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 2018	80045			Repo Filed		CAI	NDI	DATE		СОМІ	AITTEE	Y	LUBE	1131	
Name of Filing C	Committee, Candid	ate or L	obbyist:		FRIEN	DS OF	JIM G	REC	GORY							
Street Address:																
City:	TYRONE						State	e:	PA			Zip Co	de: 16	686		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2.	30 DA		F	POST-	3. X		AMENDN REPORT		Yes	No	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 DA		F	POST-	6.		TERMINA REPORT		Yes	No	✓
report type)	ANNUAL REPORT	7.	Year 2018				NG ME					PAPER		$ \checkmark $	DISKE	ΓΤΕ
Name of Office S	Sought by Candida	te:	•				DAT	ЕΟ	F ELE	СТІС	N	District Number	Office Code	Part	y Code	County Code
							МО		DAY	YI	AR		•	REP		
								11		6	2018		(SEE IN	STRUCTIO	NS FOR C	ODES)
	Receipts and	МО	DAY	YEAR			МО		DAY	YI	EAR	FC	R OFFI	CE USE	ONLY	
Expenditures	s from:		5 1	. 20	018	ТО		6		4	2018					
A. Amount Bro	ught Forward Froi	n Last R	eport			\$				5,2	200.84					
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sche	dule I)	\$				9,5	550.00					
C. Total Funds	Available (Sum O	f Lines A	and B)			\$				14,	750.84					
D. Total Expen	ditures (From Sch	edule II	I)			\$				11,7	772.33					
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)		\$				2,9	78.51					
F. Value Of In-	Kind Contributions	s Receiv	ed (From S	chedul	le II)	\$					0.00					
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV	/)		\$					0.00			•		
				AFF	IDAV	IT SE	CTIC	NC								
	s a Committee rep	-	_								_					
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	e attached sc	hedules	filed o	n paper	or by e	elect	ronic m	edium	, are to	he best o	f my knov	wledge a	and belie	ef , true
Sworn to and subs	cribed before me this	5	20							S	Signature	of Perso	n Submit	ting Rep	ort	
						_						Prin	ted Name	•		
My Commission Ex	Signatu opires	re										Ema	:1			
	мо	D	AY	YR		_			Arc	ea Cod	le		ne Teleph	one Nur	nber	
Part II- If this is	a report of a can	didate's	authorized	Comm	nittee,	Candid	ate sh	nall	sign he	ere.						
I swear (or affirm) No 320) as amende	that to the best of r	ny knowl	edge and beli	ief this	politica	l comm	ittee h	as n	ot viola	ted an	y provis	ions of th	e act of J	une 3,19	37 (P.L.	1333,
Sworn to and subso	ribed before me this										s	ignature	of Candida	ate		— I
	day of					_						Printe	ed Name			<u> </u>
	Signature					_										
My Commission Exp	ires											Ema	II			
	МО	D	AY	YR		_			Area	Code		D	aytime T	elephon	e Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF JIM GREGORY	From:	5/1/201	<u>8</u> To:	6/4/2018
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	J Period	(1)	\$	100.00
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)			\$	850.00
TOTAL for the Reporting	y Period	(2)	\$	850.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	2,000.00
All Other Contributions (Part D)			\$	6,600.00
TOTAL for the Reporting	y Period	(3)	\$	8,600.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	0.00
			1	
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			\$	9,550.00

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			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

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	lame of Filing Committee or Candidate					Reporting Period						
FRIENDS OF JIM GREGORY			From:	<u>5/1/</u>	2018 T o):	6/4/2018					
		ı		DATE		АМС	UNT					
Full Name of Contributor ANTHONY R BAMBECCI			МО	DAY	YEAR							
Mailing Address						\$	250.00					
City ALTOONA	State PA	Zip Code (Plus 4) 16602	5	11	2018							
Full Name of Contributor SC NEBGEN	<u> </u>	•	МО	DAY	YEAR							
Mailing Address City ALTOONA	State PA	Zip Code (Plus 4)	5	11	2018	\$	200.00					
Full Name of Contributor JOHN J GIANNELLI	мо	DAY	YEAR									
Mailing Address						\$	100.00					
City CAMP HILL	State PA	Zip Code (Plus 4) 17011	5	11	2018	•						
Full Name of Contributor M JAMES COLOMBO JR	·	·	МО	DAY	YEAR							
Mailing Address						\$	100.00					
City HOLLIDAYSBURG	State PA	Zip Code (Plus 4) 16648	5	8	2018							
Full Name of Contributor ERIC WOLF			МО	DAY	YEAR							
Mailing Address						\$	100.00					
City EBENSBURG	State PA	Zip Code (Plus 4) 15931	5	8	2018							
Full Name of Contributor JOHN WOLF			МО	DAY	YEAR							
Mailing Address						\$	100.00					
City ALTOONA	State PA	Zip Code (Plus 4) 16601	5	8	2018							
						PAG	E TOTAL					

