Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificatio	on 2014	0351			Repor Filed		CAND	IDATE	СОМ	MITTEE	✓	LOBI	BYIST	
	ommittee, Candida	ate or Lo	obbyist:			-	DAVE W	HITE						I
Street Address:	300 WEST ST	ATE STF	REET,SUIT	E 206										
City:	MEDIA						State:	PA		Zip Co	de: 19	063		
	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 DA PRIMA		POST-	POST- 3.		AMENDMENT REPORT?		No	\checkmark
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	5.	30 DA		POST-	6.	TERMIN REPORT		Yes	No	\checkmark
report type)	ANNUAL REPORT	7. X	Year 2022				NG METH CHECK O			PAPER		\checkmark	DISKE	TTE
Name of Office S	ought by Candidat	te:					DATE C	OF ELEC	TION	District Number	Office Code	Par	ty Code	County Code
					мо	DAY	YEAR	Humber	coue			couc		
							11		8 2022]	(SEE INS	TRUCTI	ONS FOR (CODES)
Summary of I		мо	DAY	YEAR	1		мо	DAY	YEAR	FC	OR OFFIC	e use	ONLY	
Expenditures	from:	1	.1 29	2	022 7	ГО	12	2 3	1 2022					
A. Amount Brou	ught Forward From	n Last R	eport			\$		-	3,686.55					
B. Total Moneta	ary Contributions /	And Rec	eipts (Fron	n Sche	dule I)	\$			0.00]				
C. Total Funds	Available (Sum Of	Lines A	and B)			\$			0.00					
D. Total Expend	litures (From Scho	edule II	[)			\$			0.00]				
E. Ending Cash	Balance (Subtract	t Line D	From Line	C)		\$			3,686.55					
F. Value Of In-H	Kind Contributions	Receive	ed (From S	chedu	le II)	\$			0.00	-				
G. Unpaid Debt	s And Obligations	(From S	chedule IV	/)		\$		4,9	20,000.00					
				AFF	IDAV	IT SE	CTION							
PART I - If this is	a Committee repo	ort, trea	surer sign	here.	If this i	s a Cai	ndidate r	eport, ca	andidate si	gn here.				
I swear (or affirm) correct and comple	that this report, incl te.	uding the	attached sc	hedules	s filed or	paper	or by elect	tronic me	dium, are to	the best o	of my know	ledge	and beli	ef , true
Sworn to and subse	cribed before me this day of	:	20						Signatur	e of Perso	n Submitt	ing Rep	oort	
	Signatu	re				_				Prir	ited Name			
My Commission Ex	pires					_				Ema	il			
	мо	DA	Y	YR				Are	a Code	Daytin	ne Telepho	one Nu	mber	
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nittee, (Candid	ate shall	sign he	re.					
I swear (or affirm) No 320) as amende	that to the best of m d.	ıy knowle	dge and beli	ief this	political	comm	ittee has r	not violato	ed any provis	ions of th	e act of Ju	ne 3,1	937 (P.L	. 1333,
Sworn to and subscribed before me this									5	Signature	of Candida	te		
	day of		20											
			20			_				Printe	ed Name			
My Commission Expi	day of Signature		20			_				Printo				

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			Re	Reporting Period						
			Fro	om:		То	:			
					DATE			AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus	4)							
							Γ	PAGE TOTAL		

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

0.00

\$

PAGE 3

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 Candidat	e			orting P	eriod			
			Fro	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 S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	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							
			From:			То:				
				DA	TE		А	MOUNT		
Full Name of Contributing Committe	e			мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Cod	e (Plus 4)							
						ſ		PAGE TOTAL		
Enter Grand Total of Part C on S	chedule I, Detai	led Summary 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	Reporting Period	
	From:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

