Campaign Finance Report

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

Filer Identificat	ion 2014	0351			Repo Filed		CAN	IDII	DATE	CO	MMITTEE	✓	LOB	BYIST	—	
	Committee, Candid	ate or L	obbyist:			-	DAVE	WH	IITE							
Street Address:	300 WEST ST	ATE STI	REET,SUITI	E 206												
City:	MEDIA						State: PA Zip Code:					de: 19	19063			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 D PRIN	DAY 1ARY	Ρ	OST- 3	3.	AMENDI REPORT		Yes	No	D I	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	≣- 5.	30 D ELEC	DAY CTION	POST- 6.			TERMIN REPORT		Yes	No	D	\checkmark
report type)	ANNUAL REPORT	7. X	Year 2023				ING MET				PAPER		\checkmark	DISK	TTE	
Name of Office S	L Sought by Candida	te:					DATE	0	F ELEC	TION	District Number		Par	ty Code	Coun	
	- <i>i</i>						мо		DAY	YEAR	Tumber				Teore	
								11	7	7 202	3	(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR	2		мо		DAY	YEAR	F	OR OFFIC	E USE	ONLY		
Expenditures	s from:		11 28	2	023	то		12	31	1 202	:3					
A. Amount Bro	ught Forward Fror	n Last R	eport			9	\$			3,686.5	5					
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sche	dule I)		\$			0.0	0					
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			0.0	0					
D. Total Expen	ditures (From Sch	edule II	I)				\$			0.0	0					
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)			\$			3,686.5	5					
F. Value Of In-	Kind Contributions	s Receiv	ed (From S	chedu	le II)		\$			0.0	0					
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	/)			\$		4,92	20,000.0	0					
				AFF	IDAV	IT S	ECTIO	N								
PART I - If this i	s a Committee rep	ort, trea	surer sign	here.	If this	is a Ca	ndidate	e re	port, ca	ndidate	sign here.					
I swear (or affirm correct and compl) that this report, incl ete.	uding the	e attached sc	hedule	s filed o	n pape	r or by el	ectr	onic med	lium, are t	o the best o	of my knov	vledge	and bel	ief , tru	Je'
Sworn to and subs	scribed before me this day of	5	20							Signat	ire of Perso	on Submitt	ing Rej	oort		-
		re				_					Prii	nted Name				-
My Commission E	-							-			Ema	ail				-
	мо	D	AY	YR					Area	Code	Daytir	ne Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized	Comm	nittee,	Candi	date sh	all s	sign her	e.						
I swear (or affirm) No 320) as amend) that to the best of n ed.	ny knowle	edge and beli	ief this	politica	l com	nittee ha	as no	ot violate	d any prov	visions of th	ie act of Ju	ine 3,1	937 (P.I	L. 1333	3,
Sworn to and subso	ribed before me this day of		20								Signature	of Candida	ite			-
						_					Print	ed Name				-
	Signature					_		-			Ema	sil				_
My Commission Exp	bires										EW	aii				
	мо	D	AY	YR	1	_			Area Co	ode	C	aytime Te	elephor	e Numb	ber	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** FRIENDS OF DAVE WHITE From: <u>11/28/2023</u> To: <u>12/31/2023</u> 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) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 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 \$ 0.00 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	porting	Period			
Fr				om:		То	:	
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City State Zip Code (Plus 4)			4)					
							Γ	PAGE TOTAL

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

0.00

\$

PAGE 3

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 Candidat	e		-	orting P	eriod			
			Fro	m:		Тс):	
					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 S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	2.		\$	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	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Commit	ttee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C on	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	0.00

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	Reporting Period	
	From:	То:

			D	ATE		АМС	DUNT
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
Employer Name			Occupat	tion			
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip Code ((Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detailed S	ummary Page, Sectio	on 3.		\$		бе тота L 0.00

I

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			Report	ing Perio	d				
Fro			From:	From: To:					
				D	ATE			AMOUNT	1
Full Name				мо	DAY	YEAR			
Mailing Address	Mailing Address						\$	5	0.00
City	State	Zip Code (Plus 4)						
Receipt Description						•	•		
Enter Grand Total of Part E on Schedu	ule T. Detailed Summ	nary Page	Section	4				PAGE TO	TAL
		illi y i 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 Perio	d	
FRIENDS OF DAVE WHITE	From:	<u>11/28/2023</u> то:	<u>12/31/2023</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	ſF)		
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 R			Reporting Period					
F						То:		
				DATE		АМО	UNT	
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 Schedule II, In-Kind Contributions Detail Section 2.			iled Sum	mary Pag	je,	PAGE	TOTAL	
					4	6	0.00	

