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	0270				port ed B		CANDI	DATE		СОМ	1ITTEE	√	LOBE	BYIST	
Name of Filing C	Committee, Candid	ate or L	obbyist:	•	FRII	ENDS	S OF	DEVLIN I	ROBIN	SON						
Street Address:	PO BOX 81															
City:	HERSHEY							State:	PA			Zip Cod	le: 17	'033		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE	-	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT?		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	! -	5.	30 DA ELECT		POST-	OST- 6.			ATION	Yes	No	~
report type)	ANNUAL REPORT	7. X	Year 2023					IG METHO				PAPER		/	DISKE	ГТЕ
Name of Office S	- Sought by Candida	te:			-			DATE 0	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code
								МО	DAY	YE	AR		10000	REP	'	
								11		7	2023		(SEE IN	STRUCTIO	ONS FOR C	ODES)
	Receipts and	МО	DAY	YEAR	2			МО	DAY	YI	EAR	FO	R OFFI	CE USE	ONLY	
Expenditures	s from:		11 28	2	023	T	0	12	:	31	2023					
A. Amount Bro	ught Forward Froi	n Last R	eport				\$			479,0)55.14					
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule	e I)	\$			31,9	900.00					
C. Total Funds Available (Sum Of Lines A and B)							\$,	510,9	955.14					
D. Total Expenditures (From Schedule III)							\$			1,9	33.82					
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)			\$		Ĺ	509,0	21.32					
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sc	hedu	le II	I)	\$				0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)	١			\$				0.00			1		
				AFF	IDA	AVI	ΓSE	CTION								
PART I - If this is	s a Committee rep	ort, trea	surer sign h	ere. 1	If th	nis is	a Can	didate re	eport, o	candi	date sig	ın here.				
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	attached scho	edules	s file	ed on p	paper (or by elect	ronic m	edium	, are to t	he best o	f my knov	wledge a	and belie	f , true
Sworn to and subs	cribed before me this day of	5	20							S	Signature	of Perso	n Submit	ting Rep	ort	
	Signatu	re					-					Prin	ted Name	.		
My Commission Ex	cpires						_					Emai	il			
	МО	D	AY	YR					Arc	ea Cod	le	Daytim	e Teleph	one Nu	mber	
Part II- If this is	a report of a can	didate's	authorized (Comn	nitte	ee, Ca	andida	ate shall	sign he	ere.						
I swear (or affirm) No 320) as amende	that to the best of red.	ny knowl	edge and belie	f this	poli	itical	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 Candida	ate		
	day of						-					Printe	d Name			
	Signature						-									
My Commission Exp	ires											Emai	II			
	МО	D	AY	YR			•		Area	Code		Da	ytime T	elephon	e Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF DEVLIN ROBINSON	From:	11/28/20	23 To:	12/31/2023
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	50.00
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)	\$	100.00		
TOTAL for the Reporting) Period	(2)	\$	100.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	31,750.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	31,750.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	31,900.00

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 Candida	te		Reporting Period						
			From:		То	:			
				DATE			AMOUNT		
Full Name of Contributing Committee	Full Name of Contributing Committee				YEAR				
Mailing Address						\$	0.00		
City	State	Zip Code (Plus 4)							

PAGE TOTAL
0.00

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

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>11/28/2023</u> **To:**

DATE

12/31/2023

AMOUNT

	Full Name of Contributor DONALD MORRIS					YEAR	
Mailing Address 393 MAPLEWOOD DRIVE						\$ 100.00	
City	PITTSBURGH	State	Zip Code (Plus 4)	12	31	2023	
		PA	15243				

PAGE TOTAL

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

100.00 \$

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	ame of Filing Committee or Candidate Re			Period			
FRIENDS OF DEVLIN ROBINSON			From:	11/2	<u>18/2023</u>	То:	12/31/2023
				DA	TE		AMOUNT
Full Name of Contributing Committee BERKSHIRE HATHAWAY ENERGY PAC				МО	DAY	YEAR	\$ 500.00
Mailing Address 666 GRAND AVE. PC	BOX 657			12	7	2023	
City DES MOINES	State IA	Zip Code 50306	e (Plus 4)				
Full Name of Contributing Committee COMMONWEALTH CHILDRENS CHOICE	FUND			мо	DAY	YEAR	\$ 10,000.00
Mailing Address 420 N 3RD STREET		•		12	18	2023	
City HARRISBURG	State	· ·	e (Plus 4)				
	PA	17101					
Full Name of Contributing Committee ESSENTIAL UTILITIES INC. PAC					DAY	YEAR	\$ 1,000.00
Mailing Address 762 WEST LANCASTE	R AVE.			12	7	2023	·
City BRYN MAWR	State PA	Zip Code 19010	e (Plus 4)				
Full Name of Contributing Committee FRIENDS OF GREG ROTHMAN				МО	DAY	YEAR	\$ 10,000.00
Mailing Address PO BOX 1471				12	13	2023	10,000.00
City CAMP HILL	State	Zip Code	e (Plus 4)	12	13	2023	
	PA	17001					
Full Name of Contributing Committee HAPAC-STATE				мо	DAY	YEAR	\$ 500.00
Mailing Address 30 NORTH 3RD STRE	ET SUITE 600			12	7	2023	
City HARRISBURG	State PA	Zip Code 17101	e (Plus 4)				
Full Name of Contributing Committee HIGHMARK PAC				мо	DAY	YEAR	\$ 500.00
Mailing Address 1800 CENTER ST				12	7	2023	500.00
City CAMP HILL	State PA	Zip Code 17089	e (Plus 4)	12	, ´	2023	

