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 :		Report CANDIDA		IDA	TE		COMM	4ITTEE	✓	LOB	BYI	ST						
Name of Filing C	Committee, Candid	ate or L	obbyist:		FRII	END:	S OF .	JIM GRE	GOI	RY								
Street Address:																		
City:	TYRONE							State:	PA	Д			Zip Code: 16686					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. X	2ND FRIDA PRIMARY	Y PRE	-	2.	30 DA PRIMA		POS				AMENDM REPORT?	Yes		No	\	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	≣-	5.	30 DA ELECT		POS	POST- 6.			TERMINA REPORT?		Yes		No	\
report type)	ANNUAL REPORT	NNUAL REPORT 7. Year 2020 FILING METHOD () CHECK ONE										PAPER		\	DI	SKETT	E	
Name of Office S	- Sought by Candida	te:						DATE	OF E	ELEC	TIO	N	District Number	Office Code	Pa	rty C	ode Co	unty de
	- ,							МО	DA	AY	YE	AR		10000				
								1	1	:	3	2020		(SEE IN	STRUCT	ONS	FOR COD	ES)
	Receipts and	МО	DAY	YEAR	ł			МО	DA	AY	YE	AR	FO	R OFFI	CE USI	ON	LY	
Expenditures	Expenditures from: 1 1					T	0		3	1	9	2020						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$				17,4	48.90						
B. Total Monetary Contributions And Receipts (From Sch						e I)	\$				1,5	85.00						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$				19,0	33.90						
D. Total Expend	ditures (From Sch	edule II	I)				\$				4,2	01.79						
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)			\$:	14,8	32.11						
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedu	le II	I)	\$					0.00						
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV	/)			\$					0.00						
				AFF	IDA	AVI	ΓSE	CTION										
	s a Committee rep		_						=	-		_						
I swear (or affirm) correct and complete) that this report, inc ete.	luding the	e attached sc	hedules	s file	d on	paper (or by elec	troni	ic me	dium,	are to t	he best of	my kno	wledge	and	belief ,	true
Sworn to and subs	cribed before me this day of	\$	20								Si	ignature	of Persor	Submit	ting Re	port		_
	Signatu	re					- -						Print	ed Name	•			_
My Commission Ex	cpires						_						Emai	I				
	мо	D	AY	YR						Area	a Cod	e	Daytim	e Teleph	one Nu	ımbe	r	
Part II- If this is	a report of a can	didate's	authorized	Comn	nitte	ee, Ca	andida	ate shal	l sig	ın hei	re.							
I swear (or affirm) No 320) as amende	that to the best of red.	ny knowle	edge and beli	ief this	poli	tical	commi	ittee has	not v	violate	ed any	y provisi	ions of the	act of J	une 3,1	.937	(P.L. 13	333,
Sworn to and subsc	ribed before me this								_			Si	ignature o	f Candid	ate			_
	day of						-		_				Printe	d Name				—
My Commission Exp	Signature						-		_				Emai	I				_
, commission exp							_		_									
	МО	D.	AY	YR	l				A	Area C	ode		Da	ytime T	elepho	ne N	umber	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF JIM GREGORY	From:	1/1/202	<u>0</u> To:	3/9/2020
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	Period	(1)	\$	1,135.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	100.00
All Other Contributions (Part B)			\$	350.00
TOTAL for the Reporting	Period	(2)	\$	450.00
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			\$	1,585.00

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		
FRIENDS OF JIM GREGORY	From:	1/1/2020	То:	3/9/2020
		DATE		AMOUNT

Full N	ame of Contributing Committee	мо	DAY	YEAR			
PSEA	PACE	140	DAT	IEAK			
Mailing Address				2	3	2020	\$ 100.00
City	HARRISBURG	State	Zip Code (Plus 4)]		2020	
		PA	17105				

PAGE TOTAL
100.00

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	Reporting Perior	d		
FRIENDS OF JIM GREGORY	From:	1/1/2020	То:	3/9/2020

DATE **AMOUNT Full Name of Contributor** мо DAY YEAR DAVID SERIELLO **Mailing Address** 250.00 **ALTOONA** State Zip Code (Plus 4) 2 2020 PA 16602 **Full Name of Contributor** МО DAY YEAR JUDITH WARD **Mailing Address** 100.00 \$ State 2 2020 City HOLLIDAYSBURG Zip Code (Plus 4) PA 16648

