### **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 2018	30159				port		CAND	IDATE		СОМ	<b>ITTEE</b>	<b>✓</b>	LOBB	YIST		
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF NATALIE MIHALEK																	
Street Address:	251 FRANKL	N DRIVE															
City:	UPPER ST CL	AIR						State:	PA			Zip Cod	le: 15	5241			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	. 2	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT?		Yes	No	<b>~</b>	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- 5	5.	30 DA ELECT		POST-	6.		TERMINA REPORT?		Yes	No	<b>/</b>	
report type)	ANNUAL REPORT	7. <b>X</b>	<b>Year</b> 2020					IG METH CHECK C				PAPER	PAPER DISKETT				
Name of Office S	Sought by Candida	rte:	•					DATE (	OF ELE	CTIO	N	District Number	Office Code	Part	y Code	County Code	
								МО	DAY	YE	AR		10000	REP	1	-	
								11		3	2020	(SEE INSTRUCTIONS FOR CODE					
	Receipts and	МО	DAY Y	EAR				МО	DAY	YI	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	from:		11 24	20	020	Т	0	12	2	31	2020						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			2,2	290.81						
B. Total Monet	ary Contributions	And Rec	eipts (From S	che	dule	ı)	\$			2,0	050.00						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			4,3	340.81						
D. Total Expen	ditures (From Sch	edule II	I)				\$			1,1	.87.54						
E. Ending Cash	Balance (Subtra	t Line D	From Line C)				\$			3,1	53.27						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	edul	e II	()	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$				0.00			•			
			F	4FF	IDA	۱۷۶	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign he	re. I	f thi	is is	a Can	didate r	eport, o	candi	date sig	ın here.					
I swear (or affirm) correct and comple	) that this report, inc ete.	luding the	e attached sched	dules	filed	d on	paper o	or by elec	tronic m	edium	, are to t	he best of	f my kno	wledge a	nd belie	f , true	
Sworn to and subs	cribed before me th	s	20							S	ignature	of Persoi	n Submit	ting Rep	ort		
	Signate	ıre					- -					Print	ted Name	e			
My Commission Ex	_											Emai	il				
	мо	D	AY	YR			_		Ar	ea Cod	le	Daytim	e Telepi	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	politi	tical	commi	ittee has	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										s	ignature o	of Candid	ate		<del></del>	
	day of						-					Drinto	d Name			[	
	Signature						-										
My Commission Exp	-											Emai	il				
	МО	D	AY	YR			-		Area	Code		Da	ytime T	elephone	e Numbe	r	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF NATALIE MIHALEK	From:	11/24/202	<u>0</u> To:	12/31/2020
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g Period	(1)	\$	50.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	0.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	g Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	2,000.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	g Period	(3)	\$	2,000.00
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			\$	2,050.00

#### **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 Candidat	e	F	Reporting	Period			
		F	rom:		То	:	
				DATE			AMOUNT
Full Name of Contributing Committee			МО	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.

PAGE TOTAL
0.00

0.00

### **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.

(Exclud	le contributions fron	n political comm	itte	es rep	oorted	in Part	A)		
Name of Filing Committee	or Candidate		Rep	oorting P	eriod				
From: To:						):			
					DATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$	0	.00
City	State	Zip Code (Plus 4)	)						
								PAGE TOTAL	-

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	Reporting I	Period		
FRIENDS OF NATALIE MIHALEK	From:	11/24/2020	To:	12/31/2020

DATE AMOUNT

Full Name of Contributing Committee	Full Name of Contributing Committee				YEAR	
CITIZENS FOR KALL				DAY	ILAK	<b>\$</b> 2,000.00
Mailing Address PO BOX 94	Mailing Address PO BOX 94			24	2020	,,,,,,,
City BEAVER	State	Zip Code (Plus 4)	12		2020	
	PA	15009				

