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 20:	150217			Rep File			CANDI	NDIDATE COMMITTEE LOBBYIST								
Name of Filing C	Committee, Cand	idate or L	obbyist:		MCCI	LIN	ΓΟN,	JOANNA	FRIEN	NDS (DF		·				
Street Address:	PO BOX 166	568															
City:	PHILADELPH	AIA						State:	PA			Zip Cod	le: 19	139-9	998		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2		30 DA PRIMA		POST-	3.		AMENDM REPORT?		Yes	No)	√
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	AY PRE	- 5		30 DA		POST-	6.		TERMINA REPORT?		Yes	No)	\
report type)	ANNUAL REPOR	2 T 7.	7. Year 2022 FILING METHO () CHECK ON									PAPER		DISKI	ETTE		
Name of Office S	- Sought by Candid	late:			-	_		DATE C	F ELE	CTIC	ON	District Number	Office Code	Par	ty Code	Cour	
								МО	DAY	Y	EAR			DEN	1		
								4		5	2022		(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	МО	DAY	YEAR				МО	DAY	Y	EAR	FO	R OFFIC	E USE	ONLY		
Expenditures	s from:		3 22	2 20	022	T	0	4	-	15	2022						
A. Amount Bro	ught Forward Fr	om Last R	Report				\$			329,	638.84						
B. Total Moneta	ary Contribution	s And Rec	eipts (Fron	n Sche	dule :	I)	\$			26,	025.00						
C. Total Funds	Available (Sum	Of Lines A	and B)				\$			355,	663.84						
D. Total Expend	ditures (From So	hedule II	ΞΙ)				\$			12,	115.40						
E. Ending Cash	Balance (Subtra	act Line D	From Line	C)			\$			343,5	548.44						
F. Value Of In-	Kind Contributio	ns Receiv	ed (From S	chedul	le II)		\$				0.00						
G. Unpaid Debt	s And Obligation	ns (From :	Schedule I\	/)			\$		0.00								
				AFF	IDA'	VIT	SE	CTION									
PART I - If this is		-	_								_		5 mary Jeman	. المعام		:_6	
I swear (or affirm) correct and comple		nciuaing th	e attached sc	nedules	riiea	on p	оарег	or by elect	ronic m	ieaium	i, are to t	ne best o	г ту кноч	rieage	anu bei	ier , tr	ue
Sworn to and subs	cribed before me t day of	his	20								Signature	of Perso	n Submitt	ing Rep	ort		
	Signa	ture					•					Prin	ted Name				
My Commission Ex	cpires						_					Emai	il				
	МО	D	AY	YR					Ar	ea Co	de	Daytim	e Teleph	one Nu	mber		$\underline{}$
Part II- If this is	a report of a ca	ndidate's	authorized	Comm	nittee	e, Ca	ndid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende		f my knowl	edge and bel	ief this	politi	cal	comm	ittee has r	ot viola	ited ar	ny provisi	ions of the	e act of Ju	ne 3,1	937 (P.I	L. 133	3,
Sworn to and subsc	ribed before me th day of	is	20								Si	ignature o	of Candida	te			_
												Printe	d Name				-
	Signatur	e					•						_				
My Commission Exp	ires											Emai	ıı				
	мо	D	AY	YR					Area	Code		Da	ytime Te	lephor	ie Numl	oer	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -								
Name of Filing Committee or Candidate	Reporting Period							
MCCLINTON, JOANNA FRIENDS OF	From:	<u>3/22/202</u>	<u>2</u> To:	4/15/2022				
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor								
TOTAL for the Reporting	J 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)			\$	400.00				
All Other Contributions (Part B)	\$	125.00						
TOTAL for the Reporting	(2)	\$	525.00					
3. Contributions Received Over \$250.00 (From Part C and Part D)								
Contributions Received From Political Committees (Part C)			\$	24,500.00				
All Other Contributions (Part D)			\$	1,000.00				
TOTAL for the Reporting	J Period	(3)	\$	25,500.00				
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	26,025.00				

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 Candidate	Reporting	Period		
MCCLINTON, JOANNA FRIENDS OF	From:	3/22/2022	То:	4/15/2022
		DATE		AMOUNT

