

Campaign Finance Report

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

Filer Identification Number : 20190270		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF DEVLIN ROBINSON											
Street Address: PO BOX 81											
City: HERSHEY				State: PA		Zip Code: 17033					
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY PRIMARY	POST-	3. X	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	Year 2023	FILING METHOD () CHECK ONE			PAPER <input checked="" type="checkbox"/>		DISKETTE		
Name of Office Sought by Candidate:					DATE OF ELECTION			District Number	Office Code	Party Code	County Code
					MO	DAY	YEAR	REP			
					11	7	2023	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		5	2	2023		6	5	2023			
A. Amount Brought Forward From Last Report					\$ 242,721.12						
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 20,500.00						
C. Total Funds Available (Sum Of Lines A and B)					\$ 263,221.12						
D. Total Expenditures (From Schedule III)					\$ 32,722.71						
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 230,498.41						
F. Value Of In-Kind Contributions Received (From Schedule II)					\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)					\$ 0.00						

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF DEVLIN ROBINSON	From: <u>5/2/2023</u> To: <u>6/5/2023</u>

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)	\$ 250.00
TOTAL for the Reporting Period (2)	\$ 250.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 1,250.00
All Other Contributions (Part D)	\$ 19,000.00
TOTAL for the Reporting Period (3)	\$ 20,250.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 20,500.00
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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	Reporting Period
	From: To:
<div style="display: flex; justify-content: space-between;"> DATE AMOUNT </div>	

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
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 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
FRIENDS OF DEVLIN ROBINSON	From: <u>5/2/2023</u> To: <u>6/5/2023</u>

				DATE			AMOUNT		
Full Name of Contributor					MO	DAY	YEAR	\$	250.00
JUDSON KROH									
Mailing Address									
80 WATERFRONT DRIVE									
City			State	Zip Code (Plus 4)	6	1	2023		
PITTSBURGH			PA	15222					

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

PAGE TOTAL
\$ 250.00

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 FRIENDS OF DEVLIN ROBINSON	Reporting Period From: <u>5/2/2023</u> To: <u>6/5/2023</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee PA ARCHITECTS PAC				MO	DAY	YEAR	\$ 500.00
Mailing Address 240 NORTH THIRD STREET 12TH FLOOR				5	17	2023	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101					
Full Name of Contributing Committee PGCC PAC				MO	DAY	YEAR	\$ 750.00
Mailing Address 507 CHERRY GROVE ROAD				6	1	2023	
City CLARENDON	State PA	Zip Code (Plus 4) 16313					

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 1,250.00

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 FRIENDS OF DEVLIN ROBINSON	Reporting Period From: <u>5/2/2023</u> To: <u>6/5/2023</u>
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
ERNEST BENCHEK, III							
Mailing Address 110 MT. BLAINE DRIVE				5	15	2023	\$ 1,000.00
City CANONSBURG	State PA	Zip Code (Plus 4) 15317					
Employer Name BOORD BENCHEK & ASSOCIATES, INC.				Occupation CEO			
Employer Mailing Address/Principal Place of Business 333 TECHNOLOGY DRIVE STE. 109			City CANONSBURG		State PA	Zip Code (Plus 4) 15317	
FRED CARDILLO							
Mailing Address 3128 ROBINSON RUN ROAD				6	1	2023	\$ 1,250.00
City MCDONALD	State PA	Zip Code (Plus 4) 15057					
Employer Name SENEX EXPLOSIVES				Occupation DISPATCHER			
Employer Mailing Address/Principal Place of Business 710 MILLERS RUN RD			City CUDDY		State PA	Zip Code (Plus 4) 15031	
ROBERT CRANMER							
Mailing Address 3406 BROWNSVILLE ROAD				6	1	2023	\$ 1,000.00
City PITTSBURGH	State PA	Zip Code (Plus 4) 15227					
Employer Name CRANMER CONSULTANTS				Occupation CONSULTANT			
Employer Mailing Address/Principal Place of Business 3406 BROWNSVILLE ROAD			City PITTSBURGH		State PA	Zip Code (Plus 4) 15227	

