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 | | | | Repor Filed | | CAN | IIDN | DATE | | COM | ITTEE | ✓ | LOB | BYIST | | |
|--|--------------------------------|-------------|-----------------|---------|-----------------|----------------|--------|----------------|-------|----------|-------------|-----------------|--------------------|----------------|---------------------|--------|-----------|----------|
| Name of Filing C | ommittee, Candi | date or L | obbyist | t: | | 1CCLII | NTON, | JOAN | NA | FRIEN | DS C |)F | | | | | | |
| Street Address: | PO BOX 1660 | 58 | | | | | | | | | | | | | | | | |
| City: | PHILADELPH: | ΙA | | | | | | State | : | PA | | | Zip Cod | ie: 19 | 139-9 | 998 | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FI PRIMA | | PRE- | 2. | 30 DA | | Р | OST- | 3. X | | AMENDM REPORT? | | Yes | N | lo | \ |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FF | | PRE- | 5. | 30 DA | | Р | OST- | 6. | | TERMINA REPORT? | | Yes | Ν | lo | / |
| report type) | ANNUAL REPORT | 7. | Year 2 | 2020 | | | | NG ME CHECI | | _ | | | PAPER | | √ | DISK | ETTE | |
| Name of Office S | ought by Candida | ite: | | | | - | - | DAT | E O | F ELE | CTIC | N | District Number | Office Code | Par | ty Cod | e Coui | |
| REPRESENTATI | VE IN THE GENE | RAL ASS | EMBLY | • | | | | МО | | DAY | | EAR | 191 | STH | DEN | 1 | 51 | |
| | | 140 | Inn | , [, | VEAD | | | | 11 | | 3 | 2020 | | (SEE INS | | | | 5) |
| Summary of Expenditures | | МО | DAY | 19 | YEAR 20: | 20 1 | го | МО | 6 | DAY | 22 | EAR 2020 | FO | R OFFIC | E USE | ONLY | | |
| A. Amount Bro | ught Forward Fro | m Last R | | | | | \$ | | | • | | 952.93 | | | | | | |
| B. Total Moneta | ary Contributions | And Rec | eipts (I | From | Sched | ule I) | \$ | | | | | 900.00 | | | | | | |
| C. Total Funds | Available (Sum O | f Lines A | and B |) | | | \$ | ; | | | 55, | 852.93 | | | | | | |
| D. Total Expend | ditures (From Sch | edule II | I) | | | | \$ | | | | 9,2 | 260.00 | | | | | | |
| E. Ending Cash | Balance (Subtra | t Line D | From L | ine C |) | | \$ | | | | 46,5 | 92.93 | | | | | | |
| F. Value Of In- | Kind Contribution | s Receiv | ed (Fro | m Sc | hedule | e II) | \$ | | | | | 0.00 | | | | | | |
| G. Unpaid Debt | s And Obligation | (From S | Schedu | le IV) |) | | \$ | , | | | | 0.00 | | | | | | |
| | | | | | AFFI | DAV: | IT SE | CTIC | N | | | | | | | | | |
| PART I - If this is | a Committee rep | ort, trea | surer s | sign h | ere. If | this i | s a Ca | ndidat | e re | port, o | andi | date sig | ın here. | | | | | |
| I swear (or affirm) correct and comple | that this report, inc ete. | cluding the | e attache | ed sch | edules 1 | filed on | paper | or by e | lectr | onic m | edium | , are to t | he best o | f my knov | vledge | and be | lief , tr | ue |
| Sworn to and subs | cribed before me th day of | is | 20 | | | | | | | | \$ | Signature | of Perso | n Submitt | ing Re _l | ort | | _ |
| | Signat | ıre | | | | | _ | | | | | | Prin | ted Name | | | | |
| My Commission Ex | pires | | | | | | _ | | | | | | Ema | il | | | | |
| | МО | D | AY | | YR | | | | | Are | ea Co | de | Daytim | e Teleph | one Nu | mber | | |
| Part II- If this is | a report of a can | didate's | author | ized (| Commi | ittee, (| Candid | ate sh | alls | sign he | ere. | | | | | | | |
| I swear (or affirm) No 320) as amende | that to the best of ed. | my knowl | edge and | d belie | f this p | oolitical | comm | ittee h | as no | ot viola | ted ar | ny provis | ions of the | e act of Ju | ine 3,1 | 937 (P | .L. 133 | з, |
| Sworn to and subsc | ribed before me this day of | i | 20 | | | | | | | | | S | ignature o | of Candida | ite | | | _ |
| | | | _ 20 | | | | _ | | | | | | Printe | d Name | | | | - |
| My Commission Exp | Signature ires | | | | | | _ | | - | | | | Ema | il | | | | - |
| | мо | D | AY | | YR | | _ | | | Area | Code | | Da | aytime Te | elephor | ie Num | ber | - |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| Name of Filing Committee or Candidate | Reporting | g Period | | |
|---|-----------|----------|---------------|-----------|
| MCCLINTON, JOANNA FRIENDS OF | From: | 5/19/202 | <u>:0</u> To: | 6/22/2020 |
| 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor | | | | |
| TOTAL for the Reporting | 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) | | | \$ | 500.00 |
| All Other Contributions (Part B) | | | \$ | 100.00 |
| TOTAL for the Reporting | Period | (2) | \$ | 600.00 |
| 3. Contributions Received Over \$250.00 (From Part C and Part D) | | | | |
| Contributions Received From Political Committees (Part C) | | | \$ | 3,300.00 |
| All Other Contributions (Part D) | | | \$ | 0.00 |
| TOTAL for the Reporting | Period | (3) | \$ | 3,300.00 |
| 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 Page 1, Page 2, 2,3 and 4; also enter this amount on Page 3, Report Cover Page 3, 2,3,3,4,4,5,5,5,6,6,6,6,6,6,6,6,6,6,6,6,6,6,6 | | | \$ | 3,900.00 |