Full Name of Contributing Committee Friends Of Erika			мо	DAY	YEAR	
Mailing Address 1533 Valmont Stro				\$ 150.00		
y PITTSBURGH State PA 15217		4	11	2022		
Full Name of Contributing Committee HOSPITAL & HEALTHSYSTEM ASSOC OF PA PAC(HAPAC)				DAY	YEAR	
Mailing Address 30 NORTH THIRD STREET STE 600 PO BOX 8600						\$ 250.00
City HARRISBURG State Zip Code (Plus 4) PA 17101				15	2022	

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

PAGE TOTAL \$ 400.00

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 Candidat	Name of Filing Committee or Candidate					Reporting Period						
MCCLINTON, JOANNA FRIENDS OF			Fro	m:	4/15/2022							
					DATE			AMOUNT				
Full Name of Contributor Daniel F. Gordon				МО	DAY	YEAR						
Mailing Address 1021 West Hortter Street					4.4	2022	\$	100.00				
City Philadelphia	State PA	Zip Code (Plus 4) 19119		4	11	2022						
Full Name of Contributor Mary Ann Hunsicker				МО	DAY	YEAR						
Mailing Address 98 Tudor Lane						2022	\$	25.00				
City Vandley	State	Zip Code (Plus 4)		4	11	2022						

19067

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

PA

City

Yardley

PAGE TOTAL 125.00

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						
MCCLINTON, JOANNA FRIENDS OF			From:	<u>3/2</u>	<u>2/2022</u>	То:	4/15/	<u>/2022</u>
		•		DA	TE		AMOL	JNT
Full Name of Contributing Committee Laborers District Council				МО	DAY	YEAR		
Mailing Address 665 N Broad Street 5	5th Floor						\$	10,000.00
City Philadelphia	State PA	Zip Code 19123	e (Plus 4)	4	15	2022		
Full Name of Contributing Committee GENERAL BUILDING CONTRACTORS AS	SN PAC (GBCA PAC)			МО	DAY	YEAR		
	Address 36 SOUTH 18TH STREET P.O. BOX 15959 PHILADELPHIA State Zip Code (Plus 4)		4	15	2022	\$	1,000.00	
PHILADELPHIA	PA	19103-0000						
Full Name of Contributing Committee BRISTOL-MYERS SQUIBB CO EMPL PAC				МО	DAY	YEAR		
Mailing Address 3401 PRINCETON PIR	KE						\$	500.00
City LAWRENCEVILLE	State NJ	Zip Code 08648	e (Plus 4)	4	15	2022		
Full Name of Contributing Committee LOCAL 0420 STEAMFITTERS UNION CO	PE COM			МО	DAY	YEAR		
Mailing Address 14420 TOWNSEND R	D						\$	5,000.00
City PHILADELPHIA	State PA	Zip Code 19154-1	e (Plus 4) 1028	4	15	2022		
Full Name of Contributing Committee FOOD PAC (PA FOOD MERCHANTS ASSN)				МО	DAY	YEAR		
Mailing Address PO BOX 870							\$	1,000.00
City CAMP HILL	State PA	Zip Code	(Plus 4) 0870	4	15	2022		

Full Name of Contributing Committee NORFOLK SOUTHERN CORP GOOD GOV	' FUND		МО	DAY	YEAR	
Mailing Address ONE CONSTITUTION	AVE NE					\$ 1,000.00
City WASHINGTON	State DC	Zip Code (Plus 4) 20002	4	11	2022	
Full Name of Contributing Committee HOSPITAL & HEALTHSYSTEM ASSOC OF	МО	DAY	YEAR			
Mailing Address 30 NORTH THIRD ST	REET STE 600 PO BO	X 8600				\$ 1,000.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	4	11	2022	
Full Name of Contributing Committee SEIU HEALTHCARE PA COPE			МО	DAY	YEAR	
Mailing Address 1500 N 2ND ST, STE 12				11	2022	\$ 5,000.00
City HARRISBURG	HARRISBURG State Zip Code (Plus 4) PA 17102					

