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 2018	0045			Rep File			CAND	DATE		соми	ITTEE	✓	LOBE	BYIST		
Name of Filing C	Committee, Candid	ate or L	obbyist:		FRIE	END:	S OF	JIM GRE	GORY								
Street Address:	227 JEFFERSO	ON AVEI	NUE														
City:	TYRONE							State:	PA			Zip Cod	ie : 16	.6686			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	/ PRE	- 2	2.	30 DA PRIMA				AMENDMENT Yes REPORT?			No	•	\	
(place X to the right of							30 DA ELECT		POST-	6.		TERMINA REPORT		Yes	No		/
report type)								IG METH				PAPER		/	DISKE	TTE	
Name of Office S	Sought by Candida	te:	•					DATE C	F ELE	CTIC	N	District Number	Office Code	Par	ty Code	Coun	
	,							МО	DAY	ΥI	AR	ivanibei	Toode	REP		couc	
								11		8	2022		(SEE IN:	STRUCTIO	ONS FOR C	ODES)
	Receipts and	МО	DAY	YEAR	}			МО	DAY	Y	EAR	FO	R OFFIC	CE USE	ONLY		
Expenditures	irom:		11 29	2	022	Т	0	12	2	31	2022						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$			41,	137.22						
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule	I)	\$				0.00						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			41,	137.22						
D. Total Expen	ditures (From Sch	edule II	I)				\$			1,2	241.63						
E. Ending Cash	Balance (Subtract	t Line D	From Line (C)			\$			39,8	95.59						
F. Value Of In-	Kind Contributions	Receiv	ed (From So	hedu	le II)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$				0.00			•			
				AFF	IDA	١٧٧	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign l	nere. I	If thi	is is	a Can	ndidate r	eport, o	candi	date sig	jn here.					
I swear (or affirm) correct and complete) that this report, incl ete.	uding the	e attached sch	edules	s filed	d on	paper (or by elect	tronic m	edium	, are to t	the best o	f my knov	wledge	and belie	ef , tru	ue
Sworn to and subs	cribed before me this day of	.	20							5	Signature	of Perso	n Submitt	ing Rep	ort		-
	Signatu	ra					- -					Prin	ted Name				-
My Commission Ex	_											Ema	il				-
	мо	D	AY	YR			_		Are	ea Cod	le	Daytim	e Teleph	one Nu	mber		_
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nitte	e, C	andida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and beli	ef this	polit	ical	commi	ittee has r	not viola	ted ar	y provis	ions of the	e act of J	une 3,19	937 (P.L.	. 1333	3,
Sworn to and subsc	ribed before me this										s	ignature o	of Candida	ate			-
	day of						_					Printe	d Name				-
	Signature						-										_ [
My Commission Exp	_											Ema	il				
	МО	D.	AY	YR			•		Area	Code		Da	aytime To	elephon	e Numbe	er	⁻

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF JIM GREGORY	From:	11/29/202	<u>2</u> To:	12/31/2022
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g 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)			\$	0.00
TOTAL for the Reporting	g Period	(2)	\$	0.00
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)			\$	0.00
TOTAL for the Reporting	g Period	(3)	\$	0.00
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 ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00

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					
		F	rom:		То	:			
		•		DATE			AMOUNT		
Full Name of Contributing Commi	ittee		МО	DAY	YEAR				
Mailing Address						\$	0.00		
City	State	Zip Code (Plus 4)							

PAGE TOTAL
0.00

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

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					eporting Period					
Fro					From: To					
					DATE			AMOUNT		
Full Name of Contributor				МО	DAY	YEAR				
Mailing Address	Mailing Address						\$	0.00		
City	State	Zip Code (Plus 4))							

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.

Name of Filing Committee or Candidate			Reporting	Period				
			From:			То:		
				DA	TE		P	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.0
Mailing Address							- \$	0.0
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00

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	lame of Filing Committee or Candidate				orting Pe	riod			
				Fror	n:		To) :	
					D	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR	\$	0.00
Mailing Address								7	
City	State	Zi	p Code (Plus	s 4)					
Employer Name	•				Occupa	tion	-	-	
Employer Mailing Address/Principal Pl	ace of Business		City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detaile	ed Sumr	mary 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		Report	ing Peri	od			
			From:			To:		
				E	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Pl	us 4)					
Receipt Description	'							
Futor Count Total of Dout	Fan Cahadula I Datailad	I Commence Dance C	` !	4			ı	PAGE TOTAL
Enter Grand Total of Part	e on Schedule 1, Detailed	i Summary Page, S	ection	4.			\$	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 Per	iod	
FRIENDS OF JIM GREGORY	From:	<u>11/29/2022</u> To:	12/31/2022
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	R	
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
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 Candidate	Reporting Period							
Fi						То:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	-	-	•	•	•			
Enter Grand Total of Part F on Sche	dule II, In-Kind	d Contributions Deta	iled Sum	mary Pag	ge,		PAGE TOTA	L
Section 2.						\$		0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					porting	Period				
					From:			То:		
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi _l	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

STATEMENT OF EXPENDITURES

Name of Filing (Name of Filing Committee or Candidate					Reporting Period					
FRIENDS OF JIM GREGORY				From	From <u>11/29/2022</u> To:						
					DATE AMOU						
To Whom Paid				МО	DAY	YEAR					
JIM GREGORY	JIM GREGORY					1 = 1					
Mailing Address	227 JEFFERSON AVI	ENUE		11	29	2022	\$	928.93			
City TYRONE		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•				
		PA	16686	ADVER ⁻	TISING SU	PPLIES					
To Whom Paid				МО	DAY	YEAR					
JIM GREGORY						1 = 1					
Mailing Address	Mailing Address 227 JEFFERSON AVENUE			12	5	2022	\$	312.70			
City TYRONE State Zip Code (Plus 4)				Descrip	tion of Exp	enditure					
		PA	16686	MEALS							