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 201	50217				port ed B		CAND	IDATE	TE COMMITTEE V LOBBYIST							
Name of Filing C	Committee, Candi	date or L	obbyist:		MCC	CLIN	TON,	JOANNA	FRIEN	IDS C)F						
Street Address:	PO BOX 1660	58															
City:	PHILADELPH:	ΙA						State:	PA	PA			Zip Code: 19139-9998				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY I PRIMARY	PRE-	- 2	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT?		Yes	No	~	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- [5.	30 DA ELECT		POST-	6.		TERMINA REPORT		Yes	No	\	
report type)	ANNUAL REPORT	7. X	Year 2019					IG METH CHECK O				PAPER		\checkmark	DISKE	TTE	
Name of Office S	Sought by Candida	nte:	•		-			DATE ()F ELE	CTIC	N	District Number	Office Code	Part	y Code	County Code	
								МО	DAY	YI	AR		10000	DEM		51	
								11		5	2019		(SEE IN	STRUCTIO	NS FOR C	ODES)	
	Receipts and	МО	DAY YI	EAR				МО	DAY	ΥI	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	s trom:		11 26	20	019	Т	0	12	2	31	2019						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			64,8	301.80						
B. Total Monet	ary Contributions	And Rec	eipts (From S	che	dule	e I)	\$			5,3	350.00						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			70,:	151.80						
D. Total Expend	ditures (From Sch	edule II	I)				\$			16,1	75.00						
E. Ending Cash	Balance (Subtra	t Line D	From Line C)				\$			53,9	76.80						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sche	edul	le II	[)	\$				0.00						
G. Unpaid Debt	s And Obligation	(From S	Schedule IV)				\$				0.00			•			
			A	١FF	IDA	٩VI	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign hei	re. I	[f thi	is is	a Can	ididate r	eport, o	candi	date sig	ın here.					
I swear (or affirm) correct and comple) that this report, inc ete.	cluding the	e attached sched	dules	filed	d on	paper (or by elec	tronic m	edium	, are to t	he best o	f my kno	wledge a	nd belie	f , true	
Sworn to and subs	cribed before me th day of	is	20							9	ignature	of Perso	n Submit	ting Rep	ort		
	Signat	ıre					- -					Prin	ted Name	e			
My Commission Ex	_											Ema	il				
	мо	D	AY	YR			_		Are	ea Cod	le	Daytim	e Teleph	none Nur	nber		
Part II- If this is	a report of a can	didate's	authorized Co	omm	itte	e, C	andida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and belief	this	polit	tical	commi	ittee has ı	not viola	ted an	y provis	ions of the	e act of J	une 3,19	37 (P.L.	1333,	
Sworn to and subsc	ribed before me this	i									s	ignature o	of Candid	ate			
	day of 						-					Drint-	d Name				
	Signature						-										
My Commission Exp	-											Ema	il	_	_		
	МО	D	AY	YR			•		Area	Code		Da	ytime T	elephon	e Numbe	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period						
MCCLINTON, JOANNA FRIENDS OF	From:	11/26/201	. <u>9</u> To:	12/31/2019			
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor							
TOTAL for the Reporting	g 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)			\$	600.00			
All Other Contributions (Part B)			\$	250.00			
TOTAL for the Reporting	g Period	(2)	\$	850.00			
3. Contributions Received Over \$250.00 (From Part C and Part D)							
Contributions Received From Political Committees (Part C)			\$	4,500.00			
All Other Contributions (Part D)			\$	0.00			
TOTAL for the Reporting	g Period	(3)	\$	4,500.00			
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)							
TOTAL for the Reporting	g Period	(4)	\$	0.00			
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	5,350.00			

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 Cor	nmittee or Candidat	e		Re	porting I	Period			
MCCLINTON, JOA	NNA FRIENDS OF			Fre	om:	11/26/20) <u>19</u> To :	l	12/31/2019
						DATE			AMOUNT
Full Name of Contril	outing Committee				мо	DAY	YEAR		
SALVO PAC									
Mailing Address	ng Address 320 FORT DUQUESNE BOULEVARD GATEWAY TOWER STE 140				11	27	2019	\$	250.00
City PITTSBURG	H	State	Zip Code (Plus 4	4)					
		PA	15222-1102						
Full Name of Contril Pittsburgh Fire Figh	-				мо	DAY	YEAR		
Mailing Address	120 Flowers Ave				12	3	2019	\$	250.00
City Pittsburgh		State	Zip Code (Plus 4	4)	12		2013		
-		PA	15207						
Full Name of Contril	outing Committee				мо	DAY	YEAR		
					MO	DAT	TEAK		
Teamsters Local Un	ion 249								
	ion 249 4701 Butler Stre	et			11	27	2019	\$	100.00
Teamsters Local Un	-	et State	Zip Code (Plus 4	4)	11	27	2019	\$	100.00

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

PAGE TOTAL\$ 600.00

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

MCCLINTON, JOANNA FRIENDS OF

From: 11/26/2019 **To:**

DATE

12/31/2019

AMOUNT

	lame of Contributor es Chirdon			мо	DAY	YEAR	
	ng Address 1005 Glenshaw Av	re					\$ 250.00
City	Glenshaw	State	Zip Code (Plus 4)	12	2	2019	
		PA	15116				