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 Con | nmittee or Candidat | e | | Re | porting I | Period | | | |
|--|---------------------|--------------------|----------------------------------|----|-----------|---------|-------------------------|----|------------|
| MCCLINTON, JOAN | NNA FRIENDS OF | | | Fr | om: | 5/19/20 |) <u>20</u> To : | 1 | 6/22/2020 |
| | | | | | | DATE | | | AMOUNT |
| Full Name of Contrib Pennsylvania Cemet | _ | uneral Association | | | МО | DAY | YEAR | | |
| Mailing Address | 3051 Green Pond | | | | | 4 | 2020 | \$ | 250.00 |
| City Easton | | State PA | Zip Code (Plus 18045 | 4) | 6 | 4 | 2020 | | |
| Full Name of Contrib | - | | | | МО | DAY | YEAR | | |
| Mailing Address | 3343 STONEHOU | SE COURT | | | 6 | 4 | 2020 | \$ | 125.00 |
| City BETHLEHEM | | State PA | Zip Code (Plus 18017 | 4) | 0 | · | 2020 | | |
| Full Name of Contrib | _ | 5) | | | мо | DAY | YEAR | | |
| Mailing Address | 157 DELMONT A | /E | | | 6 | 4 | 2020 | \$ | 125.00 |
| City WARMINSTE | ER | State PA | Zip Code (Plus 18974-3773 | 4) | J | | 2020 | | |
| | | | | | | | | | PAGE TOTAL |

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

PAGE TOTAL 500.00

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 Candidate

Reporting Period

MCCLINTON, JOANNA FRIENDS OF

From: 5/19/2020 To:

DATE

6/22/2020

AMOUNT

| | ame of Contributor hine Blow | | | МО | DAY | YEAR | |
|--------|-----------------------------------|-------|-------------------|----|-----|------|------------------|
| Mailin | g Address 5424 Checter Ave | | | | | | \$ 100.00 |
| City | PHILADELPHIA | State | Zip Code (Plus 4) | 6 | 4 | 2020 | |
| | | PA | 19143 | | | | |

PAGE TOTAL

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

\$ 100.00

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 | | | |
|---|----------------|----------|------------|------------|---------------|------|-------------|
| MCCLINTON, JOANNA FRIENDS OF | | | From: | <u>5/1</u> | <u>9/2020</u> | То: | 6/22/2020 |
| | | | | DA | TE | | AMOUNT |
| Full Name of Contributing Committee | | | | мо | DAY | YEAR | |
| Penn Osteopathic Med | | | | | | | \$ 1,500.00 |
| Mailing Address 1330 Eisenhower Blv | d | | | 6 | 4 | 2020 | |
| City HARRISBURG | State | Zip Code | e (Plus 4) | | · | | |
| | PA | 17111 | | | | | |
| Full Name of Contributing Committee Represent PAC | | | | МО | DAY | YEAR | \$ 1,000.00 |
| Mailing Address 1735 Market Street S | Ste A480 | | | | _ | 2020 | 1,000.00 |
| City PHILADELPHIA | State | Zip Code | e (Plus 4) | 6 | 4 | 2020 | |
| • | PA | 19103 | | | | | |
| Full Name of Contributing Committee | | | | мо | DAY | YEAR | |
| BUCHANAN INGERSOLL& ROONEY COM | EFF STATE GVT | | | 1-10 | DAI | LAK | \$ 500.00 |
| Mailing Address ONE OXFD CTR 5010 | GRANT ST 20 FL | | | 6 | 4 | 2020 | 7 300100 |
| City PITTSBURGH | State | Zip Code | e (Plus 4) | 0 | | 2020 | |
| | PA | 15219- | 1410 | | | | |
| Full Name of Contributing Committee | | | | мо | DAY | YEAR | |
| K & L Gates. LLP | | | | 110 | JA! | ILAK | \$ 300.00 |
| Mailing Address 210 6TH Ave | | | | 6 | 4 | 2020 | |
| City PITTSBURGH | State | Zip Code | e (Plus 4) | 0 | 7 | 2020 | |
| | PA | 15222 | | | | | |
| | | | | | | ſ | DACE TOTAL |