Full Name of Contributor DAVID HEATON				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 200 EMERALD FIELDS DRIVE				6	1	2023	
City MARS	State PA	Zip Code (Plus 4) 16046					
Employer Name BUNCHER COMPANY				Occupation PRESIDENT			
Employer Mailing Address/Principal Place of Business 1300 PENN AVE., #300			City PITTSBURGH		State PA	Zip Code (Plus 4) 15222	

Full Name of Contributor TERRENCE HENDERSON				MO	DAY	YEAR	\$ 2,500.00
Mailing Address 1596 CORRAL CIR.				6	1	2023	
City BETHEL PARK	State PA	Zip Code (Plus 4) 15102					
Employer Name ALLEGHENY HEALTH NETWORK				Occupation IT DIRECTOR			
Employer Mailing Address/Principal Place of Business 501 PENN AVE			City PITTSBURGH		State PA	Zip Code (Plus 4) 15222	

Full Name of Contributor JOHN KOSKY				MO	DAY	YEAR	\$ 1,250.00
Mailing Address PO BOX 42				6	1	2023	
City CUDDY	State PA	Zip Code (Plus 4) 15031					
Employer Name CONSTRUCTION				Occupation SELF EMPLOYED			
Employer Mailing Address/Principal Place of Business PO BOX 42			City CUDDY		State PA	Zip Code (Plus 4) 15031	

Full Name of Contributor MARIO MERKLE				MO	DAY	YEAR	\$ 2,500.00
Mailing Address 428 FOX RIDGE DRIVE				6	1	2023	
City CANNONBURG	State PA	Zip Code (Plus 4) 15317					
Employer Name INFORMATION REQUESTED				Occupation INFORMATION REQUESTED			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	

Full Name of Contributor JAMES SMITH				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 2108 BLAIRMONT DRIVE				6	1	2023	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15241					
Employer Name GENERAL NUTRITION CENTERS				Occupation SALESMAN			
Employer Mailing Address/Principal Place of Business 300 SIXTH AVE			City PITTSBURGH		State PA	Zip Code (Plus 4) 15222	

Full Name of Contributor DENNIS TROY				MO	DAY	YEAR	\$ 2,500.00
Mailing Address 3822 BROWNSVILLE ROAD				6	1	2023	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15227					
Employer Name DTI DEVELOPMENT				Occupation OWNER			
Employer Mailing Address/Principal Place of Business 225 ROSS ST			City PITTSBURGH		State PA	Zip Code (Plus 4) 15219	

Full Name of Contributor RICHARD WALTON				MO	DAY	YEAR	\$ 5,000.00
Mailing Address 1677 NORTHGATE DR				6	1	2023	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15241					
Employer Name NOBLE ENVIROMENTAL INC				Occupation PRESIDENT			
Employer Mailing Address/Principal Place of Business 500 TECHNOLOGY DR			City CANONSBURG		State PA	Zip Code (Plus 4) 15317	

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 19,000.00

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
	<div style="display: flex; justify-content: space-between;"> From: To: </div>

				DATE	AMOUNT	
Full Name			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Receipt Description						

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 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	
FRIENDS OF DEVLIN ROBINSON		From: <u>5/2/2023</u> To: <u>6/5/2023</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period		(1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period		(2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period		(3)	\$ 0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)			\$ 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:
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						PAGE TOTAL \$ 0.00

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

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF DEVLIN ROBINSON	From <u>5/2/2023</u> To: <u>6/5/2023</u>

