

Campaign Finance Report

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

Filer Identification Number : 20180045		Report Filed By :		CANDIDATE	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST				
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF JIM GREGORY										
Street Address: 227 JEFFERSON AVENUE										
City: TYRONE			State: PA		Zip Code: 16686					
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3. <input checked="" type="checkbox"/>	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	Year 2018	FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/>		DISKETTE		
Name of Office Sought by Candidate:				DATE OF ELECTION			District Number	Office Code	Party Code	County Code
				MO	DAY	YEAR	REP			
				11	6	2018	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY	
		5	1	2018	TO	6	4	2018		
A. Amount Brought Forward From Last Report				\$		5,200.84				
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		9,550.00				
C. Total Funds Available (Sum Of Lines A and B)				\$		14,750.84				
D. Total Expenditures (From Schedule III)				\$		11,772.33				
E. Ending Cash Balance (Subtract Line D From Line C)				\$		2,978.51				
F. Value Of In-Kind Contributions Received (From Schedule II)				\$		0.00				
G. Unpaid Debts And Obligations (From Schedule IV)				\$		0.00				

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this _____ day of _____ 20 _____

 Signature
 My Commission Expires _____
 MO DAY YR

 Signature of Person Submitting Report

 Printed Name

 Email

 Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3,1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this _____ day of _____ 20 _____

 Signature
 My Commission Expires _____
 MO DAY YR

 Signature of Candidate

 Printed Name

 Email

 Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

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

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting 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 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 Period (3)	\$ 8,600.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 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 Candidate	Reporting Period
	From: _____ To: _____
DATE AMOUNT	

Full Name of Contributing Committee	MO	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 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 JIM GREGORY	From: <u>5/1/2018</u> To: <u>6/4/2018</u>

				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
ANTHONY R BAMBECCI							
Mailing Address 604 BEAUMONT DR							\$ 250.00
City ALTOONA	State PA	Zip Code (Plus 4) 16602		5	11	2018	
Full Name of Contributor				MO	DAY	YEAR	
SC NEBGEN							
Mailing Address 156 IRISH EYES LANE							\$ 200.00
City ALTOONA	State PA	Zip Code (Plus 4) 16601		5	11	2018	
Full Name of Contributor				MO	DAY	YEAR	
JOHN J GIANNELLI							
Mailing Address 1099 COUNTRY CLUB ROAD							\$ 100.00
City CAMP HILL	State PA	Zip Code (Plus 4) 17011		5	11	2018	
Full Name of Contributor				MO	DAY	YEAR	
M JAMES COLOMBO JR							
Mailing Address 400 PEMBERLEY DRIVE							\$ 100.00
City HOLLIDAYSBURG	State PA	Zip Code (Plus 4) 16648		5	8	2018	
Full Name of Contributor				MO	DAY	YEAR	
ERIC WOLF							
Mailing Address 3446 NEW GERMANY ROAD							\$ 100.00
City EBENSBURG	State PA	Zip Code (Plus 4) 15931		5	8	2018	
Full Name of Contributor				MO	DAY	YEAR	
JOHN WOLF							
Mailing Address 1933 GRANDVIEW ROAD							\$ 100.00
City ALTOONA	State PA	Zip Code (Plus 4) 16601		5	8	2018	

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

PAGE TOTAL
\$ 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 FRIENDS OF JIM GREGORY	Reporting Period From: <u>5/1/2018</u> To: <u>6/4/2018</u>
--	--

				DATE	AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	
BETTER PENNSYLVANIA PAC						\$ 2,000.00
Mailing Address 121 STATE STREET			5	14	2018	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101				

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

PAGE TOTAL
\$ 2,000.00

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 FRIENDS OF JIM GREGORY	Reporting Period From: <u>5/1/2018</u> To: <u>6/4/2018</u>
--	--

				DATE			AMOUNT
Full Name of Contributor R LEE HITE				MO	DAY	YEAR	\$ 500.00
Mailing Address 501 BEAUMONT DR				5	11	2018	
City ALTOONA	State PA	Zip Code (Plus 4) 16602					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	
Full Name of Contributor STEVEN G SHEETZ				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 5700 SIXTH AVENUE				5	11	2018	
City ALTOONA	State PA	Zip Code (Plus 4) 16602					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	
Full Name of Contributor LINDA C DANIELS				MO	DAY	YEAR	\$ 300.00
Mailing Address 851 WASHINGTON AVE.				5	8	2018	
City TYRONE	State PA	Zip Code (Plus 4) 16686					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	
Full Name of Contributor BARRY F SMITH				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 153 SMITH TRANSPORT RD				5	8	2018	
City ROARING SPRING	State PA	Zip Code (Plus 4) 16673					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	

Full Name of Contributor JOHN B JOYCE			MO	DAY	YEAR	\$ 2,000.00
Mailing Address 198 STONEHEDGE RD			5	8	2018	
City HOLLIDAYSBURG	State PA	Zip Code (Plus 4) 16648				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

Full Name of Contributor GREGORY S MORRIS			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 210 E PLANK ROAD			5	8	2018	
City ALTOONA	State PA	Zip Code (Plus 4) 16602				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

