Campaign Finance Report

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

Filer Identification 20150217 Number :			Repo Filed		y :	CAI	NDIDATE COMM		1ITTEE	✓	LOBI	BYIST								
Name of Filing C	ommittee, Can	didate	e or Lo	bbyis	t:	, 	MCCL	IN	ΓΟN,	JOAN	INA	FRIEN	DS (OF						
Street Address:	PO BOX 16	5668																		
City:	PHILADELF	PHIA								State	:	PA		Zip Cod	le: 19	139-9	998			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	•	2ND F PRIMA	RIDAY ARY	PRE-	2.		30 DA PRIMA			OST-	3.		AMENDMENT REPORT?		Yes	<u>ן</u> [י	No	/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.		2ND F ELECT	RIDAY TION	PRE-	- 5.		30 DA ELECT		Р	OST-	6. X	(TERMINA REPORT?		Yes		No	/
report type)	ANNUAL REPO	PRT 7.	•	Year	2020					IG ME CHEC		_			PAPER		\checkmark	DIS	KETTE	
Name of Office S	ought by Cand	idate:	!							DAT	E O	F ELE	СТІ	ON	District Number	Office Code	Par	ty Cod	de Coui	
REPRESENTATI	VE IN THE GEI	NERAI	L ASSE	EMBLY	Y					МО		DAY	Y	EAR	191	STH	DEN	1	51	
											11	. 3 2020 (si			(SEE INS	TRUCTI	ONS FO	R CODES	5)	
Summary of Expenditures		י וי	МО	DA		YEAR	20	T	`	МО		DAY		EAR	FO	R OFFIC	E USE	ONL	4	
A Amount Bro	unht Famuaud F			0	20		20	- '	1		11	4	23	2020						
A. Amount Bro				•	From	Sched	lule I	.)	\$ \$					326.41 450.00						
C. Total Funds Available (Sum Of Lines A and B) \$ 34,776.41																				
D. Total Expenditures (From Schedule III) \$											14,	644.01								
E. Ending Cash Balance (Subtract Line D From Line C)							\$				20,	132.40								
F. Value Of In-	Kind Contribut	ions R	eceive	d (Fr	om Sc	hedule	e II)		\$					0.00						
G. Unpaid Debt	s And Obligation	ons (F	rom S	chedu	ıle IV)	١			\$					0.00						
						AFFI	[DA\	/IT	SE	CTIC	DΝ									
PART I - If this is	a Committee	report	t, treas	surer	sign h	ere. If	f this	is	a Can	didat	e re	port, c	and	idate sig	ın here.					
I swear (or affirm) correct and complete		includ	ing the	attach	ed sch	edules	filed (on p	aper	or by e	electr	onic m	ediun	n, are to t	he best o	f my knov	rledge	and b	elief , tr	rue
Sworn to and subs	cribed before me day of	this		20										Signature	of Perso	1 Submitt	ing Rep	ort		_
	Sigr	nature		' '					•						Prin	ted Name				
My Commission Ex	pires								_		•				Emai	il				
	мо		DA	Υ		YR						Are	ea Co	de	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a c	andid	late's a	utho	rized (Commi	ittee,	, Ca	ndid	ate sl	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende		of my	knowle	dge an	ıd belie	f this p	politic	al d	ommi	ittee h	as no	ot viola	ted a	ny provisi	ions of the	e act of Ju	ne 3,1	937 (F	.L. 133	3,
Sworn to and subsc	ribed before me t day of	this		20										Si	ignature o	of Candida	te			-
	<u> </u>			20											Printe	d Name				- $ $
My Commission Exp	Signatu	ıre									-				Ema	iI				-
																				_
	МО		DA	Y		YR						Area	Code		Da	ytime Te	lephor	e Nun	ıber	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
MCCLINTON, JOANNA FRIENDS OF	From:	10/20/202	<u>20</u> To:	11/23/2020
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)			\$	950.00
All Other Contributions (Part B)	\$	0.00		
TOTAL for the Reporting	(2)	\$	950.00	
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	11,500.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	11,500.00
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			\$	12,450.00

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	Name of Filing Committee or Candidate					Reporting Period						
MCCLINTON, JOA	NNA FRIENDS OF			Fr	om:	10/20/20) <u>20</u> To :	:	11/23/2020			
					DATE AMOUNT							
Full Name of Contril Philadelphia Counci	=				МО	DAY	YEAR					
Mailing Address	22 South 22nd S	treet 2nd Floor	_		10	28	2020	\$	200.00			
City PHILADELPI	HIA	State PA	Zip Code (Plus	4)								
Full Name of Contributing Committee Committee To Elect Eddie Day Pashinski						DAY	YEAR					
Mailing Address 1089 Wyoming Ave					10	28	2020	\$	250.00			
City Forty Fort		State PA	Zip Code (Plus 4	4)								
Full Name of Contril PA Public Education	=				МО	DAY	YEAR					
Mailing Address	400 Bent Creek B	Blvd			10	28	2020	\$	250.00			
City Mechanicsb	urg	State PA	Zip Code (Plus of 17050	4)								
	Full Name of Contributing Committee INDEPENDENCE BLUE CROSS PAC (IBC PAC)				МО	DAY	YEAR					
Mailing Address	1901 MARKET ST	-			10	28	2020	\$	250.00			
City PHILADELPI	HIA	State PA	Zip Code (Plus 4 191031480	4)								

