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	ITTEE	✓	LOBE	SYIST		
Name of Filing C	Committee, Candid	ate or L	obbyist:		DEN	ININ	, JILL	FRIENDS	S OF								
Street Address:	1210 MEGA L	ANE															
City:	GILBERTSVIL	LE						State:	PA			Zip Code: 19525					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA' PRIMARY	Y PRE	- 2	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT?		Yes	No	•	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4. X	2ND FRIDA' ELECTION	y pre	≣- !	5.	30 DA ELECT		POST-	6.		TERMINA REPORT?		Yes	No	•	/
report type)	ANNUAL REPORT	7.	Year 2023					IG METHO				PAPER		\checkmark	DISKE	TTE	
Name of Office S	Sought by Candida	te:	•					DATE O	F ELE	СТІО	N	District Number	Office Code	Par	ty Code	Count Code	ty
	,							МО	DAY	YE	AR	Ivanibei	code	DEM	1	46	
								11		7	2023		(SEE IN	STRUCTIO	ONS FOR C	ODES)	
	Receipts and	МО	DAY	YEAR	ł			МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
Expenditures	rom:		6 6	2	023	Т	0	9	:	18	2023						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$			7,1	61.32						
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule	: I)	\$			6,7	79.08						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			13,9	940.40						
D. Total Expenditures (From Schedule III)								5	75.00								
E. Ending Cash Balance (Subtract Line D From Line C)							\$			13,3	65.40						
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedu	le II	:)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$				0.00			1			
				AFF	IDA	١٧٢	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign l	here. :	If thi	is is	a Can	ididate re	port, c	candio	date sig	jn here.					
I swear (or affirm) correct and comple) that this report, inc ete.	uding the	attached scl	nedule	s filed	d on	paper (or by electi	ronic m	edium	, are to t	the best o	f my kno	wledge a	and belie	ef , tru	ie,
Sworn to and subs	cribed before me this day of	i	20							s	ignature	of Perso	n Submit	ting Rep	ort		-
	Signatu						- -					Prin	ted Name	e			-
My Commission Ex	-	ie						,				Ema	il				-
	мо	D	AY	YR			-		Are	ea Cod	e	Daytim	e Teleph	none Nui	mber		-
Part II- If this is	a report of a can	lidate's	authorized	Comn	nitte	e, C	andida	ate shall :	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of red.	ny knowle	edge and beli	ef this	polit	tical	commi	ittee has n	ot viola	ted an	y provis	ions of the	e act of J	une 3,19	937 (P.L.	1333	,
Sworn to and subsc	ribed before me this										s	ignature o	of Candid	ate			-
	day of						_					Drint-	d Name				-
	Signature						-					rinte	u Haille				_
My Commission Exp	_											Ema	il				⁻
	МО	D	AY	YR	1		•		Area	Code		Da	aytime T	elephon	e Numbe	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
DENNIN, JILL FRIENDS OF	From:	<u>6/6/202</u>	<u>3</u> To:	9/18/2023
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)	\$	6,779.08
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			\$	6,779.08

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize onl with an aggregate val	-			-			
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		1			DATE			AMOUNT
Full Name of Contribution	ng Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	•	•			•	•		PAGE TOTAL

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

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 Candida	ate			Rep	orting Pe	riod			
				Froi	n:		То	:	
					D	ATE		AN	MOUNT
Full Name of Contributor					МО	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus	i 4)					
Employer Name	•	•			Occupa	tion	•	•	
Employer Mailing Address/Principal Business	Place of		City			State		Zip Code	e (Plus 4)
Enter Grand Total of Part C on So	chedule I, Deta	iled Sumr	mary Page,	Section	on 3.			P	AGE 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 Candidate	Reporting Perio	od	
DENNIN, JILL FRIENDS OF	From:	6/6/2023 To:	9/18/2023

			D	ATE		AMOUNT
Full Name Sage Media Planning and Printing	3		МО	DAY	YEAR	
Mailing Address 1322 G Street		20	2023	\$ 6,779.08		
City Washington	State DC	Zip Code (Plus 4) 20003	6	20	2023	
Receipt Description Media Re	efund					

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

PAGE TOTAL6,779.08

\$

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		
DENNIN, JILL FRIENDS OF	From:	6/6/2023 To:	9/18/2023
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						\$	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									\$	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 Candidate	Reporting Per	riod		
DENNIN, JILL FRIENDS OF	From	6/6/2023	То:	9/18/2023

				DATE	AMOUNT		
To Whom Paid Paragon Solutions			МО	DAY	YEAR		7.1.00111
Mailing Address 2141 East Broadway Rd., Suite 202			6	6	2023	\$	25.00
City Tempe	State AZ	Zip Code (Plus 4) 85282	Description of Expenditure Merch. Feea				
To Whom Paid Paragon Solutions			МО	DAY	YEAR		
Mailing Address 2141 East Broadway Rd., Suite 202			7	3	2023	\$	25.00
City Tempe	State AZ	Zip Code (Plus 4) 85282	Description of Expenditure Merch. Fees				
To Whom Paid Paragon Solutions			МО	DAY	YEAR		
Mailing Address 2141 East Broadway Rd., Suite 202			8	2	2023	\$	25.00
City Tempe	State AZ	Zip Code (Plus 4) 85282	Description of Expenditure Merch. Fees				
To Whom Paid Paragon Solutions			МО	DAY	YEAR		
Mailing Address 2141 East Broadway Rd., Suite 202			9	5	2023	\$	25.00
City Tempe	State AZ	Zip Code (Plus 4) 85282	Description of Expenditure Merch. Fees				
To Whom Paid Friends of Dr. Janine Darby			МО	DAY	YEAR		
Mailing Address PO Box 104			7	26	2023	\$	100.00
City Fairview Village	State PA	Zip Code (Plus 4) 19409-0104	Description of Expenditure Campaign Contribution				

							PAGE 12
To Whom Paid BDWMC			мо	DAY	YEAR		
Mailing Address PO Box 1153			8	14	2023	\$	50.00
City Rosyln	State PA	Zip Code (Plus 4) 19001	Description of Expenditure Campaign Contribution				
To Whom Paid MAD4PPA			МО	DAY	YEAR		
Mailing Address PO Box 444			8	24	2023	\$	100.00
City Glenside	State PA	Zip Code (Plus 4) 19038	Description of Expenditure Campaign Contribution				
To Whom Paid Judge Lane For Superior Court				DAY	YEAR		
Mailing Address P.O. Box 28	875		9	5	2023	\$	75.00
City Bala Cynwyd	State PA	Zip Code (Plus 4) 19004-9998	Description of Expenditure Campaign Contribution				
To Whom Paid Elect Jill Beck	·	·	МО	DAY	YEAR		
Mailing Address PO Box 81583			9	6	2023	\$	50.00
City Pittsburgh	State PA	Zip Code (Plus 4) 15217-1606	Description of Expenditure Campaign Contribution				
To Whom Paid McCaffery For Supreme Court				DAY	YEAR		
Mailing Address 1518 Walnut St, Suite 702			9	12	2023	\$	100.00
City Philadelphia	State PA	Zip Code (Plus 4) 19102	Description of Expenditure Campaign Contribution				
Enter Grand Total of Expen	ditures on Page 1 Pe	port Cover Page Item D	_				PAGE TOTAL
Enter Grand Total of Expend	antai es on Fage 1, Re	port corer rage, item b	•			\$	575.00