

Campaign Finance Report

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

Filer Identification Number :		20200122		Report Filed By :		CANDIDATE		COMMITTEE		✓		LOBBYIST	
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF HEATHER MACDONALD													
Street Address: 4900 CARLISLE PIKE,PMB #401													
City: MECHANICSBURG						State: PA				Zip Code: 17050			
TYPE OF REPORT (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			
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes		No	✓		
	ANNUAL REPORT	7. X	Year 2021	FILING METHOD () CHECK ONE			PAPER	✓	DISKETTE				
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code	
						MO	DAY	YEAR	DEM 21				
						11	2	2021	(SEE INSTRUCTIONS FOR CODES)				
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY				
		11	23	2021		12	31	2021					
A. Amount Brought Forward From Last Report						\$ 12,134.78							
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 833.00							
C. Total Funds Available (Sum Of Lines A and B)						\$ 12,967.78							
D. Total Expenditures (From Schedule III)						\$ 1,296.68							
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 11,671.10							
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 21.60							
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 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

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF HEATHER MACDONALD	From: <u>11/23/2021</u> To: <u>12/31/2021</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 300.00

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)	\$ 200.00
TOTAL for the Reporting Period (2)	\$ 200.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 0.00
All Other Contributions (Part D)	\$ 333.00
TOTAL for the Reporting Period (3)	\$ 333.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 833.00
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

PAGE TOTAL	
\$	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.
(Exclude contributions from political committees reported in Part A)**

Name of Filing Committee or Candidate FRIENDS OF HEATHER MACDONALD	Reporting Period From: <u>11/23/2021</u> To: <u>12/31/2021</u>
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				DATE			AMOUNT		
Full Name of Contributor					MO	DAY	YEAR	\$	100.00
Patricia Cipolla									
Mailing Address					11	23	2021		
161 Old Gap Road									
City		Carlisle	State		Zip Code (Plus 4)				
		PA			17013				

Full Name of Contributor				MO	DAY	YEAR	\$	100.00
Sean Quinlan								
Mailing Address				12	3	2021		
2800 Columbia Avenue		City	Camp Hill					

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

PAGE TOTAL
\$ 200.00

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	
	From:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
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 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 FRIENDS OF HEATHER MACDONALD	Reporting Period From: <u>11/23/2021</u> To: <u>12/31/2021</u>
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				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
Daniel Barr							
Mailing Address 566 Brentwater Road				12	17	2021	\$ 333.00
City Camp Hill	State PA	Zip Code (Plus 4) 17011					
Employer Name Not Employed				Occupation Not Employed			
Employer Mailing Address/Principal Place of Business Not Employed			City Not Employed	State PA	Zip Code (Plus 4) 17011		

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

PAGE TOTAL
\$ 333.00

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:
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			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

Name of Filing Committee or Candidate		Reporting Period	
FRIENDS OF HEATHER MACDONALD		From: <u>11/23/2021</u> To: <u>12/31/2021</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period		(1)	\$ 21.60
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period		(2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)			
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.)			\$ 21.60

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

Name of Filing Committee or Candidate	Reporting Period From: To:
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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.						PAGE TOTAL \$ 0.00

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SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF HEATHER MACDONALD	From <u>11/23/2021</u> To: <u>12/31/2021</u>

DATE				AMOUNT		
To Whom Paid NGP VAN			MO	DAY	YEAR	\$ 79.50
Mailing Address 655 15th Street NW #650			12	2	2021	
City Washington	State DC	Zip Code (Plus 4) 20005	Description of Expenditure Software			
To Whom Paid ActBlue			MO	DAY	YEAR	\$ 23.66
Mailing Address 366 Summer Street			12	3	2021	
City Somerville	State MA	Zip Code (Plus 4) 02144	Description of Expenditure Fees			
To Whom Paid Go Union Printing			MO	DAY	YEAR	\$ 375.00
Mailing Address 2600 9th Street North #302			12	8	2021	
City St. Petersburg	State FL	Zip Code (Plus 4) 33704	Description of Expenditure Printing			
To Whom Paid Go Union Printing			MO	DAY	YEAR	\$ 100.68
Mailing Address 2600 9th Street North #302			12	16	2021	
City St. Petersburg	State FL	Zip Code (Plus 4) 33704	Description of Expenditure Printing			
To Whom Paid Vantiv eCommerce			MO	DAY	YEAR	\$ 42.59
Mailing Address 8500 Governors Hill Drive			12	9	2021	
City Symmes Township	State OH	Zip Code (Plus 4) 45249	Description of Expenditure Fees			

To Whom Paid Her Bold Move			MO	DAY	YEAR	
Mailing Address One Park Row, 5th Floor			12	10	2021	
City Providence	State RI	Zip Code (Plus 4) 02903	Description of Expenditure Contribution			
To Whom Paid Her Bold Move			MO	DAY	YEAR	
Mailing Address One Park Row, 5th Floor			12	16	2021	
City Providence	State RI	Zip Code (Plus 4) 02903	Description of Expenditure Contribution			
To Whom Paid Staples			MO	DAY	YEAR	
Mailing Address 128 South 32nd Street			12	13	2021	
City Camp Hill	State PA	Zip Code (Plus 4) 17011	Description of Expenditure Printing			
To Whom Paid Facebook			MO	DAY	YEAR	
Mailing Address 1 Hacker Way			12	22	2021	
City Menlo Park	State CA	Zip Code (Plus 4) 94025	Description of Expenditure Advertising			
To Whom Paid Facebook			MO	DAY	YEAR	
Mailing Address 1 Hacker Way			12	27	2021	
City Menlo Park	State CA	Zip Code (Plus 4) 94025	Description of Expenditure Advertising			
To Whom Paid 32 Auctions			MO	DAY	YEAR	
Mailing Address 228 East Sunset Court, Suite 32			12	28	2021	
City Madison	State WI	Zip Code (Plus 4) 53705	Description of Expenditure Technology			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 1,296.68