PAGE TOTAL

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

250.00 \$

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	ime of Filing Committee or Candidate						
MCCLINTON, JOANNA FRIENDS OF			From:	11/2	6/2019	То:	12/31/2019
				DA	TE		AMOUNT
Full Name of Contributing Committee				МО	DAY	YEAR	
Block By Block PAC	CF #142						\$ 500.00
Mailing Address 611 Pennsylvania Av				12	31	2019	
City Washington	State DC	Zip Code 20003	e (Plus 4)				
Full Name of Contributing Committee SEIU HEALTHCARE PA COPE				МО	DAY	YEAR	\$ 1,000.00
Mailing Address 1500 N 2ND ST, STE	12			12 10 2		2019	1,000.00
City HARRISBURG	State	Zip Code	e (Plus 4)	12	10	2019	
	PA	17102					
Full Name of Contributing Committee MALADY & WOOTEN PAC				мо	DAY	YEAR	\$ 1,000.00
Mailing Address 604 N THIRD ST				12	31	2019	1,000.00
City HARRISBURG	State	Zip Code	e (Plus 4)	12		2019	
	PA	17101-0	0000				
Full Name of Contributing Committee LEADERSHIP 215				МО	DAY	YEAR	\$ 1,000.00
Mailing Address PO BOX 32097				12	18	2019	1,000.00
City PHILADELPHIA	State	Zip Code	e (Plus 4)	12	10	2019	
	PA	19146					
Full Name of Contributing Committee WESTERN PENNSYLVANIA GROWTH PAGE				мо	DAY	YEAR	\$ 500.00
Mailing Address PO BOX 13445				10	2	2010	300.00
City PITTSBURGH	State	Zip Code	e (Plus 4)	12	3	2019	
	PA	15243					
Full Name of Contributing Committee PHA HOME PAC				мо	DAY	YEAR	. F00.00
Mailing Address 600 N 12TH ST, STE	200			40	24	2010	\$ 500.00
City LEMOYNE	State	Zip Code	e (Plus 4)	12	31	2019	
	PA	17043					

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

PAGE TOTAL

4,500.00

\$

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					
				Fron	n:			To:			
					D	ATE			,	AMOUNT	
Full Name of Contributor					мо	DAY	YEA	R	\$		0.00
Mailing Address											
City	State	Zip	Code (Plus	(4)							
Employer Name					Occupa	tion					
Employer Mailing Address/Principal Plac	e of Business		City			State		Z	Zip Co	de (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Sເ	umm	nary Page,	Section	on 3.			\$	I	PAGE TOTAL	- 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:		
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	ıs 4)					
Receipt Description		.			•			
Futor Crowd Total of Book	F an Cabadula I Batailad	Summer Base Se		4				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	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 Peri	od						
MCCLINTON, JOANNA FRIENDS OF	From:	<u>11/26/2019</u> To:	<u>12/31/2019</u>					
UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS 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 Candidate	ame of Contributor Ig Address State Zip Code (Plus 4)	Reporting	g Period					
			From:			To:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	-	-	•	•	•			
Enter Grand Total of Part F on Sche	dule II, In-Kind	d Contributions Deta	iled Sum	mary Pag	ge,		PAGE TOTA	L
Section 2.						\$		0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Reporting 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	V	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	Contributions De	etaile	ed				PAGE TO	ΓAL
Summary Page, Section 3.	,									0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting F			
MCCLINTON, JOANNA FRIENDS OF	From	11/26/2019	То:	12/31/2019

				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
NGP VAN			1.10				
Mailing Address 1445 New	York Ave NW Ste 200		12	31	2019	\$	750.00
City Washington	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	DC	20005	DLCC2	First Quar	ter		
To Whom Paid			мо	DAY	YEAR		
M F Strategies			MO	DAI	ILAK		
Mailing Address P O Box 4	39		12	20	2019	\$	1,500.00
City Harrisburg	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	17108	Monthly	/ Retainer/	Decembe	er 2019	
To Whom Paid			мо	DAY	YEAR		
Nina For PA			MO	DAI	ILAK		
Mailing Address P O Box 4	0681		12	30	2019	\$	250.00
City Philadelphia State Zip Code (Plus 4			Descrip	tion of Exp	enditure	I	
	PA	19107	Donatio	n			
To Whom Paid			МО	DAY	YEAR		
PA HDCC			МО	DAY	YEAK		
Mailing Address P O Box 5	55		12	30	2019	\$	10,000.00
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	17108	Donatio	n			
To Whom Paid			мо	DAY	VEAD		
Reed Smith, LLP			МО	DAT	YEAR		
Mailing Address 225 5th A	ve		12	17	2019	\$	471.25
City Pittsburgh	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	15222	Fundrai	ser 12/03/	2019		
To Whom Paid			Mo	DAY	VEAD		
Eat'nPark			МО	DAY	YEAR		
Mailing Address 285 East \	Waterfront Drive Ste 200		12	12	2019	\$	703.75
City Homestead	State	Zip Code (Plus 4)	Descrip	l tion of Exp	enditure	<u>I</u>	
	PA	15120		ser 12/03/			
	1 **			_, _,			

To Whom Paid		_	_	,,,	DAY	VEAD		
Rickey Hill			МО	DAY	YEAR			
Mailing Address 1409 North Redfield			12	17	2019	\$	2,500.00	
City PHILADELPHIA		State	Zip Code (Plus 4)	Descript	scription of Expenditure			
		PA	19151	Caterino	g/Seniors I			
			13131	Catcini	<i>3/3</i> emors	Tollday E	vent	
-			•	•	g/ Seriioi s	Tollday E	vent	PAGE TOTAL
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