72,0	54.87						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sched	lule	e II)		\$			1	.00.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$				0.00			'			
			AF	FI	DAV	IT SI	EC	TION									
PART I - If this is	s a Committee rep	ort, trea	surer sign here	. If	f this	is a Ca	and	lidate re	eport, o	andi	date sig	jn here.					
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	attached schedu	les 1	filed o	n pape	r or	by electi	ronic m	edium	, are to t	the best o	f my knov	wledge	and beli	ef , tr	ue,
Sworn to and subs	cribed before me thi day of	5	20							S	Signature	of Perso	n Submit	ting Rep	ort		_
	Signatu	ire				_						Prin	ted Name	.			_
My Commission Ex	cpires					_		•				Ema	il				
	МО	D	AY Y	'R					Ar	ea Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized Con	nmi	ittee,	Candi	idat	te shall :	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of red.	ny knowl	edge and belief th	nis p	politica	l comi	mitt	tee has n	ot viola	ted ar	y provis	ions of th	e act of J	une 3,1	937 (P.L	. 133	3,
Sworn to and subso	ribed before me this										s	ignature o	of Candida	ate			-
-	day of					_						Printe	d Name				-
	Signature					_											_
My Commission Exp	pires											Ema	il				
	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		
FRIENDS OF DAVE DELLOSO	From:	<u>5/3/202</u>	<u>2</u> To:	6/6/2022
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	40.00
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			\$	40.00

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 Candid	ate	'	Reporting	Period			
			From:		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.

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.

Name of Filing Comm	nittee or Candidate	Re	porting I	Period			
		Fro	om:		To	o:	
		I .		DATE			AMOUNT
Full Name of Contribut	or		мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
						l	
							PAGE TOTAL

7/2/2025 11:30:14 PM

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		P	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.0
Mailing Address							- \$	0.0
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule 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	2			Rep	orting Pe	riod			
				Fron	n:		To) :	
					D	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR	\$	0.00
Mailing Address									
City	State	Zi	p Code (Plus	(4)					
Employer Name	•				Occupa	tion	-	-	
Employer Mailing Address/Principal Pl	ace of Business		City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detaile	ed Sumr	mary 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:			То:		
		•		D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	ıs 4)					
Receipt Description	<u>'</u>	<u>'</u>			•			
Futor Curred Total of Bout	For Cabadula I Batailad	I Comment Page Co		4				PAGE TOTAL
Enter Grand Total of Part	E on Schedule 1, Detailed	Summary Page, Se	ection	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		
FRIENDS OF DAVE DELLOSO	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)	\$	100.00
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,		\$	100.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporting	Period			
FRIENDS OF DAVE DELLOSO			From:	<u>!</u>	5/3/2022	То:	6/6/2022
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
SHAWN CONRAN			1.10	2711	,	\$	100.00
Mailing Address 614 CHESTER PIKE			5	1	2022] *	100.00
City NORWOOD	State	Zip Code (Plus 4)	_		2022		
	PA	19074					
Description of Contribution: OFFICE S	SPACE	1	•		•		
Enter Grand Total of Part F on Scheo	lule II, In-Kind C	ontributions Deta	iled Sum	mary Pag	je,		PAGE TOTAL
Section 2.					:	\$	100.00

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 Per	riod		
FRIENDS OF DAVE DELLOSO	From	5/3/2022	То:	6/6/2022

				DATE		 AMOUNT
To Whom Paid			МО	DAY	YEAR	
ACTBLUE						
Mailing Address PO BOX 441146			5	4	2022	\$ 4.05
City SOMERVILLE	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure	
	MA	021140031	FEES			
To Whom Paid			мо	DAY	YEAR	
PNC BANK			1-10		ILAK	
Mailing Address 249 FIFTH AVE			5	2	2022	\$ 51.34
City PITTSBURGH	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure	
	PA	15222	BANK FI	EES		
To Whom Paid			мо	DAY	YEAR	
PNC			1-10		ILAK	
Mailing Address 249 FIFTH AVE			6	2	2022	\$ 22.72
City PITTSBURGH	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure	
	PA	15222	BANK FI	EES		
To Whom Paid			мо	DAY	YEAR	
MADI ENE DICUMONS			1-10		ILAK	
MARLENE RICHMOND						
Mailing Address 219 GRAYLING AVE	#3		6	6	2022	\$ 7,000.00
	#3	Zip Code (Plus 4)		6 tion of Exp		\$ 7,000.00
Mailing Address 219 GRAYLING AVE		Zip Code (Plus 4) 19072		tion of Exp		\$ 7,000.00
Mailing Address 219 GRAYLING AVE	State		Descript CONSUL	tion of Exp	enditure	\$ 7,000.00
Mailing Address 219 GRAYLING AVE City NARBERTH	State		Descript	tion of Exp		\$ 7,000.00
Mailing Address 219 GRAYLING AVE City NARBERTH To Whom Paid	State PA		Descript CONSUL	tion of Exp	enditure	\$ 7,000.00
Mailing Address 219 GRAYLING AVE City NARBERTH To Whom Paid MARLENE RICHMOND	State PA		Descript CONSUL MO	tion of Exp LTING DAY	YEAR 2022	
Mailing Address 219 GRAYLING AVE City NARBERTH To Whom Paid MARLENE RICHMOND Mailing Address 219 GRAYLING AVE	State PA #3	19072	Descript CONSUL MO	tion of Exp LTING DAY 5	YEAR 2022	
Mailing Address 219 GRAYLING AVE City NARBERTH To Whom Paid MARLENE RICHMOND Mailing Address 219 GRAYLING AVE	State PA #3 State	19072 Zip Code (Plus 4)	MO 5 Descript	tion of Exp LTING DAY 5 tion of Exp LTING	YEAR 2022 enditure	
Mailing Address 219 GRAYLING AVE City NARBERTH To Whom Paid MARLENE RICHMOND Mailing Address 219 GRAYLING AVE City NARBERTH	State PA #3 State	19072 Zip Code (Plus 4)	MO 5	tion of Exp LTING DAY 5	YEAR 2022	
Mailing Address 219 GRAYLING AVE City NARBERTH To Whom Paid MARLENE RICHMOND Mailing Address 219 GRAYLING AVE City NARBERTH	#3 State PA PA	19072 Zip Code (Plus 4)	MO 5 Descript	tion of Exp LTING DAY 5 tion of Exp LTING	YEAR 2022 enditure	
Mailing Address 219 GRAYLING AVE City NARBERTH To Whom Paid MARLENE RICHMOND Mailing Address 219 GRAYLING AVE City NARBERTH To Whom Paid STAPLES	#3 State PA PA	19072 Zip Code (Plus 4)	MO 5 Descript CONSUL MO 5	DAY tion of Exp DAY 5 tion of Exp TING	YEAR 2022 enditure YEAR 2022	\$ 7,000.00