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

PAGE TOTAL 950.00

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 Candida	Name of Filing Committee or Candidate				Reporting Period						
			From:			To					
		AMOUNT									
Full Name of Contributor					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.

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	me of Filing Committee or Candidate Re						
MCCLINTON, JOANNA FRIENDS OF			From:	10/2	<u> 10/2020</u>	То:	11/23/2020
				DA	TE		AMOUNT
Full Name of Contributing Committee Milton Schneider				МО	DAY	YEAR	\$ 2,500.00
Mailing Address 345 Fishers Road				10	23	2020	_,
City Bryn Mawr	State PA	Zip Code 19010	e (Plus 4)				
Full Name of Contributing Committee ABBOTT LABORATORIES EMPL PAC (AEF	PAC)			МО	DAY	YEAR	\$ 500.00
Mailing Address 100 ABBOTT PK RD [· · ·			10	23	2020	
City ABBOTT PARK	State IL	Zip Code 600646	e (Plus 4) 028				
Full Name of Contributing Committee TRIAD STRATEGIES PA PAC		мо	DAY	YEAR	\$ 500.00		
Mailing Address 300 N 2ND ST, STE 600				10	23	2020	300.00
City HARRISBURG	State PA	Zip Code 17101	e (Plus 4)				
Full Name of Contributing Committee COMCAST CORP & NBCUNIVERSAL PAC	- USA			мо	DAY	YEAR	\$ 500.00
Mailing Address 1701 JFK BLVD				10	23	2020	300.00
City PHILADELPHIA	State PA	Zip Code 191030	(Plus 4)				
Full Name of Contributing Committee Pennsynvia Sierra Club, PAC				МО	DAY	YEAR	\$ 3,000.00
Mailing Address 225 Market Street St	e 501			10	23	2020	,
City HARRISBURG	State PA	Zip Code 17101	e (Plus 4)				
Full Name of Contributing Committee Altria Group, Inc				мо	DAY	YEAR	\$ 1,000.00
Mailing Address 101 CONSTITUTION	AVE, NW, STE 400 EA	AST		10	23	2020	1,000.00
City WASHINGTON	State DC	Zip Code 20001	e (Plus 4)				

Full Name of Contributing Committee						
BRICKLAYERS/ALLIED CRAFTWORKERS	Local 1 DA/DE		МО	DAY	YEAR	
	· · · · · · · · · · · · · · · · · · ·					\$ 1,000.00
Mailing Address 2706 Black Lake Place	ce T	т	11	1	2020	
City Philadelphia	State	Zip Code (Plus 4)				
	PA	19154				
Full Name of Contributing Committee	-	-	мо	DAY	YEAR	
ENTERPRISE HOLDINGS, INC PAC			MO	DAT	TEAR	\$ 500.00
Mailing Address 600 CORPORATE PAR	11	3	2020	300.00		
City ST LOUIS	State	Zip Code (Plus 4)	11	3	2020	
	МО	63105-0000				
Full Name of Contributing Committee	•	•	МО	Day	VEAD	
THE AFFORDABLE EDUCATION PAC	МО	DAY	YEAR	\$ 500.00		
Mailing Address PO BOX 6349			11	3	2020	300100
City HARRISBURG	State	Zip Code (Plus 4)	11		2020	
	PA	17112				
Full Name of Contributing Committee	•					
UnitedHealth Group			МО	DAY	YEAR	\$ 500.00
Mailing Address 800 North 3rd Street	Ste 404		11	3	2020	7 300.00
City HARRISBURG	State	Zip Code (Plus 4)	1		2020	
	PA	17102				
Full Name of Contributing Committee	•	•	мо			
Friends of Mike Carroll				DAY	YEAR	\$ 1,000.00
Mailing Address 401 Park Drive			10	23	2020	1,000.00
City Avoca	State	Zip Code (Plus 4)	10	23	2020	
	PA	18641				
	!					