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

**PAGE TOTAL \$** 2,000.00

## 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	1			Repo	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	s 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 Sumn	nary 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:			То:		
		<b>'</b>			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	<b>'</b>						<u> </u>	
	- C		<b>.</b> .:	_				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 Per	iod	
FRIENDS OF NATALIE MIHALEK	From:	<u>11/24/2020</u> <b>To:</b>	<u>12/31/2020</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTO	R	
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					Reporting Period				
			From:			To	:		
				DATE			AMOUNT		
Full Name of Contributor			МО	DAY	YEAR				
Mailing Address						<b>7</b> \$		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 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

## STATEMENT OF EXPENDITURES

Name of Filing Committee or	Candidate	T	Papartir	ng Period					
_			керогы	1g Periou					
FRIENDS OF NATALIE MIHA	LEK		From	11/2	<u>4/2020</u>	То:	12/31/2020		
				DATE			AMOUNT		
To Whom Paid			МО	DAY	YEAR				
US POST OFFICE			110		1 = 1				
Mailing Address 139 EAST	MAIN ST		11 24 2020 \$ 26.3						
City CARNEGIE	State	Zip Code (Plus 4)	Descrip	Description of Expenditure					
	PA	15106	POSTAG	E FOR HO	LIDAY PO	DSTCARDS	5		
To Whom Paid TAR SELF STORAGE			мо	DAY	YEAR				
Mailing Address 3054 WA	SHINGTON RD		12	2	2020	\$	84.80		
City MCMURRAY	State	Zip Code (Plus 4)	Description of Expenditure						
PA 15317				GE UNIT RE	ENTAL FO	OR CAMPA	IGN SIGNS		
To Whom Paid		мо	DAY	YEAR					
CAPITOL PRESERVATION CO	MMITTEE								
Mailing Address 482 MAIN	I CAPITOL BLDG		12	10	2020	\$	196.84		
City HARRISBURG	State	Zip Code (Plus 4)	Description of Expenditure						
	PA	17120							
To Whom Paid			МО	DAY	YEAR				
SHUTTERFLY									
Mailing Address			12	22	2020	<b>\$</b>	110.30		
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
			PICTURES FOR HOLIDAY POSTCARDS (ONLINE MERCHANT)						
To Whom Paid			МО	DAY	YEAR				
FIREHOUSE SUBS									
Mailing Address 126 GALL	ERY DRIVE		12	22	2020	\$	185.46		
City MCMURRAY State Zip Code (Plus 4				Description of Expenditure					
PA 15317				MEETING \	W/ UPPEI	R ST CLAI	R POLICE		
To Whom Paid				DAY	VEAD				
WESBANCO			МО	DAY	YEAR				
Mailing Address 728 WASHINGTON RD				21	2020	\$	3.25		
City PITTSBURGH	City PITTSBURGH State Zip Code (Plus 4)				enditure				

15228

CC SWIFE FEE

PΑ

To Whom Paid				DAY	VEAD	
COLDSPARK  Mailing Address 307 4TH AVE			МО	DAY	YEAR	
			12	24	2020	\$ 577.59
City PITTSBURGH	State	Zip Code (Plus 4)	Description of Expenditure INVOICE			
	PA	15222				
						PAGE TOTAL
nter Grand Total of Expend	litures on Page 1, R	eport Cover Page, Item D				\$
inter Grand Total of Expend	litures on Page 1, R	eport Cover Page, Item D				\$
Enter Grand Total of Expend	litures on Page 1, R	eport Cover Page, Item D				\$ <b>PAGE TOTAL</b> 1,184.59
Enter Grand Total of Expend	litures on Page 1, R	eport Cover Page, Item D				\$
Enter Grand Total of Expenc	litures on Page 1, R	eport Cover Page, Item D				\$
Enter Grand Total of Expend	litures on Page 1, R	eport Cover Page, Item D				\$
Enter Grand Total of Expend	litures on Page 1, R	eport Cover Page, Item D				\$