

# Campaign Finance Report

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

<b>Filer Identification Number :</b>		20150217		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>		
<b>Name of Filing Committee, Candidate or Lobbyist:</b> FRIENDS OF JOANNA MCCLINTON												
<b>Street Address:</b> 6021 WASHINGTON AVE												
<b>City:</b> PHILADELPHIA						<b>State:</b> PA			<b>Zip Code:</b> 19143			
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY PRIMARY	POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2019	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>		<b>DISKETTE</b>			
<b>Name of Office Sought by Candidate:</b>						<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
REPRESENTATIVE IN THE GENERAL ASSEMBLY						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	191	STH	DEM	
						11	5	2019	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
		4	2	2019		5	6	2019				
<b>A. Amount Brought Forward From Last Report</b>						\$ 40,466.10						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 7,025.00						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 47,491.10						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 4,822.24						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 42,668.86						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$ 0.00						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$ 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 of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

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 of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
**Detailed Summary Page**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF JOANNA MCCLINTON	From: <u>4/2/2019</u> To: <u>5/6/2019</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 175.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 250.00
<b>All Other Contributions (Part B)</b>	\$ 1,600.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 1,850.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 4,000.00
<b>All Other Contributions (Part D)</b>	\$ 1,000.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 5,000.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>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.)</b>	\$ 7,025.00
---	-------------

**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.**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF JOANNA MCCLINTON	<b>Reporting Period</b>  <b>From:</b> <u>4/2/2019</u> <b>To:</b> <u>5/6/2019</u>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;"><b>DATE</b></td> <td style="width: 40%; border: none;"><b>AMOUNT</b></td> </tr> </table>		<b>DATE</b>	<b>AMOUNT</b>
<b>DATE</b>	<b>AMOUNT</b>		

<b>Full Name of Contributing Committee</b> HEALTH PARTNERS PLANS PAC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 901 MARKET ST STE 500			5	1	2019	
<b>City</b> PHILADELPHIA	<b>State</b>  PA	<b>Zip Code (Plus 4)</b>  191074496				

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

<b>PAGE TOTAL</b>
\$ 250.00

**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)**

<b>Name of Filing Committee or Candidate</b> FRIENDS OF JOANNA MCCLINTON	<b>Reporting Period</b> <b>From:</b> <u>4/2/2019</u> <b>To:</b> <u>5/6/2019</u>
---	--

				DATE		AMOUNT	
Full Name of Contributor MIRA BAYLSON				MO	DAY	YEAR	\$ 250.00
Mailing Address 4120 APALOGEN RD				4	3	2019	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191295504					
Full Name of Contributor JESSICA COCKRELL				MO	DAY	YEAR	\$ 250.00
Mailing Address 233 DOUGLAS ST NE				4	3	2019	
City WASHINGTON	State DC	Zip Code (Plus 4) 200021031					
Full Name of Contributor HOWARD FISCHER				MO	DAY	YEAR	\$ 100.00
Mailing Address 1420 LOCUST ST APT 22K				5	3	2019	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191024213					
Full Name of Contributor KRISTIN GIVENS				MO	DAY	YEAR	\$ 100.00
Mailing Address 305 W MONROE ST APT 1				4	9	2019	
City BLOOMINGTON	State IL	Zip Code (Plus 4) 617014444					
Full Name of Contributor DAVID L HYMAN				MO	DAY	YEAR	\$ 250.00
Mailing Address 1650 MARKET ST FL 46				4	3	2019	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191037305					

Full Name of Contributor CHARLES D. LOMAX			MO	DAY	YEAR	\$ 250.00
Mailing Address 700 DUBLIN ROAD			4	15	2019	
City HILLTOWN	State PA	Zip Code (Plus 4) 18927				

Full Name of Contributor BERNARD SMALLEY			MO	DAY	YEAR	\$ 250.00
Mailing Address 1845 WALNUT ST STE 2000			4	3	2019	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191034720				

Full Name of Contributor ROBERT VOGEL			MO	DAY	YEAR	\$ 150.00
Mailing Address 2021 GREEN ST APT 1			4	3	2019	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191303457				

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

**PAGE TOTAL**

\$ 1,600.00

## 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.**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF JOANNA MCCLINTON	<b>From:</b> <u>4/2/2019</u> <b>To:</b> <u>5/6/2019</u>

				DATE		AMOUNT	
Full Name of Contributing Committee AFSCME COUNCIL 13				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 4031 EXECUTIVE PARK DR				5	1	2019	
City HARRISBURG	State PA	Zip Code (Plus 4) 171111507					
Full Name of Contributing Committee COALITION FOR PENNSYLVANIA'S FUTURE				MO	DAY	YEAR	\$ 500.00
Mailing Address PO BOX 12090				5	1	2019	
City HARRISBURG	State PA	Zip Code (Plus 4) 171082090					
Full Name of Contributing Committee ENERGY TRANSFER PAC				MO	DAY	YEAR	\$ 500.00
Mailing Address 400 W 15TH ST STE 720				5	1	2019	
City AUSTIN	State TX	Zip Code (Plus 4) 787011661					
Full Name of Contributing Committee PA AUTOMOTIVE ASSOCIATION PAC (PAA)				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 1925 N FRONT ST				5	1	2019	
City HARRISBURG	State PA	Zip Code (Plus 4) 171022214					
Full Name of Contributing Committee PA MEDICAL SOCIETY PAC				MO	DAY	YEAR	\$ 500.00
Mailing Address PO BOX 8820				5	1	2019	
City HARRISBURG	State PA	Zip Code (Plus 4) 171058820					

