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 2014	40351			Report Filed B		CANDI	DATE	СОМ	MITTEE	✓	LOBI	BYIST	
	Committee, Candid	late or L	obbyist:			-	DAVE WH	-ITE						J
Street Address:														
City:	MEDIA						State:	de: 19063						
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2.	30 D/ PRIM		POST- 3	3.	AMENDI REPORT		Yes	No	, 🔨
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 D/ ELEC		POST- 6	5.	TERMIN REPORT		Yes	No	· 🗸
report type)	ANNUAL REPORT	7. X	Year 2022				NG METHO CHECK O			PAPER		\checkmark	DISKE	TTE
Name of Office	L Sought by Candida	te:					DATE O	F ELEC	TION	District Number		Par	ty Code	County Code
							мо	DAY	YEAR	I I I I I				
							11	8	3 2022		(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR			мо	DAY	YEAR	FC	OR OFFIC	E USE	ONLY	
Expenditures	s from:		11 29	20	022 T	0	12	3:	1 2022	2				
A. Amount Bro	ught Forward Fro	m Last R	eport			\$			3,686.55	4				
B. Total Monet	ary Contributions	And Rec	eipts (From	1 Schee	dule I)	\$;		0.00					
C. Total Funds	Available (Sum O	f Lines A	and B)			\$	5		0.00					
D. Total Expen	ditures (From Sch	edule II	I)			\$	5		0.00					
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)		\$			3,686.55	-				
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedul	le II)	\$	5		0.00	-				
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	/)		\$	5	4,92	20,000.00					
				AFF	IDAVI	T SE	CTION							
	s a Committee rep) that this report, inc		-					• •		-		vledge	and heli	ef true
correct and compl	ete.	-		incuarco	, nicu on	paper	or by ciece			the best t	, ing kilor	licuge		
Sworn to and sub	scribed before me thi day of	S	20						Signatur	e of Perso	on Submitt	ing Rep	oort	
	Signatu	ıre				-				Prir	nted Name			
My Commission E	xpires					_				Ema	ail			
	мо	D	AY	YR				Area	Code	Daytin	ne Teleph	one Nu	mber	
	a report of a can				•			•		sions of th	e act of lu	ine 3.1	937 (P I	1333
No 320) as amend	ed.			er enis	pontical	comm	intee has h	or violate				ine 3,1	557 (Fil	. 1999,
Sworn to and subs	cribed before me this day of		20						S	Signature	of Candida	ite		
						-				Printe	ed Name			
My Commission Ex	Signature pires					-				Ema	ail			
	мо	D	AY	YR				Area C	ode	D	aytime Te	elephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** FRIENDS OF DAVE WHITE From: <u>11/29/2022</u> **To:** 12/31/2022 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 0.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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	City State Zip Code (Plus 4)								
								PAGE TOTAL	
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 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	lule I, Detailed Sun	nmary Pa	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			Rep	orting Pe	riod			
Fron				rom:			To:	
				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 Sche	dule I, Detailed Su	ummary Page	e, Sectio	on 3.			P#	AGE TOTAL 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

E 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	d	
FRIENDS OF DAVE WHITE	From:	<u>11/29/2022</u> то:	<u>12/31/2022</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 PART	ſF)		
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	_	_				\$	0.00	
City	State	Zip Code (Plus 4)						
Description of Contribution:	•		-		1	- I		
Enter Grand Total of Part F on Sc Section 2.	nedule II, In-Ki	nd Contributions Detai	led Sum	mary Pag	_		PAGE TOTAL	
						\$	0.00	

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

Name of Filing Committee or Candidate			Rep	porting I	Period		
						То:	
					DATE		AMOUNT
Full Name of Contributor				мо	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code(Plus 4)					
Employer of Contributor		•		Occupa	ation		
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 Sch Summary Page, Section 3.	edule II, In-Kind	d Contributions D	etaile	d			PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate				Reporting Period				
				From				
				DATE			AMOUNT	
To Whom Paid				DAY	YEAR			
Mailing Address						\$	0.00	
City State Zip Code (Plus 4)			Descrip	tion of Exp	enditure			
Enter Grand Total of Exponditures	on Page 1. Penert (Cover Bage Item [`				PAGE TOTAL	
Enter Grand Total of Expenditures of	JII Page 1, Report C	lover Page, menn i				\$	0.00	

SCHEDULE IV STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candio	date		Reporti	ng Period					
FRIENDS OF DAVE WHITE			From:	<u>11</u>	/29/2022	То:	<u>12/31/2022</u>		
					DATE			utstanding alance of Debt	
Name of Creditor DAVID J. & DEBRA ANN WHI	TE (LOAN)			мо	DAY	YEAR			
Mailing Address				9	16	202	L \$	1,920,000.00	
				tion of Del					
Name of Creditor DAVID J. & DEBRA ANN WHI	TE (LOAN)			мо	DAY	YEAR			
Mailing Address				12	31	202	L \$	1,000,000.00	
City SECANE	City SECANE State Zip Code (Plus 4) PA 19018				tion of Del				
Name of Creditor DAVID J. & DEBRA ANN WHI	TE (LOAN)			мо	DAY	YEAR			
Mailing Address				3	7	202	2 \$	1,000,000.00	
City SECANE	State PA	Zip Code (P 19018	lus 4)		tion of Del				
Name of Creditor DAVID J. & DEBRA ANN WHI	TE (LOAN)			мо	DAY	YEAR			
Mailing Address				4	4	202	2 \$	1,000,000.00	
City SECANE	State PA	Zip Code (P 19018	lus 4)	Descrip	tion of Del	ot			
								PAGE TOTAL	
Enter Grand Total of Unpaid	Debts on Page 1, I	Report Cover Pa	ge, Item	G.			\$	4,920,000.00	