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 2	20150	217				Repo			CAN	DIE	DATE		СОМ	4ITTEE	✓ [LOB	BYIST		
Name of Filing C	Committee, Ca	ndidat	te or Lo	obbyis	st:		MCCI	LIN	TON,	JOAN	NA I	FRIEN	DS C	F						
Street Address:	PO BOX 1	16668																		
City:	PHILADEI	LPHIA								State		PA			Zip Cod	l e: 19	139-9	998		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		l.	2ND F	RIDAY ARY	PRE-	2		30 DA PRIMA		P	OST-	3.		AMENDM REPORT?		Yes	N	0	√
(place X to the right of	6TH TUESDAY PRE-ELECTION		1.	2ND F	FRIDAY TION	PRE-	- 5		30 DA		P	POST- 6.			TERMINATION REPORT?		Yes	١	0	\
report type)								_			PAPER		√	DISK	ETTE					
Name of Office S	ought by Can	didate):							DATE	OI	F ELE	СТІО	N	District Number	Office Code	Par	ty Cod	e Cour	
										МО		DAY	YE	AR					1	
											11		2	2021		(SEE INS	TRUCTI	ONS FOI	CODES)
Summary of		nd	МО	DA	Y	YEAR				МО		DAY	YE	AR	FO	R OFFIC	E USE	ONLY	7	
Expenditures	from:			3	30	20	21	T	0		5		3	2021						
A. Amount Bro	ught Forward	From	Last R	eport					\$				79,0	72.36						
B. Total Monet	ary Contributi	ions Aı	nd Rec	eipts ((From	Sched	lule :	I)	\$				11,6	500.00						
C. Total Funds	Available (Su	m Of L	ines A	and B	3)				\$				90,6	572.36						
D. Total Expend	ditures (From	Sched	dule II	I)					\$				19,9	12.08						
E. Ending Cash	Balance (Sub	tract l	Line D	From	Line C)			\$				70,7	60.28						
F. Value Of In-	Kind Contribu	itions I	Receive	ed (Fr	om Sc	hedul	e II)		\$					0.00						
G. Unpaid Debt	s And Obligat	tions (From S	Schedu	ıle IV))			\$					0.00		,				
						AFFI	[DA]	VI	ΓSE	CTIO	N									
PART I - If this is		-	•		_							-		_						
I swear (or affirm) correct and complete		t, inclu	ding the	attach	ned sch	edules	filed	on į	paper	or by el	ectr	onic m	edium	, are to t	the best of	my knov	vledge	and be	lief , tr	ue
Sworn to and subs	cribed before m day of	e this		20							-		S	ignature	of Perso	n Submitt	ing Re _l	ort		
	Sig	gnature	1	-					-		-				Prin	ed Name				-
My Commission Ex	cpires								_		-				Emai	I				
	МО		DA	AY		YR						Are	ea Cod	le	Daytim	e Teleph	one Nu	mber		$\underline{\ \ }$
Part II- If this is	a report of a	candi	date's	autho	rized (Comm	ittee	, Ca	andid	ate sh	all s	sign he	ere.							
I swear (or affirm) No 320) as amende		st of my	knowle	edge an	nd belie	f this p	politi	cal	comm	ittee ha	s no	t viola	ted an	y provis	ions of the	act of Ju	ine 3,1	937 (P	.L. 133	з,
Sworn to and subsc	ribed before me	e this		20										S	ignature o	f Candida	ite			_
									•						Printe	d Name				-
	Signa	ture							•		_									_
My Commission Exp	ires														Ema	il				
		0	DA	AY		YR						Area	Code		Da	ytime Te	elephor	ne Num	ber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
MCCLINTON, JOANNA FRIENDS OF	From:	3/30/202	<u>1</u> To:	<u>5/3/2021</u>
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)			\$	0.00
All Other Contributions (Part B)			\$	100.00
TOTAL for the Reporting	Period	(2)	\$	100.00
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 Pa			\$	11,600.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate value		\$2) in the			
Name of Filing Committee or Candidate				From:			:	
					DATE			AMOUNT
Full Name of Contribut	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	!	I	!		<u> </u>			DAGE TOTAL