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

850.00

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 Per	Period				
FRIENDS OF JIM GREGORY	From:	5/1/2018	То:	6/4/2018		

DATE AMOUNT

Full Name of Contributing Committee	МО	DAY	YEAR			
BETTER PENNSYLVANIA PAC					ILAK	\$ 2,000.00
Mailing Address	Mailing Address				2018	_,
City HARRISBURG	State	Zip Code (Plus 4)	5	14	2010	
	PA	17101				

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

PAGE TOTAL \$ 2,000.00

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	Name of Filing Committee or Candidate					Reporting Period						
FRIENDS OF JIM GREGORY				Fron	n:	5/1/2	<u>018</u> То	:	6/4/2018			
					DA	ATE		Al	MOUNT			
Full Name of Contributor					мо	DAY	YEAR					
R LEE HITE					МО	DAT	TEAR	\$	500.00			
Mailing Address					5	11	2018					
City ALTOONA	State	Zi	p Code (Plus	4)			2010					
	l _{PA}	1 16	5602									
Employer Name					Occupat							
Employer Mailing Address/Principal Place of Business City					State		Zip Cod	e (Plus 4)				
Full Name of Contributor					мо	DAY	YEAR					
STEVEN G SHEETZ				МО	DAT	TEAR	\$	1,000.00				
Mailing Address				5	11	2018	1					
City ALTOONA	State	Zi	p Code (Plus	4)			2010					
	l _{PA}	1 16	5602									
Employer Name					Occupat	ion						
Employer Mailing Address/Principal I	lace of Business		City		State			Zip Code (Plus 4)				
Full Name of Contributor			-		МО	DAY	YEAR	l .				
LINDA C DANIELS					МО	DAT	TEAR	\$	300.00			
Mailing Address					5	8	2018					
City TYRONE	State	Zi	p Code (Plus	4)		Ü						
	I _{PA}	1 16	5686									
Employer Name					Occupat	ion						
Employer Mailing Address/Principal I	lace of Business		City			State		Zip Cod	e (Plus 4)			
Full Name of Contributor					МО	DAY	YEAR		1 000 00			
BARRY F SMITH					140	DAT	ILAK	\$	1,000.00			
Mailing Address					5	8	2018					
City ROARING SPRING	State	Zi	p Code (Plus	4)		Ü	2010					
	PA 16673											
Employer Name				Occupat	ion							
Employer Mailing Address/Principal Place of Business City				<u> </u>				e (Plus 4)				

									17.OL /
Full N	ame of Contributor				мо	DAY	YEAR		
JOHN	B JOYCE				MO	DAT	TEAR	\$	2,000.00
Mailin	g Address				5	8	2018		
City	HOLLIDAYSBURG	State	Zi	p Code (Plus 4)		0	2010		
		l _{PA}	1 16	5648					
Emplo	oyer Name				Occupat	ion			
Emplo	oyer Mailing Address/Princi	oal Place of Business		City	•	State		Zip Code	(Plus 4)
Full N	ame of Contributor			•				T	
GREG	ORY S MORRIS				МО	DAY	YEAR	\$	1,000.00
	ng Address				_			7	
City	ALTOONA	State	Zi	p Code (Plus 4)	5	8	2018		
		l _{PA}	1	5602					
Emplo	oyer Name				Occupat	ion			
	oyer Mailing Address/Princi	oal Place of Business		City	State Zip Code (Plus			e (Plus 4)	
•				,					,
Full N	ame of Contributor			•				T	
P JOS	EPH LEHMAN JR				МО	DAY	YEAR	\$	500.00
Mailin	g Address					0	2010		
City	HOLLIDAYSBURG	State	Zi	p Code (Plus 4)	5	8	2018		
		l _{PA}	1	5648					
Emplo	oyer Name				Occupat	ion			
Emplo	oyer Mailing Address/Princip	oal Place of Business		City		State		Zip Code	e (Plus 4)
Full N	ame of Contributor							ī	
JAMES	S B LUCEY				МО	DAY	YEAR	\$	300.00
Mailin	g Address				5	4	2018		
City	HOLLIDAYSBURG	State	Zi	p Code (Plus 4)]]	4	2016		
		l _{PA}	1	5648					
Emplo	oyer Name				Occupat	ion			
Emplo	yer Mailing Address/Princi	oal Place of Business		City		State		Zip Code	e (Plus 4)
								PA	GE TOTAL
Enter	Grand Total of Part C or	Schedule I, Detailed	Sumr	nary Page, Secti	on 3.				
							'	\$	6,600.00
							L		

