

# Campaign Finance Report

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

<b>Filer Identification Number :</b>		20150217		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>		
<b>Name of Filing Committee, Candidate or Lobbyist:</b> MCCLINTON, JOANNA FRIENDS OF												
<b>Street Address:</b> PO BOX 16668												
<b>City:</b> PHILADELPHIA						<b>State:</b> PA			<b>Zip Code:</b> 19139-9998			
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2021	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>				
<b>Name of Office Sought by Candidate:</b>						<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	DEM 51			
						11	2	2021	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>					
				10	19	2021	<b>TO</b>	11	12	2021		
<b>A. Amount Brought Forward From Last Report</b>						\$ 277,454.25						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 50,500.00						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 327,954.25						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 26,540.76						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 301,413.49						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$ 0.00						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$ 0.00						

## AFFIDAVIT SECTION

**PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.**

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.**

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
Detailed Summary Page

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
MCCLINTON, JOANNA FRIENDS OF	From: <u>10/19/2021</u> To: <u>11/12/2021</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 0.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 0.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 50,500.00
<b>All Other Contributions (Part D)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 50,500.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)</b>	\$ 50,500.00
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<div>PART A</div> <div>CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES</div> <div>\$50.01 TO \$250.00</div> <div>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.</div>						
Name of Filing Committee or Candidate				Reporting Period		
				From:		To:
				DATE		AMOUNT
Full Name of Contributing Committee				MO	DAY	YEAR
Mailing Address						\$ 0.00
City	State	Zip Code (Plus 4)				
						<div>PAGE TOTAL</div> <div>\$ 0.00</div>
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.**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
MCCLINTON, JOANNA FRIENDS OF	<b>From:</b> <u>10/19/2021</u> <b>To:</b> <u>11/12/2021</u>

				DATE		AMOUNT	
Full Name of Contributing Committee GAINT EAGLE, INC				MO	DAY	YEAR	\$ 5,000.00
Mailing Address 101 KAPPA DRIVE				11	9	2021	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15238					
Full Name of Contributing Committee PA ARCHITECTS PAC				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 240 N 3RD ST 12TH FL				11	16	2021	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101					
Full Name of Contributing Committee HEALTH PARTNERS OF PHILADELPHIA				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 901 MARKET ST SUITE 500				11	4	2021	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19107					
Full Name of Contributing Committee INDEPENDENCE BLUE CROSS PAC (IBC PAC)				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 1901 MARKET ST				11	4	2021	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191031480					
Full Name of Contributing Committee INDEPENDENCE BLUE CROSS PAC (IBC PAC)				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 1901 MARKET ST				11	4	2021	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191031480					

Full Name of Contributing Committee PENNSYLVANIA OPTOMETRIC PAC			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 218 NORTH STREET			11	4	2021	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101				
Full Name of Contributing Committee COMCAST CORP & NBC UNIVERSAL PAC-USA			MO	DAY	YEAR	\$ 2,500.00
Mailing Address 1701 JFK BLVD			11	4	2021	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191030000				
Full Name of Contributing Committee K & L GATES, LLP			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 210 6TH AVE			11	4	2021	
City PITTSBURGH	State PA	Zip Code (Plus 4) 152220000				
Full Name of Contributing Committee PNC PAC			MO	DAY	YEAR	\$ 2,500.00
Mailing Address 800 17TH STREET NW 12 FLOOR			11	4	2021	
City WASHINGTON	State DC	Zip Code (Plus 4) 20006				
Full Name of Contributing Committee FEINBERG SHOPP PAC			MO	DAY	YEAR	\$ 1,000.00
Mailing Address PO BOX 3			11	4	2021	
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17055				
Full Name of Contributing Committee ERIE INSURANCE PAC			MO	DAY	YEAR	\$ 2,500.00
Mailing Address 100 ERIE INSURANCE PLAZA			11	4	2021	
City ERIE	State PA	Zip Code (Plus 4) 165300000				

Full Name of Contributing Committee PPG INDUSTRIES, INC			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 1 PPG PLACE			11	4	2021	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15272				
Full Name of Contributing Committee PENN OSTEOPATHIC MED			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 1330 EISENHOWER BLVD			11	4	2021	
City HARRISBURG	State PA	Zip Code (Plus 4) 17111				
Full Name of Contributing Committee PECO PAC			MO	DAY	YEAR	\$ 1,500.00
Mailing Address 2301 MARKET ST S14-2			11	4	2021	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19130				
Full Name of Contributing Committee GREATER PA CARPENTERS PEC			MO	DAY	YEAR	\$ 20,000.00
Mailing Address 1803 SPRING GARDEN STREET			10	24	2021	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19130				
Full Name of Contributing Committee TRIAD STRATEGIES PA PAC			MO	DAY	YEAR	\$ 2,500.00
Mailing Address 300 N 2ND ST STE 1200			10	24	2021	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101				
Full Name of Contributing Committee AQUA AMERICA INC H2O PAC (FEDERAL PAC)			MO	DAY	YEAR	\$ 2,500.00
Mailing Address 762 W LANCASTER AVE			10	29	2021	
City BRYN MAWR	State PA	Zip Code (Plus 4) 190103489				