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

PAGE TOTAL \$ 350.00

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		P	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			0.00
Mailing Address							- \$		0.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTA	AL
Enter Grand Total of Part C on Sche	dule I, Detailed Sun	nmary P	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	2			Rep	orting Pe	riod			
				Fron	n:		To) :	
					D	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR	\$	0.00
Mailing Address									
City	State	Zi	p Code (Plus	(4)					
Employer Name	•				Occupa	tion	-	-	
Employer Mailing Address/Principal Pl	ace of Business		City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detaile	ed Sumr	mary Page,	Section	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:		
		'			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	'						<u> </u>	
	- C		. .:	_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	Section	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	I	
FRIENDS OF JIM GREGORY	From:	<u>1/1/2020</u> To:	<u>3/9/2020</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER 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 Car	ndidate		Reporting 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 o	n Schedule II, In-Ki	nd Contributions Detai	led Sun	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 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 Per	iod		
FRIENDS OF JIM GREGORY	From	1/1/2020	То:	<u>3/9/2020</u>

					DATE	AMOUNT				
To Whom Paid					DAY	YEAR				
CAPOZZI GROUP						1 ZAIR				
Mailing Address				1	16	2020	\$	250.00		
City	HOLLIDAYSBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
		PA	16648	ADVERTISING						
To Who	om Paid			мо	DAY	YEAR				
HOUSE REPUBLICAN CAMPAIGN COMMITTEE				MO	DAT	TEAR				
Mailing Address					9	2020	\$	650.00		
City	HARRISBURG	State	Zip Code (Plus 4)	Description of Expenditure						
		PA 17101			ADVERTISING					
To Whom Paid				МО	DAY	YEAR				
LIGHTNER COMMUNICATIONS					DAI	ILAK				
Mailing Address					9	2020	\$	200.00		
City	ALTOONA	State	Zip Code (Plus 4)	Description of Expenditure						
		PA	16602	ADVERTISING						
To Whom Paid				МО	DAY	YEAR				
FREEDOM TOWNSHIP FIRE HALL					DAI	ILAK				
Mailing Address					1	2020	\$	1,000.00		
City	EAST FREEDOM	State	Zip Code (Plus 4)	Description of Expenditure						
		PA	16637	ADVERTISING						
To Whom Paid					DAY	YEAR				
ALTOONA GUN & RIFLE CLUB						ILAK				
Mailing Address					6	2020	\$	100.00		
City	ALTOONA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
		PA	16601	ADVERTISING						
To Whom Paid				МО	DAY	YEAR				
HILTON HARRISBURG										
Mailing Address					7	2020	\$	500.00		
				Description of Expenditure						
City	HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				

							FAGL 12			
To Whom Paid			мо	DAY	YEAR					
COMMONWEALTH CAMPAIGNS	1-10		ILAK							
Mailing Address	2	11	2020	\$	1,170.99					
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
	PA 17101				ADVERTISING					
To Whom Paid				DAY	YEAR					
WOMENS CLUB OF TYRONE	МО	DAT	TEAR							
Mailing Address	2	22	2020	\$	21.00					
City TYRONE	State	Zip Code (Plus 4)	Description of Expenditure							
	PA 16686				ADVERTISING					
To Whom Paid COPYRITE	МО	DAY	YEAR							
Mailing Address	2	7	2020	\$	84.80					
City ALTOONA	ALTOONA State Zip Code (Plus 4)			Description of Expenditure						
	PA	16601	ADVERTISING							
To Whom Paid				DAY	YEAR					
TYRONE CHAMBER OF COMMER	МО	DAT	TEAR							
Mailing Address	2	7	2020	\$	100.00					
City TYRONE	TYRONE State Zip Code (Plus 4)			Description of Expenditure						
	PA 16686				ADVERTISING					
To Whom Paid	мо	DAY	YEAR							
ALTOONA KIWANIS CLUB										
Mailing Address	2	20	2020	\$	125.00					
City HOLLIDAYSBURG	HOLLIDAYSBURG State Zip Code (Plus 4)				Description of Expenditure					
	PA	16648	ADVERT	ISING						
							PAGE TOTAL			
Enter Grand Total of Expend	\$	4,201.79								