Full Name of Contributor P JOSEPH LEHMAN JR			MO	DAY	YEAR	\$ 500.00
Mailing Address 315 QUINCE CT			5	8	2018	
City HOLLIDAYSBURG	State PA	Zip Code (Plus 4) 16648				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

Full Name of Contributor JAMES B LUCEY			MO	DAY	YEAR	\$ 300.00
Mailing Address 513 WOODLAND TERRACE			5	4	2018	
City HOLLIDAYSBURG	State PA	Zip Code (Plus 4) 16648				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 6,600.00

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	Reporting Period
	From: _____ To: _____

				DATE	AMOUNT
Full Name	MO	DAY	YEAR		
				\$	0.00
Mailing Address					
City	State	Zip Code (Plus 4)			
Receipt Description					

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

PAGE TOTAL
\$ 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 FRIENDS OF JIM GREGORY	Reporting Period From: <u>5/1/2018</u> To: <u>6/4/2018</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)	
TOTAL for the Reporting Period (2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)	
TOTAL for the Reporting Period (3)	\$ 0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)	\$ 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: _____ To: _____

	DATE			AMOUNT
Full Name of Contributor	MO	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 Detailed Summary Page, Section 2.	PAGE TOTAL \$ 0.00
--	------------------------------

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

Name of Filing Committee or Candidate	Reporting Period From: _____ To: _____
--	--

				DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR		
Mailing Address					\$ 0.00
City	State	Zip Code(Plus 4)			
Employer of Contributor			Occupation		
Employer Mailing Address/Principal Place of Business	City	State	Zip Code(Plus 4)	Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.					PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

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

				DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR		
LN CONSULTING	5	17	2018	\$	389.02
Mailing Address 121 STATE STREET					
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure PALM CARDS		
To Whom Paid	MO	DAY	YEAR		
STRATEGIC MEDIA	5	15	2018	\$	3,000.00
Mailing Address 41 SOUTH HIGH STREET					
City COLUMBUS	State OH	Zip Code (Plus 4) 43215	Description of Expenditure ADS		
To Whom Paid	MO	DAY	YEAR		
LN CONSULTING	5	15	2018	\$	6,042.55
Mailing Address 121 STATE STREET					
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure MAILERS		
To Whom Paid	MO	DAY	YEAR		
ALTOONA RIFLE & PISTOL CLUB	5	17	2018	\$	100.00
Mailing Address SINKING VALLEY-STEINBEISER					
City ALTOONA	State PA	Zip Code (Plus 4) 16601	Description of Expenditure DRIVE AD/DONATION		
To Whom Paid	MO	DAY	YEAR		
MORRISON COVE HERALD	5	4	2018	\$	375.76
Mailing Address 113 N MARKET ST					
City MARTINSBURG	State PA	Zip Code (Plus 4) 16662	Description of Expenditure AD		
To Whom Paid	MO	DAY	YEAR		
TYRONE HERALD	5	4	2018	\$	545.00
Mailing Address 1067 PENNSYLVANIA AVE					
City TYRONE	State PA	Zip Code (Plus 4) 16686	Description of Expenditure AD		

To Whom Paid TYRONE CHAMBER OF COMMERCE			MO	DAY	YEAR	\$	75.00
Mailing Address 1004 LOGAN AVE			6	1	2018		
City TYRONE	State PA	Zip Code (Plus 4) 16686	Description of Expenditure MEMBERSHIP				
To Whom Paid ALTOONA CHAMBER OF COMMERCE			MO	DAY	YEAR	\$	75.00
Mailing Address 3400 INDUSTRIAL PARK DR			6	1	2018		
City ALTOONA	State PA	Zip Code (Plus 4) 16602	Description of Expenditure MEMBERSHIP				
To Whom Paid SINKING VALLEY COUNTRY CLUB			MO	DAY	YEAR	\$	70.00
Mailing Address 545 GOLF COURSE RD			6	1	2018		
City ALTOONA	State PA	Zip Code (Plus 4) 16601	Description of Expenditure GOLF TOURNEY FEE				
To Whom Paid DUNCANSVILLE COMMUNITY DAYS			MO	DAY	YEAR	\$	250.00
Mailing Address 828 8TH AVE			6	1	2018		
City DUNCANSVILLE	State PA	Zip Code (Plus 4) 16635	Description of Expenditure AD				
To Whom Paid WISE WOMEN OF BLAIR COUNTY			MO	DAY	YEAR	\$	100.00
Mailing Address 525 ALLEGHENY ST			5	29	2018		
City HOLLIDAYSBURG	State PA	Zip Code (Plus 4) 16648	Description of Expenditure AD				
To Whom Paid JOE CARPER			MO	DAY	YEAR	\$	500.00
Mailing Address 1665 NEWRY LANE			5	28	2018		
City DUNCANSVILLE	State PA	Zip Code (Plus 4) 16635	Description of Expenditure CASUAL LABOR				
To Whom Paid JULIE NELSON			MO	DAY	YEAR	\$	250.00
Mailing Address 1637 E PLEASANT VALLEY BLVD			5	28	2018		
City ALTOONA	State PA	Zip Code (Plus 4) 16602	Description of Expenditure CASUAL LABOR				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL	
						\$	11,772.33