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 2,500.00
PA ASSN OF NURSE ANESTHETISTS PAC						
Mailing Address 400 W. WILSON BRIDGE ROAD			10	29	2021	
City WORTHINGTON	State OH	Zip Code (Plus 4) 430852259				

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

<b>PAGE TOTAL</b>
\$ 50,500.00



PART D  
**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	Reporting Period	
	From:	To:

			DATE	AMOUNT		
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 0.00

PART E  
**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:

			DATE			AMOUNT	
Full Name			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					
Receipt Description							

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
MCCLINTON, JOANNA FRIENDS OF		From: <u>10/19/2021</u> To: <u>11/12/2021</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)		\$	0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)		\$	0.00
<b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period (3)		\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)		\$	0.00

**SCHEDULE II**  
**PART F**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OF \$50.01 TO \$250.00**

Name of Filing Committee or Candidate	Reporting Period  From: <span style="float: right;">To:</span>
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						<b>PAGE TOTAL</b>  \$ 0.00

**SCHEDULE II**  
**PART G**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OVER \$250.00**

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
MCCLINTON, JOANNA FRIENDS OF	From <u>10/19/2021</u> To: <u>11/12/2021</u>

DATE				AMOUNT		
To Whom Paid MFSTRATEGIES, LLC			MO	DAY	YEAR	\$ 7,007.52
Mailing Address PO BOX 439			10	22	2021	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure RETAINER & REIMBURSEMENT 10/21			
To Whom Paid MFSTRATEGIES, LLC			MO	DAY	YEAR	\$ 10,051.88
Mailing Address PO BOX 439			11	22	2021	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure RETAINER & REIMBURSEMENT 11/21			
To Whom Paid USPS			MO	DAY	YEAR	\$ 204.00
Mailing Address 5011 SANSOM STREET			10	30	2021	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19139	Description of Expenditure ANNUAL MAILBOX RENTAL FEES			
To Whom Paid JOANNA MCCLINTON			MO	DAY	YEAR	\$ 264.36
Mailing Address 6021 WASHINGTON AVE			10	21	2021	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19143	Description of Expenditure REIMBURSEMENT TRIP TO PITTSBURGH			
To Whom Paid SHIELDS FOR JUDGE			MO	DAY	YEAR	\$ 500.00
Mailing Address 111 NORTH CEGAR CREST BLVD			10	19	2021	
City ALLENTOWN	State PA	Zip Code (Plus 4) 18104	Description of Expenditure DONATION			

To Whom Paid FRIENDS OF ANTONETTA STANCU			MO	DAY	YEAR	\$ 500.00
Mailing Address 3410 YORK ROAD			11	19	2021	
City FURLONG	State PA	Zip Code (Plus 4) 18925	Description of Expenditure DONATION			

To Whom Paid JUDGE LANE FOR SUPERIOR COURT			MO	DAY	YEAR	\$ 1,000.00
Mailing Address PO BOX 15951			11	19	2021	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103	Description of Expenditure DONATION			

To Whom Paid SUMMER LEE EXPLORATORY COMMITTEE			MO	DAY	YEAR	\$ 1,000.00
Mailing Address PO BOX 15320			11	19	2021	
City WASHINGTON	State DC	Zip Code (Plus 4) 20003	Description of Expenditure DONATION			

To Whom Paid TAMIR HARPER			MO	DAY	YEAR	\$ 600.00
Mailing Address 6167 GRAYS AVE			11	19	2021	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19142	Description of Expenditure ELECTION DAY SERVICES/DRIVER			

To Whom Paid ARMAH FAHNBULLEH			MO	DAY	YEAR	\$ 5,000.00
Mailing Address 221 SOUTH 62ND STREET			11	1	2021	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19139	Description of Expenditure PROFESSIONAL SVS, TREASURER JAN-NOV 2021			

To Whom Paid DESAEREE JONES			MO	DAY	YEAR	\$ 400.00
Mailing Address 5617 WASHINGTON AVE			10	26	2021	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19143	Description of Expenditure PARTIAL CONTRIBUTION REFUND			

<b>To Whom Paid</b> TD BANK			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 121 SOUTH BOARD STREET			10	29	2021	
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19101	<b>Description of Expenditure</b> MONTHLY MAINTENANCE FEES OCTOBER 2021			
<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b> \$ 26,540.76