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:		
		•		C	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	us 4)					
Receipt Description	•	•			•	•	•	
Futor Curred Total of Bout	Fan Cabadula I. Datailad	Summer Base S	! !	4				PAGE TOTAL
Enter Grand Total of Part	E ON Schedule 1, Detalled	Summary Page, Se	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 Period	d	
FRIENDS OF JIM GREGORY	From:	<u>5/1/2018</u> To:	6/4/2018
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 Candi	date		Reporting Period					
			From:			To:		
		•		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 S	Schedule II, In-Ki	nd Contributions Detail	led Sum	mary Pag	je,		PAGE TOTA	AL
Section 2.						\$		0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidat	e			Re	porting	Period			
				Fro	om:		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 Pl	ace of Business	Ci	ty	Stat	e Ziţ	Code(Plus 4)	Descr	iptior	n of Contribution
Enter Grand Total of Part G on So	hedule II. In-K	ind	Contributions D	etaile	ed				PAGE TOTAL
Summary Page, Section 3.									0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period				
FRIENDS OF JIM GREGORY	From	5/1/2018	То:	<u>6/4/2018</u>	

			DATE	AMOUNT			
		МО	DAY	ΥFΔR			
		HO		. L.A.			
Mailing Address			17	2018	\$	389.02	
State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
PA	17101	PALM CARDS					
		MO	DAY	VEAD			
		140		ILAK			
Mailing Address			15	2018	\$	3,000.00	
State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
ОН	43215	ADS					
		МО	DAY	VEAD			
		MO		ILAK			
Mailing Address			15	2018	\$	6,042.55	
State	Zip Code (Plus 4)	Description of Expenditure					
PA	17101	MAILERS					
<u> </u>	•		DAY	VEAD			
LUB		МО	DAT	TEAR			
Mailing Address			17	2018	\$	100.00	
State	Zip Code (Plus 4)	Description of Expenditure					
PA	16601	DRIVE AD/DONATION					
		MO	DAY	VEAD			
		мо	DAY	YEAR			
		MO 5	DAY 4	YEAR 2018	\$	375.76	
State	Zip Code (Plus 4)	5		2018	\$	375.76	
State PA	Zip Code (Plus 4) 16662	5	4	2018	\$	375.76	
		5 Descript AD	4 tion of Exp	2018 enditure	\$	375.76	
		5 Descript	4	2018	\$	375.76	
		5 Descript AD	4 tion of Exp	2018 enditure	\$		
		5 Descript AD MO 5	4 tion of Exp	2018 enditure YEAR 2018		375.76 545.00	
	State OH State PA State PA LUB	State Zip Code (Plus 4) 43215	PA	State Zip Code (Plus 4) Description of Express Description Description of Express Description of Express Description Description Description Description Description Descrip	State Zip Code (Plus 4) Description of Expenditure	State Zip Code (Plus 4) Description of Expenditure PALM CARDS	

								FAGL 13	
To Wh	om Paid			мо	DAY	YEAR			
TYRONE CHAMBER OF COMMERCE									
Mailin	g Address			6	1	2018	\$	75.00	
City	TYRONE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
PA 16686				MEMBERSHIP					
To Wh	om Paid			мо	DAY	YEAR			
ALTOONA CHAMBER OF COMMERCE									
Mailing Address				6	1	2018	\$	75.00	
City	ALTOONA State Zip Code (Plus 4)			Descrip	Description of Expenditure				
		PA	16602	MEMBE	RSHIP				
To Whom Paid				мо	DAY	YEAR			
SINKI	NG VALLEY COUNTRY CLU	В							
Mailing Address			6	1	2018	\$	70.00		
City	ALTOONA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		PA	16601	GOLF T	OURNEY F	EE			
To Wh	om Paid			мо	DAY	YEAR			
DUNCANSVILLE COMMUNITY DAYS									
Mailing Address			6	1	2018	\$	250.00		
City	DUNCANSVILLE	State	Zip Code (Plus 4)	Description of Expenditure					
		PA	16635	AD					
To Whom Paid				мо	DAY	YEAR			
WISE	WOMEN OF BLAIR COUNT	Y							
Mailin	g Address			5	29	2018	\$	100.00	
City	HOLLIDAYSBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		PA	16648	AD					
To Wh	om Paid			мо	DAY	YEAR			
JOE C	ARPER								
Mailing Address			5	28	2018	\$	500.00		
City	DUNCANSVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA 16635 CASUAL LABOR								
To Wh	om Paid			мо	DAY	YEAR			
JULIE NELSON			140		IZAK				
Mailing Address			5	28	2018	\$	250.00		
City	ALTOONA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		PA	16602	CASUAL	LABOR				
			port Cover Page, Item D					PAGE TOTAL	