### **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	30045			Rep File	port		CANDI	DATE		СОМ	<b>4ITTEE</b>	✓	LOBI	BYIST		
Name of Filing C	Committee, Candid	late or L	obbyist:		FRIE	END	S OF	JIM GREC	SORY								
Street Address:	227 JEFFERS	ON AVE	NUE														
City:	TYRONE							State:	PA			Zip Cod	<b>ie:</b> 16	5686			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA' PRIMARY	Y PRE	- 2	2.	30 DA PRIMA		OST-	3.		AMENDM REPORT		Yes	No	•	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4. <b>X</b>	2ND FRIDA' ELECTION	y pre	Ē- !	5.	30 DA ELECT		OST-	6.		TERMINA REPORT		Yes	No		<b>/</b>
report type)	ANNUAL REPORT	7.	<b>Year</b> 2023					NG METHO CHECK OI				PAPER DISKE			TTE		
Name of Office S	Sought by Candida	DATE OF ELECTION  District Number Code  Party 0								ty Code	Coun						
	,							МО	DAY	YE	AR	rumber	code	REP		couc	
								11		7	2023		(SEE IN	STRUCTI	ONS FOR (	ODES)	)
	Receipts and	МО	DAY	YEAR	2			МО	DAY	YI	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	irom:		6 6	2	023	Т	0	9		18	2023						
A. Amount Bro	ught Forward Fro	m Last R	leport				\$	-		38,8	303.89						
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule	: I)	\$			57,5	500.00						
C. Total Funds Available (Sum Of Lines A and B) \$ 96,303.89																	
D. Total Expenditures (From Schedule III) \$ 8,476.43																	
E. Ending Cash	Balance (Subtrac	t Line D	From Line (	C)			\$			87,8	27.46						
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	le II	:)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	)			\$				0.00			1			
				AFF	IDA	١٧٢	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign l	here. :	If thi	is is	a Can	ndidate re	port, c	candi	date sig	ın here.					
I swear (or affirm) correct and comple	) that this report, inc ete.	luding the	e attached scl	nedules	s filed	d on	paper (	or by electi	ronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , tru	ue
Sworn to and subs	cribed before me thi day of	s	20							S	Signature	of Perso	n Submit	ting Rep	ort		_
	- Ciarrate						- -					Prin	ted Name	e			-
My Commission Ex	Signatı opires	ii e										Ema	il				- [
	мо	D.	AY	YR			_		Are	ea Cod	le	Daytim	e Teleph	none Nu	mber		_
Part II- If this is	a report of a can	didate's	authorized	Comn	nitte	e, C	andida	ate shall :	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of e	my knowl	edge and beli	ef this	polit	tical	commi	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333	3,
Sworn to and subsc	ribed before me this										s	ignature o	of Candid	ate			-
	day of						_					Drints	d Name				_
	Signature						-					Printe	d Name				
My Commission Exp	_							,				Ema	il				_
	мо	D	AY	YR	1		-		Area	Code		Da	aytime T	elephon	e Numb	er	-

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF JIM GREGORY	From:	6/6/202	<u>3</u> To:	9/18/2023
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)			\$	0.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	) Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	4,000.00
All Other Contributions (Part D)			\$	53,500.00
TOTAL for the Reporting	Period	(3)	\$	57,500.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	J 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			\$	57,500.00

#### **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 Committe	From:			Reporting Period					
		F	From:		То	•			
		•		DATE			AMOUNT		
Full Name of Contributing	Committee		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	Re	Reporting Period					
	Fro	om:		To	<b>)</b> :		
	<b>'</b>		DATE			AMOUNT	
Full Name of Contributor		МО	DAY	YEAR			
Mailing Address					\$	0.00	
City	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	ame of Filing Committee or Candidate							
FRIENDS OF JIM GREGORY			From:	<u>6/</u>	<u>6/2023</u>	То:	9/18/2023	
				DA	TE		AMOUNT	
Full Name of Contributing Committee				МО	DAY	YEAR		
SHEETZ PAC					\$	3,000.00		
Mailing Address 5700 6TH AVENUE				7	17	2023		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
City ALTOONA	State	Zip Code	e (Plus 4)		_,			
	PA	16602						
Full Name of Contributing Committee				мо	DAY	YEAR		
PENNSYLVANIA BANKERS PUBLIC AFFA	IRS COMMITTEE			110	DAI	ILAK	\$	1,000.00
Mailing Address 3897 NORTH FRONT	STREET			8	25	2023	1	_,000100
City HARRISBURG	State	Zip Code	e (Plus 4)		23	2023		
	PA	17110						

 $\label{lem:constraint} \textbf{Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.}$ 