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	Name of Filing Committee or Candidate			ting Perio	od		Reporting Period						
			From:			То:							
				D	ATE			AMOUNT					
Full Name				мо	DAY	YEAR							
Mailing Address							\$	i	0.00				
City	State	Zip Code (Plus 4)										
Receipt Description					1	1							
Enter Grand Total of Part E	on Schodulo I. Dotailog		Section	4				PAGE TOT	AL				
Linter Granu Total of Part E		i Suillilai y Page,	Section				\$		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 R				Reporting Period					
F						То:			
				DATE		АМО	UNT		
Full Name of Contributor			мо	DAY	YEAR				
Mailing Address						\$	0.00		
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	je,	PAGE	TOTAL		
					4	6	0.00		

0.00

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

Name of Filing Committee or Candidate				R	eporting P	Period			
				Fi	om:		To:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occupa	l tion			
Employer Mailing Address/Prin Business	ncipal Place of	City	State	1	Zip 4)	Code(Plus	Descri	ption of (Contribution
Enter Grand Total of Part	G on Schedule II	Tn-Kind	Contributions D	otai	lad		-		PAGE TOTAL

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.	PAGE

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate						
	From			То:			
		DATE	AMOUNT				
To Whom Paid				DAY	YEAR		
Mailing Address						\$	0.00
City State Zip Code (Plus 4)				tion of Ex	penditure		
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D							PAGE TOTAL
	on rage 1, Report C	over rage, item 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 Candidate				Reportin	porting Period				
FRIENDS OF DAVE WHITE				From:	<u>11</u>	<u>11/29/2022</u> To: <u>12</u>			<u>12/31/2022</u>
						DATE			Outstanding Balance of Debt
					мо	DAY	YEAR		
DAVID J. & DEBRA ANN WHITE (LOAN)									
Mailing Address 2747 SPRINGHILL ROAD					9	16	2021	\$	1,920,000.00
City SECANE		State Zip Code (Plus 4)			Description of Debt				
		РА	19018	LOAN TO COMMITTEE					
						DATE			Outstanding Balance of Debt
Name of Creditor DAVID J. & [DEBRA ANN WHITE (L	OAN)			мо	DAY	YEAR		
Mailing Address	2747 SPRINGHILL	ROAD			12	31	2021	\$	1,000,000.00
City SECANE		State	Zip Code (Pl	us 4)	Description of Debt				
		РА	19018		LOAN TO COMMITTEE				
						DATE			Outstanding Balance of Debt
Name of Creditor DAVID J. & [DEBRA ANN WHITE (L	OAN)			мо	DATE DAY	YEAR		
	DEBRA ANN WHITE (L 2747 SPRINGHILL	-			MO 3		YEAR 2022	\$	Balance of Debt
DAVID J. & [-	Zip Code (Pl 19018	us 4)	3 Descrip	DAY	2022 ot	\$	Balance of Debt
DAVID J. & [Mailing Address		ROAD State		us 4)	3 Descrip	DAY 7 ption of Del	2022 ot	\$	Balance of Debt
DAVID J. & E Mailing Address City SECANE		ROAD State PA		us 4)	3 Descrip	DAY 7 otion of Del	2022 ot	\$	Balance of Debt
DAVID J. & E Mailing Address City SECANE	2747 SPRINGHILL	ROAD State PA OAN)		us 4)	3 Descrip LOAN T	DAY 7 Dition of Del O COMMIT DATE	2022 ot TEE		Balance of Debt
DAVID J. & [Mailing Address City SECANE Name of Creditor DAVID J. & [2747 SPRINGHILL	ROAD State PA OAN)			3 Descrip LOAN T MO 4	DAY 7 Dition of Del TO COMMIT DATE DAY	2022 ot TEE YEAR 2022		Balance of Debt
DAVID J. & E Mailing Address City SECANE Name of Creditor DAVID J. & E Mailing Address City SECANE	2747 SPRINGHILL	ROAD State PA OAN) ROAD State PA	19018 Zip Code (Pl 19018	us 4)	3 Descrip LOAN T MO 4 Descrip	DAY 7 otion of Del O COMMIT DATE DAY 4	2022 ot TEE YEAR 2022		Balance of Debt