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

PAGE TOTAL
\$ 0.00

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: 3/30/2021 To:

DATE

5/3/2021

AMOUNT

Full Name of Contributor Ursula Korneitchouk Pod					DAY	YEAR	
Mailin	Mailing Address 1890 E 107th Street Apt#1103						\$ 100.00
City	Cleveland	State OH	Zip Code (Plus 4) 44106	4	16	2021	

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

PAGE TOTAL \$ 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	rting Period					
MCCLINTON, JOANNA FRIENDS OF			From:	<u>3/3</u>	0/2021	То:	<u>5/3/2021</u>		
				DA	TE		AMOUNT		
Full Name of Contributing Committee Daune Morris LLP Government				МО	DAY	YEAR			
Mailing Address 30 SOUTH 17TH ST							\$ 1,500.00		
City Philadelphia	State PA	Zip Code 19103	e (Plus 4)	4	5	2021			
Full Name of Contributing Committee Pennsylvania Seiu Cope				мо	DAY	YEAR			
Mailing Address 1500 North 2nd Stre City HARRISBURG	eet 2floor Ste 11 State PA	Zip Code 17102	e (Plus 4)	4	5	2021	\$ 1,000.00		
Full Name of Contributing Committee Saul Ewing Arnstein & Lehr LLP				МО	DAY	YEAR			
Mailing Address 1500 Market Street 3	38th Floor						\$ 500.00		
City PHILADELPHIA	State PA	Zip Code 191020	e (Plus 4)	4	5	2021			
Full Name of Contributing Committee Pennsylvania SFA PAC		•		МО	DAY	YEAR			
Mailing Address 1400 North Providen City Media	State PA	Zip Code 19063	e (Plus 4)	4	16	2021	\$ 2,500.00		
Full Name of Contributing Committee Pennsylvania Academy Of Family Physic	cians, PAC	•		МО	DAY	YEAR			
Mailing Address 2704 Commerce Driv	ve, Ste A						\$ 1,000.00		
City HARRISBURG	State PA	Zip Code 17110	e (Plus 4)	4	16	2021			

Full Name of Contributing Committee REAL JUSTICE PAC	МО	DAY	YEAR			
Mailing Address 3041 Mission Street #	Mailing Address 3041 Mission Street #327					\$ 5,000.00
City SAN FRANCISCO	State CA	Zip Code (Plus 4) 94110	4	22	2021	

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	ame of Filing Committee or Candidate			Reporting Period						
			Fron	From:				То:		
				D/	ATE		Þ	MOUNT		
Full Name of Contributor				МО	DAY	YEAR				
Mailing Address							\$		0.00	
City	State	Zip Code (Plu	s 4)							
Employer Name				Occupat	tion					
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Co	de (Plus 4)		
Enter Grand Total of Part C on Sche	dule I, Detailed Sເ	ımmary 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		Reporting Period					
			From:			To:		
				D	ATE			AMOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	-	•		•	•			
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			,	PAGE TOTAL
	m Schedule 1, Betailet	<i>z 5</i> 4a. y 1 4 9 0,	Section				\$	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	od	
MCCLINTON, JOANNA FRIENDS OF	From:	3/30/2021 To:	<u>5/3/2021</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTOR	l .	
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 Candid	ate		Reporting	g Period			
			From:			To:	
				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 S	chedule II, In-Kir	nd Contributions Deta	iled Sum	mary Pag	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	Name of Filing Committee or Candidate				Re	porting	Period				
					From:			То:	То:		
					•		DATE			AMOUNT	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address									\$	0.00	
City	State		Zip Code(I	Plus 4)							
Employer of Contributor	-1		•			Occupa	ation				
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution	
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, I	in-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00	

