

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 : 20150217		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: MCCLINTON, JOANNA FRIENDS OF											
Street Address: PO BOX 16668											
City: PHILADELPHIA					State: PA		Zip Code: 19139-9998				
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 <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 2022	FILING METHOD () CHECK ONE			PAPER <input checked="" type="checkbox"/>	DISKETTE			
Name of Office Sought by Candidate:					DATE OF ELECTION			District Number	Office Code	Party Code	County Code
					MO	DAY	YEAR	DEM			
					4	5	2022	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		3	22	2022		4	15	2022			
A. Amount Brought Forward From Last Report					\$ 329,638.84						
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 26,025.00						
C. Total Funds Available (Sum Of Lines A and B)					\$ 355,663.84						
D. Total Expenditures (From Schedule III)					\$ 12,115.40						
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 343,548.44						
F. Value Of In-Kind Contributions Received (From Schedule II)					\$ 0.00						
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
MCCLINTON, JOANNA FRIENDS OF	From: <u>3/22/2022</u> To: <u>4/15/2022</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)	\$ 400.00
All Other Contributions (Part B)	\$ 125.00
TOTAL for the Reporting Period (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 Period (3)	\$ 25,500.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 26,025.00
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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 MCCLINTON, JOANNA FRIENDS OF	Reporting Period From: <u>3/22/2022</u> To: <u>4/15/2022</u>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;">DATE</td> <td style="width: 40%; border: none;">AMOUNT</td> </tr> </table>		DATE	AMOUNT
DATE	AMOUNT		

Full Name of Contributing Committee HOSPITAL & HEALTHSYSTEM ASSOC OF PA PAC(HAPAC)			MO	DAY	YEAR	\$ 250.00
Mailing Address 30 NORTH THIRD STREET STE 600 PO BOX 8600			4	15	2022	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101				

Full Name of Contributing Committee FRIENDS OF ERIKA			MO	DAY	YEAR	\$ 150.00
Mailing Address 1533 VALMONT STREET			4	11	2022	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15217				

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 Candidate MCCLINTON, JOANNA FRIENDS OF	Reporting Period From: <u>3/22/2022</u> To: <u>4/15/2022</u>
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				DATE			AMOUNT	
Full Name of Contributor DANIEL F. GORDON					MO	DAY	YEAR	\$ 100.00
Mailing Address 1021 WEST HORTTER STREET					4	11	2022	
City PHILADELPHIA		State PA	Zip Code (Plus 4) 19119					

Full Name of Contributor MARY ANN HUNSICKER				MO	DAY	YEAR	\$ 25.00
Mailing Address 98 TUDOR LANE				4	11	2022	
City YARDLEY	State PA	Zip Code (Plus 4) 19067					

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

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>3/22/2022</u> To: <u>4/15/2022</u>

				DATE		AMOUNT	
Full Name of Contributing Committee LABORERS DISTRICT COUNCIL				MO	DAY	YEAR	\$ 10,000.00
Mailing Address 665 N BROAD STREET 5TH FLOOR				4	15	2022	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19123					
Full Name of Contributing Committee GENERAL BUILDING CONTRACTORS ASSN PAC (GBCA PAC)				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 36 SOUTH 18TH STREET P.O. BOX 15959				4	15	2022	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191030000					
Full Name of Contributing Committee BRISTOL-MYERS SQUIBB CO EMPL PAC				MO	DAY	YEAR	\$ 500.00
Mailing Address 3401 PRINCETON PIKE				4	15	2022	
City LAWRENCEVILLE	State NJ	Zip Code (Plus 4) 08648					
Full Name of Contributing Committee LOCAL 0420 STEAMFITTERS UNION COPE COM				MO	DAY	YEAR	\$ 5,000.00
Mailing Address 14420 TOWNSEND RD				4	15	2022	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191541028					
Full Name of Contributing Committee FOOD PAC (PA FOOD MERCHANTS ASSN)				MO	DAY	YEAR	\$ 1,000.00
Mailing Address PO BOX 870				4	15	2022	
City CAMP HILL	State PA	Zip Code (Plus 4) 170010870					

Full Name of Contributing Committee NORFOLK SOUTHERN CORP GOOD GOV FUND			MO	DAY	YEAR	\$ 1,000.00
Mailing Address ONE CONSTITUTION AVE NE			4	11	2022	
City WASHINGTON	State DC	Zip Code (Plus 4) 20002				
Full Name of Contributing Committee HOSPITAL & HEALTHSYSTEM ASSOC OF PA PAC(HAPAC)			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 30 NORTH THIRD STREET STE 600 PO BOX 8600			4	11	2022	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101				
Full Name of Contributing Committee SEIU HEALTHCARE PA COPE			MO	DAY	YEAR	\$ 5,000.00
Mailing Address 1500 N 2ND ST STE 12			4	11	2022	
City HARRISBURG	State PA	Zip Code (Plus 4) 17102				
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.						PAGE TOTAL \$ 24,500.00

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 MCCLINTON, JOANNA FRIENDS OF	Reporting Period From: <u>3/22/2022</u> To: <u>4/15/2022</u>
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
CHARLES LOMAX							
Mailing Address P O BOX 217				4	15	2022	\$ 1,000.00
City HILLTOWN	State PA	Zip Code (Plus 4) 18927					
Employer Name REQUESTED				Occupation REQUESTED			
Employer Mailing Address/Principal Place of Business REQUESTED			City REQUESTED		State PA	Zip Code (Plus 4) 18927	

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

PAGE TOTAL
\$ 1,000.00

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	
MCCLINTON, JOANNA FRIENDS OF		From: <u>3/22/2022</u> To: <u>4/15/2022</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period (1)		\$	0.00
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.)		\$	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: 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

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

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 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

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

DATE				AMOUNT		
To Whom Paid FRIENDS OF JUSTIN FLEMING			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 109 FAWN COURT			4	10	2022	
City HARRISBURG	State PA	Zip Code (Plus 4) 17710	Description of Expenditure DONATION			
To Whom Paid PEOPLE FOR EMILY KINKEAD			MO	DAY	YEAR	\$ 1,000.00
Mailing Address P O BOX 23563			4	10	2022	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15222	Description of Expenditure DONATION			
To Whom Paid PARTY SAVERS			MO	DAY	YEAR	\$ 225.00
Mailing Address 1000 SOUTH 60TH STREET			4	10	2022	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19143	Description of Expenditure PETITION PARTY			
To Whom Paid BCOM SOLUTIONS, LLC			MO	DAY	YEAR	\$ 1,800.00
Mailing Address 747 O STREET # 150			4	4	2022	
City LINCOLN	State NE	Zip Code (Plus 4) 68508	Description of Expenditure COMMUNICATIONS INVOICE #4651			
To Whom Paid BCOM SOLUTIONS, LLC			MO	DAY	YEAR	\$ 3,000.00
Mailing Address 747 O STREET # 150			4	4	2022	
City LINCOLN	State NE	Zip Code (Plus 4) 68508	Description of Expenditure COMMUNICATIONS INVOICE #4840			

To Whom Paid NGP VAN, INC.			MO	DAY	YEAR	
Mailing Address 655 15TH STREET, NW STE 650			4	4	2022	
City WASHINGTON	State DC	Zip Code (Plus 4) 20005	Description of Expenditure DLCC1 APRIL-JUNE 2022			

To Whom Paid ARMAH FAHNBULLEH			MO	DAY	YEAR	
Mailing Address 221 SOUTH 62ND STREET			4	1	2022	
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

