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			Report Filed B		CANDI	DATE	СС	OMMITTEE	✓	LOB	BYIST			
Name of Filing C	Committee, Candie	date or Lo	obbyist:			-	ASON FRI	ENDS (DF							
Street Address:	6333 GLENLO	OCH STR	EET													
City:	PHILADELPH	[A					State:	PA		Zip Co	Zip Code: 19135					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	· 2.	30 DA PRIM		POST-	3.	AMENDI REPORT		Yes	√ Nc)		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 DA		POST-	6. X		TERMINATION REPORT?		No	· 🗸		
report type)	ANNUAL REPORT	7.	Year 2022				NG METHO CHECK OI			PAPER		\checkmark	DISKE	TTE		
Name of Office S	L Sought by Candida	ate:					DATE O	F ELEC	TION	District Number		Pai	ty Code	County Code		
							мо	DAY	YEAR	179		DEM 51				
							11		8 20	22	(SEE INS	TRUCTI	ONS FOR	CODES)		
	Receipts and	мо	DAY	YEAR			мо	DAY	YEAR	F	OR OFFIC	E USE	ONLY			
Expenditures	s from:	1	.0 25	20	022 T	0	11	2	.8 20)22						
A. Amount Bro	ught Forward Fro	m Last R	eport			\$			8,403.	51						
B. Total Monet	ary Contributions	And Reco	eipts (From	n Schee	dule I)	\$			5,250.	00						
C. Total Funds Available (Sum Of Lines A and B)					\$			13,653.	51							
D. Total Expenditures (From Schedule III)				\$			2,030.0	00								
E. Ending Cash Balance (Subtract Line D From Line C)				\$			11,623.5	51								
F. Value Of In-	Kind Contribution	s Receive	ed (From S	chedul	le II)	\$			0.0	00						
G. Unpaid Debt	ts And Obligations	s (From S	chedule IV	')		\$			0.0	00						
				AFF	IDAVI	T SE	CTION									
	s a Committee rep	•	-					• •		-						
I swear (or affirm) correct and comple) that this report, ind ete.	cluding the	attached sc	hedules	filed on	paper	or by elect	ronic me	dium, are	to the best o	of my knov	vledge	and beli	ef , true		
Sworn to and subs	cribed before me th day of	is	20						Signa	ture of Perso	on Submitt	ing Rej	port			
	Signati	ure	-			_				Prir	nted Name					
My Commission Ex	2									Ema	ail					
	мо	DA	NY	YR		_		Are	a Code	Daytin	ne Teleph	one Nu	mber			
Part II- If this is	a report of a can	didate's	authorized	Comm	nittee, C	andid	ate shall	sign he	re.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowle	dge and beli	ef this	political	comm	ittee has n	ot violat	ed any pro	ovisions of th	e act of Ju	ine 3,1	937 (P.I	1333,		
Sworn to and subso	ribed before me this day of	5	20							Signature	of Candida	ite				
						-				Print	ed Name					
My Commission Exp	Signature					-				Ema	ail					
						-										
	МО	DA	AY .	YR				Area C	Code	D	aytime Te	lephor	ne Numb	er		

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** DAWKINS, JASON FRIENDS OF From: <u>10/25/2022</u> **To:** 11/28/2022 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) \$ 500.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 500.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 3,750.00 1,000.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 4,750.00 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 \$ 5,250.00 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					
DAWKINS, JASON FRIENDS OF			Fr	om:	<u>10/2</u>	5/20	1 <u>22</u> To :		<u>11/28/2022</u>	
					DATE AMOUNT					AMOUNT
Full Name of Contrib GREENLEE PARTNER	-				мо	DAY		YEAR		
Mailing Address	1400 N PROVIDE	NCE RD BLDGE 2 SU	ITE 1040	11		13	2022	\$	250.00	
City MEDIA		State	Zip Code (Plus	4)						
		PA	19063							
Full Name of Contrib	outing Committee	•	•							
THE DT PAC					мо	DAY		YEAR		
Mailing Address	1052 BRANDT AV	/E			11		13	2022	\$	250.00
City LEMOYNE		State	Zip Code (Plus	4)	11		15	2022		
		PA	17043							
		2	8						Г	PAGE TOTAL

