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 20	01601	.13				port ed B		CA	NDII	NDIDATE COMMITTEE \(\square\) LOBBYIST							Г	
Name of Filing C	Committee, Can	didate	e or Lo	bbyist:		Frie	ends	of Bri	ian Ki	rklaı	nd								
Street Address:																			
City:	Chester								State	e:	PA			Zip Cod	e: 19	016			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	1	2ND FRIDA PRIMARY	AY PRE	-	2.	30 DA		Р	OST-	3.		AMENDM REPORT?		Yes] [No	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.		2ND FRIDA	AY PRE	Ē-	5.	30 DA		Р	OST-	6.		TERMINA REPORT?		Yes	1 1	No	\
report type)										PAPER / DISKET				KETTE					
Name of Office S	Sought by Cand	idate:							DAT	ΕO	F ELE	СТІО	N	District Number	Office Code	Pa	rty Co	de Cou Cod	
									МО		DAY	YE	AR	Number	code			TCOU	
										11		5	2024		(SEE IN	STRUCT	ONS F	R CODE	5)
Summary of		ı l	мо	DAY	YEAR	2			МО		DAY	YE	AR	FO	R OFFIC	CE USE	ONL	Y	
Expenditures	from:		1	1 26	5 2	024	T	0		12	:	31	2024						
A. Amount Bro	ught Forward F	From L	.ast Re	eport				\$				2	282.74						
B. Total Monet	ary Contributio	ns And	d Rece	eipts (Fron	n Sche	dule	e I)	\$					0.00						
C. Total Funds	Available (Sum	1 Of Li	nes A	and B)				\$				2	282.74						
D. Total Expend	ditures (From S	Schedu	ule III	()				\$				2	82.74						
E. Ending Cash	Balance (Subt	ract Li	ine D F	From Line	C)			\$					0.00						
F. Value Of In-	Kind Contributi	ions R	eceive	ed (From S	chedu	le I	I)	\$					0.00						
G. Unpaid Debt	s And Obligation	ons (F	rom S	chedule I	/)			\$					0.00						
					AFF	ID	AVI	ΓSE	CTI	NC									
PART I - If this is	s a Committee	report	, treas	surer sign	here.	If th	nis is	a Car	ndida	te re	port, o	andi	late sig	ın here.					
I swear (or affirm) correct and comple		includi	ing the	attached so	hedule	s file	ed on	paper	or by	electr	onic m	edium	, are to t	he best of	my knov	wledge	and b	elief , t	rue
Sworn to and subs	cribed before me day of	this		20								s	ignature	of Person	Submitt	ing Re	port		
	Sign	nature						-						Print	ed Name)			-
My Commission Ex	_									-				Emai	l				_
	мо		DA	Y	YR			_		•	Are	ea Cod	e	Daytime	e Teleph	one Nu	ımber		
Part II- If this is	a report of a c	candid	ate's a	authorized	Comn	nitte	ee, C	andid	ate s	hall s	sign he	ere.							
I swear (or affirm) No 320) as amende		of my l	knowle	dge and bel	ief this	poli	itical	comm	ittee l	as no	ot viola	ted an	y provisi	ions of the	act of J	une 3,1	937 (P.L. 133	33,
Sworn to and subsc		this											Si	ignature o	f Candida	ate			-
	day of —— ———							-						Drinte	d Name				_
	Signatı	ure						-						Finte	a ivalile				
My Commission Exp	_									•				Emai	I				$^{-} $
	мо		DA	Υ	YR	t		•			Area	Code		Da	ytime T	elepho	ne Nu	nber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
Friends of Brian Kirkland	From:	11/26/202	<u>4</u> To:	12/31/2024
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 an 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

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	e	R	eporting	Period			
		F	rom:		То	:	
		•		DATE			AMOUNT
Full Name of Contributing Committee			МО	DAY	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.

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 Repo					eporting Period					
Fron					From: T					
					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 Candidate			Reporting	Period					
			From:			То:			
				DA	TE		А	MOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR	\$		0.00
Mailing Address							7		0.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TO	TAL
Enter Grand Total of Part C on Scheo	lule I, Detailed Sun	nmary 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	:	
				D	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							1	
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupa	tion			
Employer Mailing Address/Principal Pla	ce of Business	City		•	State		Zip C	ode (Plus 4)
Enter Grand Total of Part C on Scho	dule I, Detailed S	Summary Page,	, Sectio	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:			To:		
				E	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Pl	us 4)					
Receipt Description	'							
Futor Count Total of Dout	Fan Cahadula I Datailad	I Commence Dance C	` !	4			ı	PAGE TOTAL
Enter Grand Total of Part	e on Schedule 1, Detailed	i Summary Page, S	ection	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 Brian Kirkland	From:	<u>11/26/2024</u> To:	<u>12/31/2024</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 Car	ndidate		Reporting Period					
			From:			То:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$	C	0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•		•	•		•		
					-			
Enter Grand Total of Part F o	n Schedule II, In-Ki	nd Contributions Detai	led Sum	mary Pa	ge,		PAGE TOTAL	
Section 2.						\$	0	.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Rep	orting	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	ation				
Employer Mailing Address/Principal Plac	e of Business	City	′	State	e Zip	Code(Plus 4)	Descr	ript	ion of Contribution	on
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	ontributions De	etaile	ed				PAGE TOT	ΓAL
Summary Page, Section 3.										0.00

282.74

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or	Name of Filing Committee or Candidate					Reporting Period					
Friends of Brian Kirkland	From	11/26	То:	12/31/2024							
	DATE AMOUI										
To Whom Paid			МО	DAY	YEAR						
WSFS Bank			140								
Mailing Address			12	1	2024	\$	282.74				
City Wilmington	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure						
	maint	enance fee	es for 20	24							
Enter Grand Total of Expe	nditures on Page 1. Re	nort Cover Page. Item [) .				PAGE TOTAL				