0.00

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

Name of Filing Committee or Candidate					Rep	oorting P	Period			
						From: To:				
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address								\$	0.00	
City	State		Zip Code(P	Plus 4)						
Employer of Contributor						Occupat	tion			
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip 4)	Code(Plus	Descri	otion o	of Contribution
Enter Grand Total of Part G on Sch	edule II, 1	In-Kind	Contributio	ons De	taile	d				PAGE TOTAL

Summary Page, Section 3.	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate						
	From			То:			
		AMOUNT					
To Whom Paid				DAY	YEAR		
Mailing Address						\$	0.00
City State Zip Code (Plus 4)				tion of Ex	penditure		
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D							PAGE TOTAL
	on rage 1, Report C	over rage, Item L				\$	0.00

SCHEDULE IV STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate				Reportir	Reporting Period				
FRIENDS OF DAVE WHITE				From:	<u>11</u>	<u>11/28/2023</u> To: <u>12/31/2023</u>			<u>12/31/2023</u>
						DATE			Outstanding Balance of Debt
Name of Creditor					мо	DAY	YEAR		
DAVID J & DEBRA ANN WHITE (LOAN)					110				
Mailing Address 2747 SPRINGHILL ROAD					9	16	2021		\$ 1,920,000.00
City SECANE		State	Zip Code (Plu	us 4)	Descrip	tion of Del	ot		
		РА	19018	LOAN TO COMMITTEE					
			•		•	DATE			Outstanding Balance of Debt
Name of Creditor DAVID J & DEBRA ANN WHITE (LOAN)					мо	DAY	YEAR		
Mailing Address	2747 SPRINGHILL	ROAD			12	31	2021		\$ 1,000,000.00
City SECANE		State	Zip Code (Plu	us 4)	Description of Debt				
		РА	LOAN TO COMMITTEE						
						DATE			Outstanding Balance of Debt
Name of Creditor DAVID J & D	EBRA ANN WHITE (LC	DAN)			мо	DATE	YEAR		
	EBRA ANN WHITE (LC 2747 SPRINGHILL	-			мо 3		YEAR 2022	2	
DAVID J & D	-	-	Zip Code (Plu	us 4)	3	DAY	2022	2	Balance of Debt
DAVID J & D Mailing Address	-	ROAD	Zip Code (Pl 19018	us 4)	3 Descrip	DAY 7	2022 ot	-	Balance of Debt
DAVID J & D Mailing Address	-	ROAD		us 4)	3 Descrip	DAY 7 ption of Del	2022 ot		Balance of Debt
DAVID J & D Mailing Address City SECANE	-	ROAD State PA		us 4)	3 Descrip	DAY 7 otion of Del	2022 ot	2	Balance of Debt 1,000,000.00 Outstanding
DAVID J & D Mailing Address City SECANE	2747 SPRINGHILL	ROAD State PA DAN)		us 4)	3 Descrip LOAN T	DAY 7 Dition of Del O COMMIT DATE	2022 ot TEE		Balance of Debt 1,000,000.00 Outstanding
DAVID J & D Mailing Address City SECANE Name of Creditor DAVID J & D	2747 SPRINGHILL EBRA ANN WHITE (LC	ROAD State PA DAN)			3 Descrip LOAN T MO 4 Descrip	DAY 7 Dtion of Del O COMMIT DATE DAY	2022 ot TEE YEAR 2022 ot		Balance of Debt 1,000,000.00 Outstanding Balance of Debt
DAVID J & D Mailing Address City SECANE Name of Creditor DAVID J & D Mailing Address	2747 SPRINGHILL EBRA ANN WHITE (LC	ROAD State PA DAN) ROAD State	19018 Zip Code (Plu		3 Descrip LOAN T MO 4 Descrip	DAY 7 otion of Del O COMMIT DATE DAY 4 stion of Del	2022 ot TEE YEAR 2022 ot		Balance of Debt 1,000,000.00 Outstanding Balance of Debt