							17102 0
Full Name of Cont	ributing Committee			мо	DAY	YEAR	\$ 500.00
Mailing Address	1901 MARKET ST			12	7	2023	300.00
City PHILADELI	PHIA	State	Zip Code (Plus 4)	12	′	2023	
		PA	19103				
Full Name of Cont	ributing Committee		-	мо	DAY	YEAR	
INSULATORS INT	ERNATIONAL PAC			МО	DAT	TEAR	\$ 2,500.00
Mailing Address	9602 M L KING HWY			12	7	2023]
City LANHAM		State	Zip Code (Plus 4)]		2023	
		MD	20706				
Full Name of Cont	ributing Committee	-		мо	DAY	YEAR	
Mailing Address	7234 HANOVER DR						\$ 1,000.00
City HANOVER		State	Zip Code (Plus 4)	12	29	2023	
11/11/07/21		MD	21076				
- "							<u> </u>
JOHNSON & amp;	ributing Committee JOHNSON PAC			МО	DAY	YEAR	\$ 500.00
Mailing Address	1350 I STREET, NW	SUITE 1210		12	29	2023	
City WASHING	TON	State	Zip Code (Plus 4)				
		DC	20005				
	ributing Committee			мо	DAY	YEAR	
OPERATORS FOR Mailing Address	PO BOX 343						\$ 1,250.00
City HARRISBU		State	Zip Code (Plus 4)	12	13	2023	
TIARRISDO	ong .	PA	17108				
			17.100	l			<u> </u>
PHARMPAC	ributing Committee			мо	DAY	YEAR	\$ 500.00
Mailing Address	508 N 3RD STREET			12	7	2023	300.00
City HARRISBU	IRG	State	Zip Code (Plus 4)	12	′	2023	
		PA	17101				
Full Name of Cont	ributing Committee			МО	DAY	VEAD	
STEAMFITTERS L	OCAL 420 PAC			МО	DAY	YEAR	\$ 1,000.00
Mailing Address	14420 TOWNSEND R	OAD SUITE A		12	13	2023]
City PHILADELI	PHIA	State	Zip Code (Plus 4)]		2023	
		PA	19154				
Full Name of Contributing Committee			мо	DAY	YEAR		
UNITED STEEL WORKERS PAC					-2.	LAIN	\$ 1,000.00
Mailing Address	60 BLVD OF THE ALL	IES	<u> </u>	12	7	2023	
City PITTSBUR	GH	State	Zip Code (Plus 4)				
		PA	15222				<u> </u>

Full Name of Contributing Committee	мо	DAY	YEAR			
ZENECA INC. PAC					12711	\$ 1,000.00
Mailing Address 1800 CONCORD PIKE PO BOX 15437			12	13	2023	_,
City WILMINGTON State Zip Code		Zip Code (Plus 4)			2023	
	DE	19850				

PAGE TOTAL\$ 31,750.00

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

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	te			Rep	orting Pe	eriod				
				Fror	From:			То:		
					D	ATE		А	MOUNT	
Full Name of Contributor					МО	DAY	YEAR	\$	0.00	
Mailing Address								7		
City	State	State Zip Code (Plus 4)								
Employer Name					Occupation					
Employer Mailing Address/Principal F	lace of Business		City		•	State		Zip Cod	de (Plus 4)	
Enter Grand Total of Part C on Sc	nedule I, Detaile	ed Sumn	nary 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 Candidate		Report	ing Peri	od			
			From:			То:		
		'			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	lus 4)					
Receipt Description	'	.					<u> </u>	
				_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	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 Per	iod	
FRIENDS OF DEVLIN ROBINSON	From:	11/28/2023 To:	<u>12/31/2023</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTO	R	
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 Candidate			Reporting 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 Sche Section 2.	dule II, In-Kind (Contributions Detai	iled 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				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUNT	-
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address									\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi _l	p Code(Plus 4)	Descr	iptio	on of Contribut	ion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE TO	TAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reportin	Reporting Period			
FRIENDS OF DEVLIN ROBINSON		11/28	<u>3/2023</u>	То:	12/31/2023
		DATE AMO			AMOUNT
To Whom Boid					
To Whom Paid	МО	DAY	YEAR		

To Whom Paid				DAY	YEAR				
HOLLY ARMS					12/11				
Mailing Address 4930 BRIGHTWOOD ROAD APT B207			12	1	2023	\$	37.48		
City BETHEL PARK State Zip Code (Plus 4)				Description of Expenditure					
	PA	15102	REIMBU	IRSEMENT					
To Whom Paid HOLLY ARMS				DAY	YEAR				
Mailing Address 4930 BRIGHTWOOD ROAD APT B207			12	15	2023	\$	50.00		
City BETHEL PARK State Zip Code (Plus 4)				Description of Expenditure					
	PA	15102 BASKET DONATION							
To Whom Paid				DAY	YEAR				
COLD SPARK MEDIA									
Mailing Address 307 FOURTH AVENUE 14TH FLOOR			12	19	2023	\$	1,843.14		
City PITTSBURGH	State	Zip Code (Plus 4)	Description of Expenditure						
	PA	15222	CHRISTMAS CARDS						
To Whom Paid STRIPE PAYMENT PROCESSING			мо	DAY	YEAR				
Mailing Address 510 TOWNSEND STREET			12	31	2023	\$	3.20		
City SAN FRANCISCO	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	CA	94103	CREDIT	CARD FEE					
							DAGE TOTAL		

	CA	94103	CREDIT CARD FEE		
	PAGE TOTAL				
Enter Grand Total of Expenditures o	on Page 1, Report C	over Page, Item D.		\$	1,933.82