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

PAGE TOTAL \$ 3,300.00

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: | | | То: | | | |
| | | | | | D | ATE | | | АМ | OUNT | |
| Full Name of Contributor | | | | | МО | DAY | YEAI | R | \$ | | 0.00 |
| Mailing Address | | | | | | | | | | | |
| City | State | Zip | Code (Plus | s 4) | | | | | | | |
| Employer Name | | | | | Occupa | tion | | | | | |
| Employer Mailing Address/Principal Plac | e of Business | | City | | • | State | | z | ip Code | (Plus 4) | |
| Enter Grand Total of Part C on Schee | dule I, Detailed Su | umm | nary Page, | Section | on 3. | | | | PA | GE TOTA | L |
| | | | | | | | | \$ | | 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: | | | То: | | |
| | | • | | D | ATE | | | AMOUNT |
| Full Name | | | | мо | DAY | YEAR | \$ | 0.00 |
| Mailing Address | | | | | | | 7 | |
| City | State | Zip Code (Plu | ıs 4) | | | | | |
| Receipt Description | <u>'</u> | <u>'</u> | | | • | | | |
| Futor Curred Total of Bout | For Cabadula I Batailad | I Comment Page Co | | 4 | | | | PAGE TOTAL |
| Enter Grand Total of Part | E on Schedule 1, 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 Perio | d | |
|--|-----------------|-----------------------------|------------------|
| MCCLINTON, JOANNA FRIENDS OF | From: | <u>5/19/2020</u> To: | <u>6/22/2020</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 Candidate | | | 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 | | | | Rep | porting | Period | | | |
|---|------------------|------|------------------|--------|---------|--------------|--------|-------|-----------------|
| | | | | Fro | m: | | То: | | |
| | | | | | | 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 | у | State | e Zip | Code(Plus 4) | Descri | ption | of Contribution |
| Enter Grand Total of Part G on Sch | edule II, In-Kin | nd C | Contributions D | etaile | ed | | | | PAGE TOTAL |
| Summary Page, Section 3. | | | | | | | | | 0.00 |

SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate | Reporting Pe | eriod | | |
|---------------------------------------|--------------|-----------|-----|------------------|
| MCCLINTON, JOANNA FRIENDS OF | From | 5/19/2020 | То: | <u>6/22/2020</u> |