STATEMENT OF EXPENDITURES

City Philadelphia				Description of Expenditure						
	State	Zip Code (Plus 4)			<u></u>					
Mailing Address P O Box 40606			4	30	2021	\$	1,000.00			
Friends Of Judge Dumas For Commonwealth				DAT	TEAK					
To Whom Paid			МО	DAY	YEAR					
	PA	17108	Apr Re	Apr Retainer and Reimbursement inv#1537						
City Harrisburg	State	Zip Code (Plus 4)	Descrip	otion of Exp						
Mailing Address P O BOX 439				3	2021	\$	5,105.60			
M F Strategies, LLC						_				
To Whom Paid			мо	DAY	YEAR					
	'^	1,100	Fig. Retainer and Reimbursement inv#1330							
City Harrisburg	PA	Zip Code (Plus 4) 17108	Descrip	Description of Expenditure Mar Retainer and Reimbursement inv#1536						
at:	State	Zin Code (Blue 4)	5			\$	4,566.37			
Mailing Address P O BOX 439				3	2021	-	A E66 27			
M F Strategies, LLC				DAY	YEAR					
To Whom Paid										
Harrisburg	PA	17108	_ _ ·	Feb Retainer and Reimbursement inv#1535						
City Harrisburg	State	Zip Code (Plus 4)	Descri	Description of Expenditure						
Mailing Address P O BOX 439				3	2021	\$	4,802.50			
To Whom Paid M F Strategies, LLC				DAY	YEAR					
City Washington	DC	20005	Descrip	otion of Exp						
City	State	Zip Code (Plus 4)	+			\$	1,406.40			
Mailing Address 1445 New York Ave NW Ste 200				10	2021	-	1 406 40			
NGP VAN, Inc.			МО	DAY	YEAR					
To Whom Paid										
				DATE			AMOUNT			
MCCLINTON, JOANNA FRIENDS OF			From	3/30	0/2021	То:	5/3/2021			
Name of Filing Committee or Candidate				Reporting Period						
Name of Filing Committee or C										

19107

Donation

PA

							PAC	∍E 13	
To Whom Paid				МО	DAY	YEAR			
Friends of Paige Cognetti									
Mailing Address P O Box 20134				4	30	2021	\$	500.00	
City Scranton		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		PA	18502	Donation					
To Whom Paid Family and Friends of Janet Diaz				МО	DAY	YEAR			
Mailing Address 1653 Lititz Pike #207				4	30	2021	\$	250.00	
City Lancaster		State	Zip Code (Plus 4)	Description of Expenditure					
Ediledatei		PA	17601	Donation					
To Whom Paid Friends of Wendi Barish				МО	DAY	YEAR			
Mailing Address 615 Chestnut Street				4	30	2021	\$	250.00	
City Philadelp	hia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
·		PA	19106	Donation					
To Whom Paid Friends of Marty Flynn				мо	DAY	YEAR			
Mailing Address P O Box 91				4	30	2021	\$	1,000.00	
City Scranton		State	Zip Code (Plus 4)	Description of Expenditure					
		PA	18504	Donation					
To Whom Paid Joanna McClinton				МО	DAY	YEAR			
Mailing Address 6021 Washington Ave				4	30	2021	\$	431.21	
City Philadelp	hia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		PA	19143		ttsburgh Trip				
To Whom Paid Community Solutions, CDC				МО	DAY	YEAR			
Mailing Address 6010 Cedarhurst Street				4	12	2021	\$	200.00	
City Philadelphia State			1	Description of Expenditure					
City Philadelp	hia	State	Zip Code (Plus 4)	Descrip	otion of Exp	enditure			

To Whom Paid Friends of Rohan Hepkins			мо	DAY	YEAR		
Mailing Address P O Box 5504			4	12	2021	\$	200.00
City Yeadon	State PA	Zip Code (Plus 4) 19050	Description of Expenditure Donation				
To Whom Paid Building Back A Better Yeadon, PAC			МО	DAY	YEAR		
Mailing Address 45 North Union Avenue			4	12	2021	\$	200.00
City Lansdowne	State PA	Zip Code (Plus 4) 19050	Description of Expenditure Donation				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
Lines Grand Total of Expenditures on Page 1, Report Cover Page, Item D.					\$	19,912.08	