DATE				AMOUNT		
To Whom Paid UNITED STEEL WORKERS			MO	DAY	YEAR	\$ 200.00
Mailing Address 60 BOULEVARD OF THE ALLIES			5	2	2023	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15222	Description of Expenditure ADVERTISING			
To Whom Paid BETHEL PARK FOOTBALL BOOSTERS			MO	DAY	YEAR	\$ 500.00
Mailing Address PO BOX 261			5	4	2023	
City BETHEL PARK	State PA	Zip Code (Plus 4) 15102	Description of Expenditure SPONSOR			
To Whom Paid BETHEL PARK VETERANS MEMORIAL			MO	DAY	YEAR	\$ 100.00
Mailing Address 5100 W. LIBRARY ROAD			5	4	2023	
City BETHEL PARK	State PA	Zip Code (Plus 4) 15102	Description of Expenditure FLAG SPONSOR			
To Whom Paid HOPE GRORWS			MO	DAY	YEAR	\$ 50.00
Mailing Address 183 SHAFER ROAD			5	4	2023	
City MOON TOWNSHIP	State PA	Zip Code (Plus 4) 15108	Description of Expenditure ADVERTISEMENT			
To Whom Paid MOON TOWNSHIP LIBRARY FRIENDS			MO	DAY	YEAR	\$ 525.00
Mailing Address 206 SHAFER ROAD			5	4	2023	
City MOON TOWNSHIP	State PA	Zip Code (Plus 4) 15108	Description of Expenditure SPONSOR			

To Whom Paid SHANNOPIN COUNTRY CLUB			MO	DAY	YEAR	\$ 515.00
Mailing Address BEN AVON HEIGHTS			5	4	2023	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15202	Description of Expenditure FUNDRAISER DEPOSIT			
To Whom Paid TOWN SQUARE PUBLICATIONS			MO	DAY	YEAR	\$ 795.00
Mailing Address PO BOX 6754			5	4	2023	
City CAROL STREAM	State IL	Zip Code (Plus 4) 60197	Description of Expenditure ADVERTISING			
To Whom Paid PA AIR NATIONAL GUARD 171 SOCIAL			MO	DAY	YEAR	\$ 80.00
Mailing Address 300 TANKER ROAD #4200			5	10	2023	
City CORAOPOLIS	State PA	Zip Code (Plus 4) 15108	Description of Expenditure DONATION			
To Whom Paid VERLAND OPEN			MO	DAY	YEAR	\$ 250.00
Mailing Address 212 IRIS ROAD			5	10	2023	
City SEWICKLEY	State PA	Zip Code (Plus 4) 15143	Description of Expenditure DONATION			
To Whom Paid BRIDGEVILLE BOROUGH			MO	DAY	YEAR	\$ 85.00
Mailing Address 425 BOWER ROAD			5	17	2023	
City BRIDGEVILLE	State PA	Zip Code (Plus 4) 15017	Description of Expenditure BOOTH RENTAL			
To Whom Paid FRIENDLY SONS OF ST. PATRICK			MO	DAY	YEAR	\$ 2,500.00
Mailing Address 230 STATE STREET			5	17	2023	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure SPONSOR			

To Whom Paid STRIPE PAYMENT PROCESSING			MO	DAY	YEAR	\$ 29.30
Mailing Address 510 TOWNSEND STREET			5	17	2023	
City SAN FRANCISCO	State CA	Zip Code (Plus 4) 94103	Description of Expenditure CREDIT CARD FEE			

To Whom Paid CLEBAK CONSULTING LLC			MO	DAY	YEAR	\$ 4,750.00
Mailing Address PO BOX 81			5	19	2023	
City HERSHEY	State PA	Zip Code (Plus 4) 17033	Description of Expenditure CONSULTING			

To Whom Paid BETHEL PARK SOCCER ASSOCIATION			MO	DAY	YEAR	\$ 500.00
Mailing Address 6180 IRISH TOWN ROAD			5	26	2023	
City BETHEL PARK	State PA	Zip Code (Plus 4) 15102	Description of Expenditure DONATION			

To Whom Paid CAREY SIRIANNI			MO	DAY	YEAR	\$ 7,950.00
Mailing Address PO BOX 186			5	31	2023	
City SEWICKLEY	State PA	Zip Code (Plus 4) 15143	Description of Expenditure CONSULTING			

To Whom Paid SHANNOPIN COUNTRY CLUB			MO	DAY	YEAR	\$ 13,893.41
Mailing Address BEN AVON HEIGHTS			5	31	2023	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15202	Description of Expenditure FUNDRAISER EXPENSE			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 32,722.71