Full Name of Contributing Committee			MO	DAY	YEAR	\$500.00
VISION COMMITTEE						
Mailing Address 2205 STRAWBERRY SQ			5	1	2019	
City HARRISBURG	State PA	Zip Code (Plus 4) 171011801				

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

PAGE TOTAL	
\$	4,000.00

**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.)**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF JOANNA MCCLINTON	<b>Reporting Period</b>  <b>From:</b> <u>4/2/2019</u> <b>To:</b> <u>5/6/2019</u>
---	--

				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
MUSTAFA RASHED							
<b>Mailing Address</b> 200 S BROAD ST STE 850				4	3	2019	\$ 500.00
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191023823					
<b>Employer Name</b> BELLVUE STRATEGIES				<b>Occupation</b> PRESIDENT AND CEO			
<b>Employer Mailing Address/Principal Place of Business</b> 200 S BROAD STSTE 850			<b>City</b> PHILADELPHIA		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191023823	

Full Name of Contributor				MO	DAY	YEAR	
DUANE MORRIS GOVERNMENT AFFAIRS, LLP							
<b>Mailing Address</b> 300 N 2ND ST PH				5	1	2019	\$ 500.00
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 171011303					
<b>Employer Name</b>				<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b> 300 N 2ND ST PH			<b>City</b> HARRISBURG		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 171011303	

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

<b>PAGE TOTAL</b>
\$ 1,000.00



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.

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
FRIENDS OF JOANNA MCCLINTON		From: <u>4/2/2019</u> To: <u>5/6/2019</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)		\$	0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)		\$	0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
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	\$ 0.00
Mailing Address							
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:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF JOANNA MCCLINTON	From <u>4/2/2019</u> To: <u>5/6/2019</u>

DATE				AMOUNT
<b>To Whom Paid</b> ACTBLUE	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> PO BOX 441146	4	1	2019	\$ 26.63
<b>City</b> WEST SOMERVILLE	<b>State</b> MA	<b>Zip Code (Plus 4)</b> 021440031	<b>Description of Expenditure</b> CREDIT CARD PROCESSING FEE	
<b>To Whom Paid</b> ACTBLUE	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> PO BOX 441146	5	1	2019	\$ 18.38
<b>City</b> WEST SOMERVILLE	<b>State</b> MA	<b>Zip Code (Plus 4)</b> 021440031	<b>Description of Expenditure</b> CREDIT CARD PROCESSING FEE	
<b>To Whom Paid</b> CITIZENS FOR OMAR SABIR	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 7300 CITY AVE STE 360	4	26	2019	\$ 500.00
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191512218	<b>Description of Expenditure</b>	
<b>To Whom Paid</b> DARBY BOROUGH DEMOCRATIC COMMITTEE	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 25 SOUTHRIDGE RD	5	4	2019	\$ 500.00
<b>City</b> DARBY	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 190231113	<b>Description of Expenditure</b>	
<b>To Whom Paid</b> DELTA SIGMA THETA SORORITY, INC.	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> PO BOX 1930	5	4	2019	\$ 250.00
<b>City</b> BOOTHWYN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 190617930	<b>Description of Expenditure</b>	

To Whom Paid EAST COAST BLACK AGE OF COMIC CONVENTION			MO	DAY	YEAR	\$ 500.00
Mailing Address PO BOX 34059			5	4	2019	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191014059	Description of Expenditure			

To Whom Paid FRIENDS OF ROHAN HEPKINS			MO	DAY	YEAR	\$ 100.00
Mailing Address PO BOX 5504			5	4	2019	
City YEADON	State PA	Zip Code (Plus 4) 190509504	Description of Expenditure			

To Whom Paid PAULINE LLOYD			MO	DAY	YEAR	\$ 100.00
Mailing Address 6063 KINGSESSING AVE			5	4	2019	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191421431	Description of Expenditure DONATION FOR KINGSESSING PARK			

To Whom Paid JOANNA MCCLINTON			MO	DAY	YEAR	\$ 182.99
Mailing Address 6021 WASHINGTON AVE			5	4	2019	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191432321	Description of Expenditure			

To Whom Paid MFSTRATEGIES, LLC			MO	DAY	YEAR	\$ 2,349.24
Mailing Address PO BOX 439			4	25	2019	
City HARRISBURG	State PA	Zip Code (Plus 4) 171080439	Description of Expenditure CONSULTING AND REIMBURSEMENTS			

To Whom Paid RICK LOWE FOR DELAWARE COUNTY			MO	DAY	YEAR	\$ 250.00
Mailing Address 205 N EDMONT ST			4	26	2019	
City MEDIA	State PA	Zip Code (Plus 4) 190633015	Description of Expenditure			

<b>To Whom Paid</b> VFW DISTRICT 7			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 137 N 10TH ST			4	26	2019	
<b>City</b> DARBY	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 190231608	<b>Description of Expenditure</b>			
<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b> \$ 4,822.24