To Whom Paid			мо	DAY	YEAR			
USPS								
Mailing Address 144 N NARBERTH AVE			5	9	2022	\$	7.10	
City NARBERTH	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	19072	POSTAC	SE/SUPPLII	ES			
To Whom Paid			мо	DAY	YEAR			
ACTBLUE			110					
Mailing Address PO BOX 44114	6		5	4	2022	\$	4.05	
City SOMERVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•		
	MA	021140031	FEES					
To Whom Paid			МО	DAY	YEAR			
PNC BANK			MO	DAT	TEAR			
Mailing Address 249 FIFTH AVE			5	2	2022	\$	51.34	
City PITTSBURGH	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	15222	BANK FEES					
To Whom Paid			мо	DAY	YEAR			
PNC BANK								
Mailing Address 249 FIFTH AVE			5	10	2022	\$	10.26	
City PITTSBURGH	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	15222	BANK FEES					
To Whom Paid			мо	DAY	YEAR			
PNC			1-10		12/11			
Mailing Address 249 FIFTH AVE			6	2	2022	\$	22.72	
City PITTSBURGH	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	15222	BANK FEES					
To Whom Paid			мо	DAY	YEAR			
MARLENE RICHMOND			MO	DAI	ILAK			
Mailing Address 219 GRAYLING AVE #3			6	6	2022	\$	7,000.00	
City NARBERTH	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	19072	CONSULTING					
To Whom Paid			MC	DAY	VEAD			
MARLENE RICHMOND			МО	DAY	YEAR			
Mailing Address 219 GRAYLING AVE #3		5	5	2022	\$	7,000.00		
City NARBERTH	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	19072	CONSULTING					
To Whom Paid			МО	DAY	YEAR			
STAPLES			140		ILAK			
Mailing Address 933 MONTGOMERY AVE			5	9	2022	\$	13.67	
City PENN VALLEY	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•		
	PA	19072	OFFICE SUPPLIES					
			1					

							JL 13	
To Whom Paid			МО	DAY	YEAR			
USPS								
Mailing Address 144 N NARBERTH AVE			5	9	2022	\$	7.10	
City NARBERTH	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	19072	POSTAG	SE/SUPPLI	ES .			
To Whom Paid			мо	DAY	YEAR			
CHELTENHAM PRINTING			MO	DAT	TEAR			
Mailing Address 518 RYER	S AVE		5	9	2022	\$	667.80	
City CHELTENHAM	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	19012	CAMPAIGN MATERIALS					
To Whom Paid			МО	DAY	YEAR			
PNC BANK			ПО		1 Z/IIX			
Mailing Address 249 FIFTH	I AVE		5	10	2022	\$	10.26	
City PITTSBURGH	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	15222	BANK FEES					
To Whom Paid			мо	DAY	YEAR			
SHARON HILL DEMOCRATS								
Mailing Address 230 GARV	'IN BLVD		5	16	2022	\$	250.00	
City SHARON HILL	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	19079	CONTRIBUTION					
To Whom Paid			МО	DAY	YEAR			
FOLCROFT DEMS			1-10		1 Z/IIX			
Mailing Address 1935 EDWARDS RD			5	25	2022	\$	100.00	
City FOLCROFT	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	19032	CONTRIBUTION					
To Whom Paid			МО	DAY	YEAR			
DARBY TOWNSHIP DEMS			МО		ILAK			
Mailing Address 1006 BUR	NSIDE RD		5	24	2022	\$	250.00	
City SHARON HILL	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	19079	CONTRIBUTION					
To Whom Paid				DAY	VEAD			
RIDLEY TSP DEMS			МО	DAY	YEAR			
Mailing Address PO BOX 2	01		5	17	2022	\$	100.00	
City WOODLYN	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	19094	CONTRIBUTION					
To Whom Paid			l MO	DAY	VEAD			
RUTLEDGE DEMS			МО	DAY	YEAR			
Mailing Address 7 E SYLVANS AVE			5	24	2022	\$	100.00	
City RUTLEDGE	State	Zip Code (Plus 4)	Descrip	l tion of Exp	enditure			
	PA	19072	CONTRIBUTION					
			•					

							.,
To Whom Paid MORTON BOROUGH			МО	DAY	YEAR		
Mailing Address 500 HIGHLAND AVE			5	9	2022	\$	1,777.33
City MORTON	State	Zip Code (Plus 4)	Descrip	tion of Exp	•		
	PA	19070	HEALTH	I CARE			
							PAGE TOTAL
Enter Grand Total of Expendi	itures on Page 1, Re	eport Cover Page, Item D				\$	31,463.41