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

PAGE TOTAL \$ 11,500.00

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:		Т	0:	
				D/	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac	e of Business	City		•	State		Zip (Code (Plus 4)
Enter Grand Total of Part C on Schee	dule I, Detailed Su	ımmary Page,	Section	on 3.			\$	PAGE TOTAL
							4	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:	
				D	ATE		AMOUNT
Full Name				мо	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (I	Plus 4)				
Receipt Description	•	•			•	•	
Futor Count Total of Boot	Fan Cabadula I Batailad	I Comment Base	Castian	4			PAGE TOTAL
Enter Grand Total of Part	e on Schedule I, Detalled	Summary Page,	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 Peri	od								
MCCLINTON, JOANNA FRIENDS OF	From:	<u>10/20/2020</u> To:	11/23/2020							
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	1. 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 PART 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, 1		\$	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 Filing Committee or Candidate					Reporting Period				
			From:			То:				
				DATE			AMOUNT			
Full Name of Contributor			мо	DAY	YEAR					
Mailing Address		_				 		0.00		
City	State	Zip Code (Plus 4)								
Description of Contribution:		•	•			•				
Enter Grand Total of Part F on Sche Section 2.	dule II, In-Kind (Contributions Detai	iled Sum	mary Pag	je,		PAGE TOTAL			
						\$	(0.00		

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period						
MCCLINTON, JOANNA FRIENDS OF	From	10/20/2020	То:	11/23/2020			

				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
USPS							
Mailing Address 5011 Sansom Str	eet		10	22	2020	\$	6.95
City Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	19139	Certified	d Mail Cycl	e 5		
To Whom Paid			мо	DAY	YEAR		
USPS			MO	DAI	ILAK		
Mailing Address 5011 Sansom Str	eet		10	31	2020	\$	168.00
City Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	19139	Annual	Mailbox Re	ental Fees	5	
To Whom Paid			МО	DAY	YEAR		
HDCC			МО	DAT	TEAR		
Mailing Address P O Box 555			10	31	2020	\$	10,000.00
City Harrisburg	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
-	PA	17108	Donatio	n			
To Whom Paid	•						
Strassheim Graphic Design & Press C	orp.		МО	DAY	YEAR		
Mailing Address 1500 Spring Gard	en Street Ste 225		10	26	2020	\$	158.76
City Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	l	
•	PA	19130	Print Pr	oduction/ (Color Sigr	าร	
To Whom Paid	•	•					
Strassheim Graphic Design & Press C	orp.		МО	DAY	YEAR		
Mailing Address 1500 Spring Gard	en Street Ste 225		10	31	2020	\$	158.76
City Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
·	PA	19130	Print Pr	oduction/ (Color Sigr	าร	
To Whom Paid			МС	DAY	VEAD		
Tyrone Sims			МО	DAY	YEAR		
Mailing Address 2050 Witherspoor	Apt#212		10	31	2020	\$	250.00
City Philadelphia	State	Zip Code (Plus 4)	Descrip	l tion of Exp	enditure		
•	PA	19143	Posting	Flyers			
	1	1 =	1. 5561119	,			

To Whom Paid Joanna McClinton
Joanna McClinton Mailing Address 6021 Washington Ave 10 26 2020 \$ 520. City Philadelphia State PA 19143 Pescription of Expenditure Reimbursement To Whom Paid MFStrategies, LLC Mailing Address P O Box 439 City Harrisburg State Zip Code (Plus 4) Description of Expenditure 10 21 2020 \$ 1,868.
City Philadelphia State PA 19143 Pescription of Expenditure Reimbursement To Whom Paid MFStrategies, LLC Mailing Address PO Box 439 10 21 2020 \$ 1,868. City Harrisburg State Zip Code (Plus 4) Description of Expenditure 2020 Poscription of Expenditure
To Whom Paid MFStrategies, LLC Mailing Address P O Box 439 City Harrisburg PA 19143 Reimbursement MO DAY YEAR 10 21 2020 \$ 1,868.
To Whom Paid MFStrategies, LLC Mailing Address P O Box 439 City Harrisburg State MO DAY YEAR 10 21 2020 \$ 1,868.
MFStrategies, LLC Mailing Address P O Box 439 City Harrisburg State MO DAY YEAR 10 21 2020 \$ 1,868.
MFStrategies, LLC Mailing Address P O Box 439 City Harrisburg State Zip Code (Plus 4) Description of Expenditure
City Harrisburg State Zip Code (Plus 4) Description of Expenditure
PA 17108 Monthly Retainer & Reimbursements
To Whom Paid MO DAY YEAR
MFStrategies, LLC
Mailing Address P O Box 439 11 17 2020 \$ 1,500.
City Harrisburg State Zip Code (Plus 4) Description of Expenditure
PA 17108 Monthly Retainer
To Whom Paid MO DAY YEAR
T D Bank
Mailing Address 121 South Board Street 10 30 2020 \$ 13.
Mailing Address 121 South Board Street 10 30 2020 \$ 13.
Mailing Address 121 South Board Street 10 30 2020 → 13. City Philadelphia State Zip Code (Plus 4) Description of Expenditure
To 30 2020
City Philadelphia State Zip Code (Plus 4) Description of Expenditure