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

500.00

\$

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 Candidate				Reporting Period					
				From: 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	\$	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	g Period					
DAWKINS, JASON FRIENDS OF			From:	<u>10/2</u>	25/2022	То:	<u>11/28/2022</u>		
				DA	TE			AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			
PHYSICIAN ASSISTANTS							\$	500.00	
Mailing Address North 3rd Street	1			11	28	2022			
City HARRISBURG	State		e (Plus 4)						
	PA	17102							
Full Name of Contributing Committee PHYSICIAN ASSISTANTS					DAY	YEAR	\$	2,000.00	
Mailing Address North 3rd Street				11	28	2022		2,000100	
City HARRISBURG	State	Zip Code	e (Plus 4)		20	2022			
	РА	17102							
Full Name of Contributing Committee PHYSICIAN ASSISTANTS				мо	DAY	YEAR		250.00	
Mailing Address North 3rd Street					12	2022	\$	250.00	
City HARRISBURG	State	Zip Code	e (Plus 4)	. 11	13	2022			
	РА	17102							
Full Name of Contributing Committee Vision Committee		-		мо	DAY	YEAR	\$	500.00	
Mailing Address 2205 Strawberry Squ	Jare			11	13	2022		500.00	
City Harrisburg	State	Zip Code	e (Plus 4)		15	2022			
	PA	17101							
Full Name of Contributing Committee	•			мо	DAY	YEAR			
AFSCME COUNCIL 13 POL & LEG ACCT				MO	DAT	TEAR	\$	500.00	
Mailing Address 4031 EXECUTIVE PA	RK DRIVE			11	13	2022			
City HARRISBURG	State	Zip Code	e (Plus 4)			2022			
	РА	17111-:	1507						
								PAGE TOTAL	
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Sectio				n 3.					
	,	•					\$	3,750.00	

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.)

:	10/25/2					
m: <u>10/25/2022</u>			o: <u>11/28/2022</u>			
DATE			AMOUNT			
мо	DAY	YEAR	\$ 1,000.00			
11	13	2022				
	15	2022	-			
Occupati	ion	Real Es	tate Partner			
	State		Zip Code (Plus 4)			
	IL		17101			
n 3.			PAGE TOTAL \$ 1,000.00			
0	MO 11 Occupat	MO DAY 11 13 Occupation State IL	MO DAY YEAR 11 13 2022 Decupation Real Es State IL 3.			

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	Name of Filing Committee or Candidate			eporting Period						
			From:	: То:						
			DATE					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 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 Perio	d								
DAWKINS, JASON FRIENDS OF	From:	<u>10/25/2022</u> To:	<u>11/28/2022</u>							
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR										
TOTAL for the Reporting Pe	riod (1)	\$	0.00							
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)										
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: To:					
	DATE						AMOUNT		
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 Scl Section 2.	nedule II, In-Ki	nd Contributions Detai	led Sum	mary Pag	je,		PAGE TOTAL		
						\$	(0.00	

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

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate				Reporting 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		•		Occupa	ation					
Employer Mailing Address/Principal Plac	e of Business	City	State	e Zip	Code(Plus 4)) Description 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 Candida	ite		Reporti	ng Period			
DAWKINS, JASON FRIENDS OF			From	<u>10/2</u>	<u>5/2022</u>	То:	<u>11/28/2022</u>
				DATE			AMOUNT
To Whom Paid			мо	DAY	YEAR		
AHFCU							
Mailing Address 2060 Red Lion Road			11	28	2022	\$	30.00
City Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	РА	19115	Bank Fees				
To Whom Paid	мо	DAY	YEAR				
Jason Dawkins							
Mailing Address 4612 Lesher Street			11	5	2022	\$	500.00
CityPhiladelphiaStateZip Code (Plus 4)				tion of Exp	enditure		
	РА	19124	Contribution				
To Whom Paid			мо	DAY	YEAR		
Jason Dawkins							
Mailing Address 4612 Lesher Stre	et		11	7	2022	\$	1,000.00
City Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	РА	19124	Campai	gn expens	e		
To Whom Paid			мо	DAY	YEAR		
42nd Ward							
Mailing Address 887 North 42nd S	St		11	7	2022	\$	500.00
City Philadelphia	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	19104	Contrib	ution			
							PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	2,030.00