| | | | | DATE | | | AMOUNT |
|--|-------------------------------|-----------------------------------|--|---|--|-----------|------------|
| To Whom Paid | | | МО | DAY | YEAR | | |
| M F Strategies, LLC | | | | | | | |
| Mailing Address P O Box 439 | | | 5 | 20 | 2020 | \$ | 1,500.00 |
| City Harrisburg | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | |
| | PA | 17108 | Monthly | Retainer/ | May 2020 |) | |
| To Whom Paid | | | мо | DAY | YEAR | | |
| M F Strategies, LLC | | | 140 | | ILAK | | |
| Mailing Address P O Box 439 | | | 6 | 20 | 2020 | \$ | 1,500.00 |
| City Harrisburg | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | |
| | PA | 17108 | Monthly | Retainer/. | June 202 | 0 | |
| To Whom Paid | | | мо | DAY | YEAR | | |
| Joanna McClinton | | | MO | | ILAK | | |
| Mailing Address 6021 Washington A | ve | | 6 | 5 | 2020 | \$ | 2,200.00 |
| City Philadelphia | State | Zip Code (Plus 4) | Descript | tion of Exp | enditure | | |
| | PA | 19143 | Reimbu | rsement/3 | rd Ward I | Reelectio | n Campaign |
| To Whom Paid | | | | | | | |
| | | | MO | DAV | VEAD | | |
| Committee to Elect Darisha K. Parker | | | МО | DAY | YEAR | | |
| | eet Ste 3900 | | MO 5 | DAY 28 | YEAR 2020 | \$ | 500.00 |
| Committee to Elect Darisha K. Parker | eet Ste 3900 | Zip Code (Plus 4) | 5 | | 2020 | \$ | 500.00 |
| Committee to Elect Darisha K. Parker Mailing Address 7715 Crittenden Str | <u> </u> | Zip Code (Plus 4) 19118 | 5 | 28 | 2020 | \$ | 500.00 |
| Committee to Elect Darisha K. Parker Mailing Address 7715 Crittenden Str | State | | 5 Descript Donatio | 28 tion of Exp | 2020 enditure | \$ | 500.00 |
| Committee to Elect Darisha K. Parker Mailing Address 7715 Crittenden Str City Philadelphia | State PA | | 5 Descript | 28 | 2020 | \$ | 500.00 |
| Committee to Elect Darisha K. Parker Mailing Address 7715 Crittenden Str City Philadelphia To Whom Paid | State PA nities | | 5 Descript Donatio | 28 tion of Exp | 2020 enditure | \$ | 500.00 |
| Committee to Elect Darisha K. Parker Mailing Address 7715 Crittenden Str City Philadelphia To Whom Paid Green For Safe & Accountable Commun | State PA nities | | Descript Donatio | 28 tion of Exp | 2020 enditure YEAR 2020 | | |
| Committee to Elect Darisha K. Parker Mailing Address 7715 Crittenden Str City Philadelphia To Whom Paid Green For Safe & Accountable Commun. Mailing Address 3131 Spangler Street | State PA nities | 19118 | Descript Donatio | 28 tion of Exp DAY 28 tion of Exp | 2020 enditure YEAR 2020 | | |
| Committee to Elect Darisha K. Parker Mailing Address 7715 Crittenden Str City Philadelphia To Whom Paid Green For Safe & Accountable Commun. Mailing Address 3131 Spangler Street | State PA nities et State | 19118 Zip Code (Plus 4) | Description Mo Description Donatio | 28 tion of Exp DAY 28 tion of Exp | 2020 enditure YEAR 2020 enditure | | |
| Committee to Elect Darisha K. Parker Mailing Address 7715 Crittenden Str City Philadelphia To Whom Paid Green For Safe & Accountable Communum Mailing Address 3131 Spangler Street City Philadelphia | State PA nities et State | 19118 Zip Code (Plus 4) | Description MO 5 | 28 tion of Exp DAY 28 tion of Exp | 2020 enditure YEAR 2020 | | |
| Committee to Elect Darisha K. Parker Mailing Address 7715 Crittenden Str City Philadelphia To Whom Paid Green For Safe & Accountable Commun Mailing Address 3131 Spangler Street City Philadelphia To Whom Paid | State PA nities et State PA | 19118 Zip Code (Plus 4) | Description Mo Description Donatio | 28 tion of Exp DAY 28 tion of Exp | 2020 enditure YEAR 2020 enditure | | |
| Committee to Elect Darisha K. Parker Mailing Address 7715 Crittenden Str City Philadelphia To Whom Paid Green For Safe & Accountable Commun Mailing Address 3131 Spangler Street City Philadelphia To Whom Paid Sims4PA Pac | State PA nities et State PA | 19118 Zip Code (Plus 4) | Description MO Description MO MO 5 Description MO 5 | 28 tion of Exp n DAY 28 tion of Exp n | 2020 enditure YEAR 2020 enditure YEAR 2020 | \$ | 500.00 |

| , | | | | | | | |
|--|------------------------|-------------------------|--|-----|------|----|------------|
| To Whom Paid Citizens For Jake Wheatley | | | мо | DAY | YEAR | | |
| | | | | | | | |
| Mailing Address P O Box 53044 | | | 5 | 21 | 2020 | \$ | 500.00 |
| City Pittsburgh | State | Zip Code (Plus 4) | Description of Expenditure | | | | |
| | PA | 15219 | Donation | | | | |
| To Whom Paid | | | мо | DAY | YEAR | | |
| Democratic City Committee | | | МО | DAT | TEAR | | |
| Mailing Address 219 Spring Garden Street | | | 5 | 21 | 2020 | \$ | 1,000.00 |
| City Philadelphia | State | Zip Code (Plus 4) | Description of Expenditure | | | | |
| | PA | 19123 | Donation | | | | |
| To Whom Paid | | | МО | DAY | YEAR | | |
| Chadderdon Lestingi Creative Strategies | | | МО | | ILAK | | |
| Mailing Address 901 North Washington Street #320 | | | 5 | 21 | 2020 | \$ | 1,000.00 |
| City Alexandria | State | Zip Code (Plus 4) | Description of Expenditure | | | | |
| | VA | 22314 | Production& Design/Logo/Prospectus Package | | | | |
| To Whom Paid | | | мо | DAY | YEAR | | |
| Priya Ahmad | | | МО | | ILAK | | |
| Mailing Address 405 East Gowen Ave | | | 5 | 21 | 2020 | \$ | 60.00 |
| City Philadelphia | State | Zip Code (Plus 4) | Description of Expenditure | | | | |
| | PA | 19119 | Graphic Design/Happy Hour Fund Raising | | | | |
| | | | | | | | PAGE TOTAL |
| Enter Grand Total of Expen | ditures on Page 1, Rep | port Cover Page, Item D | • | | | \$ | 9,260.00 |
| | | | | | | 1 | • |