#### **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 2019	0264				port ed B		CANDI	DATE		СОМ	<b>4ITTEE</b>	✓	LOBI	BYIST		
Name of Filing C	ommittee, Candid	ate or L	obbyist:		DEN	ININ	, JILL	FRIEND	S OF				·				
Street Address:	1210 MEGA L	ANE															
City:	GILBERTSVILI	.E						State:	PA			Zip Cod	<b>le:</b> 19	9525			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY F PRIMARY	PRE-	. [	2.	30 DA PRIMA		POST-	3. <b>X</b>			AMENDMENT Yes No REPORT?				
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- !	5.	30 DA ELECT		POST- 6. TERMINATION Yes N REPORT?					No		<b>\</b>	
report type)	ANNUAL REPORT	7.	<b>Year</b> 2023					IG METHO				PAPER		<b>/</b>	DISKE	TTE	
Name of Office S	ought by Candida	te:						DATE 0	F ELE	СТІО	N	District Number	Office Code	Par	ty Code	Cour	
	-							мо	DAY	YE	YEAR DEM						
								11		7	2023	<b> </b>	(SEE IN	STRUCTI	ONS FOR (	CODES	)
Summary of	•	МО	DAY YE	EAR				МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
Expenditures	from:		5 2	20	)23	Т	0	6		5	2023						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$			8,5	511.32						
B. Total Moneta	ary Contributions	And Rec	eipts (From Se	ched	dule	ı)	\$				0.00						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			8,5	511.32						
D. Total Expend	ditures (From Sch	edule II	I)				\$			1,3	50.00						
E. Ending Cash	Balance (Subtract	Line D	From Line C)				\$			7,1	61.32						
F. Value Of In-	Kind Contributions	Receiv	ed (From Sche	edul	e II	()	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	ichedule IV)				\$				0.00						
			Α	\FF	IDA	٩VI	T SE	CTION									
PART I - If this is	a Committee rep	ort, trea	surer sign her	re. I	f thi	is is	a Can	didate re	eport, o	candio	date sig	jn here.					
I swear (or affirm) correct and comple	that this report, incl ete.	uding the	attached sched	lules	filed	d on	paper (	or by elect	ronic m	edium	, are to t	the best o	f my kno	wledge	and beli	ef , tr	ue.
Sworn to and subs	cribed before me this day of	i	20							s	ignature	of Perso	n Submit	ting Rep	oort		
	Signatu	re					-					Prin	ted Name	•			_
My Commission Ex	pires						_					Ema	il				
	МО	D/	AY	YR					Are	ea Cod	e	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a cand	lidate's	authorized Co	mm	itte	e, C	andida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of ned.	ıy knowle	edge and belief	this	polit	tical	commi	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L	. 133	3,
Sworn to and subsc	ribed before me this day of		20								s	ignature o	of Candid	ate			
							-					Printe	d Name				-
My Commission Exp	Signature ires						-					Ema	il				-
	МО	D	AY	YR			-		Area	Code		Da	aytime T	elephor	e Numb	er	-

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
DENNIN, JILL FRIENDS OF	From:	5/2/202	<u>3</u> To:	6/5/2023
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	) 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	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 ar 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

	this Part to itemize onl with an aggregate value		\$2		) in the			
Nume of Fining Comm	intec of cumulate			om:	renou	То	:	
		L			DATE			AMOUNT
Full Name of Contribut	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	)					
	<b>!</b>	<b>I</b>	!		<u> </u>			DAGE TOTAL

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

PAGE TOTAL
\$ 0.00

## 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		Rep	orting P	eriod			
			Fro	m:		To	):	
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						

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

**PAGE TOTAL \$**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 Candi	date		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary 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			Rep	orting Pe	riod			
			Fror	n:		To	<b>)</b> :	
				D	ATE		А	MOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupa	tion		•	
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Coo	de (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary 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 Co	andidate		Report	ting Perio	bd			
			From:			То:		
				D	ATE		AN	10UNT
Full Name				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	·	•						
Enter Grand Total of Part E or	Schedule T Detaile	d Summary Page	Section	4			PA	GE TOTAL
Lines Grana Fotal of Fair 2 of	r benedule 1/ betanet	z Summary r uge,	Section	••			\$	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	d	
DENNIN, JILL FRIENDS OF	From:	<u>5/2/2023</u> <b>To:</b>	6/5/2023
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER 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)	\$	0.00
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,		\$	0.00

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Filing Committee or Candidat	:e		Reporting	g Period			
			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidat	e				Re	porting F	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									<b>\$</b>	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor			•			Occupa	tion		•	
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, I	In-Kind	Contributi	ons De	taile	ed				PAGE TOTAL 0.00

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candid	late		Reportir	ng Period			
DENNIN, JILL FRIENDS OF			From	<u>5/2</u>	То:	6/5/2023	
				DATE			AMOUNT
To Whom Paid Friends of Hillary Fuellborn			мо	DAY	YEAR		
Mailing Address 745 Yorkway Pla	ace		5	11	2023	\$	250.00
<b>City</b> Jenkintown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19046		otion of Exp			
To Whom Paid Team Up For Education			мо	DAY	YEAR		
Mailing Address PO Box 255			5	11	2023	\$	500.00
City East Greenville	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18041	1	otion of Exp ign Contrib			
<b>To Whom Paid</b> Friends of Noah Marlier			МО	DAY	YEAR		_
Mailing Address 508 Bradford Rd			5	5	2023	\$	500.00
City Oreland	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	1	

	PA	19075	Campaign Contribution				
To Whom Paid Friends of Marla Hexter			мо	DAY	YEAR		
Mailing Address 27 Mine Hill Rd			5	24	2023	\$	100.00
City Schwenksville	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19473	Description of Expenditure Campaign Contribution				
							PAGE TOTAL

	PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.	\$ 1,350.00