## **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 :	ion 2022	C0163			Repo Filed		C/	ANDI	DATE	<b>√</b>	co	OMMITTE	E	LOB	BYIST		
Name of Filing	Committee, Candida	ate or Lo	obbyist:		DAVID	) J. W	/HITE										
Street Address																	
City:							State:				<b>Zip Code:</b> 19018						
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.		DAY MARY	F	POST- 3.		AMENDMENT REPORT?		Yes	No	D N	/	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	E- 5.		30 DAY PO ELECTION			OST- 6. <b>X</b>		TERMINA REPORT?		Yes	No	D	(
report type)	ANNUAL REPORT	7.	<b>Year</b> 2022				.ING M ) CHE					PAPER		$\checkmark$	DISKI	ETTE	
Name of Office	Sought by Candidat	te:					DA	te o	F ELEC	CTIO	N	District Number	Office Code	Par	ty Code	Count	y
GOVERNOR							мо		DAY	YE	AR	-1	GOV	REF	)		
GOVERNOR								11		8	2022	<u> </u>	(SEE INS	TRUCTI	ONS FOR	CODES)	
	Receipts and	мо	DAY	YEAR	Ł		мо		DAY	YE	AR	FO	R OFFIC	e use	ONLY		
Expenditure	s from:	1	LO 25	2	022	то		11	2	8	2022						
A. Amount Bro	ought Forward Fron	n Last Ro	eport				\$				0.00						
B. Total Mone	tary Contributions A	And Reco	eipts (From	1 Sche	dule I)		\$	0.00									
C. Total Funds	Available (Sum Of	Lines A	and B)				\$				0.00						
D. Total Exper	nditures (From Sche	edule II	[)				\$				0.00						
E. Ending Cas	h Balance (Subtract	t Line D	From Line	C)		_	\$				0.00	-					
F. Value Of In	-Kind Contributions	Receive	ed (From S	chedu	le II)	_	\$				0.00	-					
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	')			\$				0.00						
					IDAV												1
	is a Committee repo												my know	ledae	and hel	ief tru	
correct and comp	lete.	-	attacheu sc	lieuule	s meu o		er or by	electi		aram,		the best of	IIIy KIIOW	neuge		ier, tru	e,
Sworn to and sub	scribed before me this day of	5	20							Si	gnatur	e of Persor	n Submitti	ing Rej	oort		
	Signatur	re										Print	ed Name				-
My Commission E	xpires											Emai	I				-
	МО	DA	AY	YR					Are	a Code	•	Daytim	e Telepho	one Nu	mber		
	s a report of a cand ) that to the best of m led.								-		, provis	ions of the	e act of Ju	ine 3,1	937 (P.I	L. 1333	,
Sworn to and subscribed before me this day of 20											s	ignature o	f Candida	te			-
												Printe	d Name				-
My Commission Ex	Signature											Emai	1				-
						_											
	мо	DA	AY	YR	ł				Area (	Code		Da	iytime Te	lephor	e Numl	ber	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
DAVID J. WHITE	From:	<u>10/25/202</u>	2 <u>2</u> To:	<u>11/28/2022</u>
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
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			\$	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				orting I	Period				
					From: To:				
		·			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			\$	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					
						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	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				orting Pe	riod				
Fr				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				Occupation					
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)	
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Sectior							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			Reporting Period						
			From: To:						
				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

### SE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THING DURING THE REPORTING PERIOD.

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting Perio	od	
DAVID J. WHITE	From:	<u>10/25/2022</u> то:	<u>11/28/2022</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, 1		\$	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					
			From:			То:		
				DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address						<b>]</b> \$	0.0	)0
City	State	Zip Code (Plus 4)						
Description of Contribution:								
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	le,	P	AGE TOTAL	_
						\$	0.0	0

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

Name of Filing Committee or Candidate				porting I	Period		
						То:	
					DATE		AMOUNT
Full Name of Contributor				мо	DAY	YEAR	
Mailing Address							<b>\$</b> 0.00
City	State	Zip Code(Plus 4)					
Employer of Contributor			Occupation				
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 Scho Summary Page, Section 3.	edule II, In-Kin	d Contributions D	etaile	ed			<b>PAGE TOTAL</b> 0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate				Reporting Period					
	From			То:					
				DATE			AMOUNT		
To Whom Paid	мо	DAY	YEAR						
Mailing Address						\$	0.00		
City State Zip Code (Plus 4)				tion of Exp	enditure				
Enter Grand Total of Exponditures	<b>`</b>				PAGE TOTAL				
Enter Grand Total of Expenditures of	JII Page 1, Report C	lover Page, menn i				\$	0.00		