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

PAGE TOTAL \$ 24,500.00

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 Candida	ame of Filing Committee or Candidate					riod				
MCCLINTON, JOANNA FRIENDS OF				Fron	n:	<u>3/22/2</u>	<u>022</u> T e) :	4/15/2022	
					D/	ATE		АМ	OUNT	
Full Name of Contributor Charles Lomax					МО	DAY	YEAR			
Mailing P O Box 217 Address						1-	2022	\$	1,000.00	
City Hilltown	State	State Zip Code (Plus 4)			4	15	2022	[:]		
	PA	1892	27							
Employer Name Requested	•	•			Occupation Requested					
Employer Mailing Address/Principal Business	Place of		City			State		Zip Code	(Plus 4)	
Requested			Requeste	d		PA		18927		
Enter Grand Total of Part C on So	chedule I, Detailed S	Summa	ary Page,	Sectio	on 3.			PA	GE TOTAL	
								\$	1,000.00	

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		Repor	ting Perio	od			
			From:			To:		
			•	D	ATE		AI	MOUNT
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. Detailed	d Summary Page	Section	4			PA	GE TOTAL
- Inc. Statia Total of Fall E	Jonedane 1, Betanet	. Jammar y r uge,	500.011				\$	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	d	
MCCLINTON, JOANNA FRIENDS OF	From:	3/22/2022 To:	<u>4/15/2022</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
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, 1		\$	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 Candida	me of Filing Committee or Candidate				Re	porting	Period				
					Fro	m:		То	:		
					<u> </u>		DATE				AMOUNT
Full Name of Contributor						мо	DAY	YEAR	1		
Mailing Address										\$	0.00
City	State	Zip Code(Plus 4)									
Employer of Contributor	•		•		Occupation						
Employer Mailing Address/Principal Place of Business City State				Zip Code(Plus 4)			Desc	Description of Contribution			
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Det				taile	ed					PAGE TOTAL	
Summary Page, Section 3.							0.00				

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period			
MCCLINTON, JOANNA FRIENDS OF	From	3/22/2022	То:	4/15/2022

			DATE				AMOUNT	
To Whom Paid Friends Of Justin Fleming			МО	DAY	YEAR			
Mailing Address 109 Fawn Court			4	10	2022	\$	1,000.00	
City Harrisburg	State PA	Zip Code (Plus 4) 17710	Description of Expenditure Donation					
To Whom Paid People For Emily Kinkead			МО	DAY	YEAR			
Mailing Address P O Box 23563			4	10	2022	\$	1,000.00	
City Pittsburgh	State PA	Zip Code (Plus 4) 15222	Description of Expenditure Donation					
To Whom Paid Party Savers			МО	DAY	YEAR			
Mailing Address 1000 South 60th Street			4	10	2022	\$	225.00	
City Philadelphia	State PA	Zip Code (Plus 4) 19143	Description of Expenditure Petition Party					
To Whom Paid Bcom Solutions, LLC			МО	DAY	YEAR			
Mailing Address 747 O Street #150			4	4	2022	\$	1,800.00	
City Lincoln	State NE	Zip Code (Plus 4) 68508	Description of Expenditure Communications Invoice #4651					
To Whom Paid Bcom Solutions, LLC			МО	DAY	YEAR			
Mailing Address 747 O Street #150			4	4	2022	\$	3,000.00	
City Lincoln	State NE	Zip Code (Plus 4) 68508	Description of Expenditure Communications Invoice #4840					
I								

To Whom Paid NGP VAN, Inc.			мо	DAY	YEAR		
Mailing Address 655 15th Street, NW Ste 650			4	4	2022	\$	3,590.40
City Washington	State DC	Zip Code (Plus 4) 20005	Description of Expenditure DLCC1 April-June 2022				
To Whom Paid Armah Fahnbulleh			МО	DAY	YEAR		
Mailing Address 221 South 62nd Street			4	1	2022	\$	1,500.00
City Philadelphia	State PA	Zip Code (Plus 4) 19139	Description of Expenditure Professional Svs, Treasurer April-June 2022				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.					PAGE TOTAL		
				\$	12,115.40		