**PAGE TOTAL**\$ 4,000.00

### 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 of Candidate					Reporting Period						
FRIENDS OF JIM GREGORY			Fro	m:	6/6/2	<u>023</u> <b>To</b>	:	9/18/2023				
			·	D	ATE		A	MOUNT				
Full Name of Contributor				МО	DAY	YEAR	_	F 000 00				
JAMES & amp; KIM VAN BUREN				140	DAI	ILAK	\$	5,000.00				
Mailing Address 155 STRATFORD CO	URT			9	5	2023						
City HOLLIDAYSBURG	State	Zip Co	ode (Plus 4)			2023						
	PA	16648	3									
Employer Name PENNSTRESS				Occupat	ion	PRESIDI	ENT					
Employer Mailing Address/Principal Plac	e of Business	Cit	ity		State		Zip Code (Plus 4)					
8180 WOODBURG PIKE		RC	OARING SPRII	NG	PA		16673					
Full Name of Contributor		-		мо	DAY	YEAR	<b></b>	2 000 00				
RONALD & amp; PAULA PERRETTA					27.1	1 27111	<b>\$</b>	2,000.00				
Mailing Address 332 DEER RUN ROA	D	9	15	2023								
City HOLLIDAYSBURG	State	Zip Co	ode (Plus 4)									
	PA	16648	3				1					
Employer Name PROFESSIONALS AUTO BODY					tion (	OWNER						
Employer Mailing Address/Principal Plac	e of Business	Cit	ity		State		Zip Cod	e (Plus 4)				
1109 PLANK ROAD		DU	UNCANSVILLE		PA							
Full Name of Contributor		-										
SAMUEL LAFFERTY				МО	DAY	YEAR	\$	1,000.00				
Mailing Address 721 S TRACY AVE					4.5	2022	1					
City BOSEMAN	State	Zip Co	ode (Plus 4)	9	15	2023						
	l <sub>MT</sub>	59715	5	1								
Employer Name CHICAGO BLACKHAWI	KS		-	Occupat	ion	NHL PLA	YER					
Employer Mailing Address/Principal Plac	e of Business	Cit	ity	•	State		Zip Cod	e (Plus 4)				
1901 W MADISON STREET		CH	HICAGO		IL							
Full Name of Contributor				МО	DAY	YEAR	<b> </b>	2 000 00				
DELEO GAMES					27.1.		*	3,000.00				
Mailing Address 931 9TH AVE				7	20	2023						
City ALTOONA	State	Zip Co	ode (Plus 4)									
	PA	16602	2									
Employer Name DELEO GAMES				Occupat	tion	OWNER						
Employer Mailing Address/Principal Plac	e of Business	Cit	ity		State		Zip Cod	Zip Code (Plus 4)				
931 9TH AVENUE		AL	LTOONA		PA		16602					

Full Name of Contributor			_				
1			мо	DAY	YEAR	\$	E 000 00
ROBERT MONTLER			1.0	<b>D</b> A.,	· LAN	_] *	5,000.00
Mailing Address PO BOX 688			7	14	2023		
City PHILIPSBURG	State	Zip Code (Plus 4)	] '		2023		
	PA :	16866					
Employer Name LEE INDUSTRIES			Occupat	ion	PRESID	ENT	
Employer Mailing Address/Principal Plac	ce of Business	City		State		Zip Code (	Plus 4)
50 W PINE ST		PHILIPSBURG		PA		16866	
Full Name of Contributor		•					
P JOSEPH & BETTY LEHMAN			МО	DAY	YEAR	<b>\$</b>	3,000.00
Mailing Address 315 QUINCE COURT			_			1	
City HOLLIDAYSBURG		Zip Code (Plus 4)	7	10	2023		
	PA :	16648					
Employer Name P JOSEPH LEHMAN EN	·	10010	Occupat	ion	PRESID	- FNT	
Employer Mailing Address/Principal Place		City	Тоссирии	State	RESID	Zip Code (	Dius 4)
117 OLDE FARM OFFICE RD	e or business	DUNCANSVILLE		PA		16635	rius 4)
117 OLDE FARM OFFICE RD		DUNCANSVILLE		PA		10033	
Full Name of Contributor			мо	DAY	YEAR	<sub>\$</sub>	2,000.00
TIMOTHY HARCLERODE						4	_,000.00
Mailing Address 1944 PULPIT ROAD	<del> </del>		7	10	2023	1	
City MARTINSBURG	State	Zip Code (Plus 4)					
	I PA	16662				l	
Employer Name CONEMAUGH NASON	MEDICAL CENTER		Occupat	ion (	CEO		
Employer Mailing Address/Principal Plac	ce of Business	City		State		Zip Code (	Plus 4)
105 NASON DRIVE		ROARING SPRIN	G	PA		16673	
Full Name of Contributor			МО	DAY	VEAD		
SHAWN MCCARL			МО	DAY	YEAR	<b>\$</b>	1,500.00
<del></del>							
Mailing Address 2221 9TH AVENUE			0	-	2022	1	
Mailing Address 2221 9TH AVENUE City ALTOONA	State	Zip Code (Plus 4)	9	5	2023		
	1	<b>Zip Code (Plus 4)</b>	9	5	2023		
	1		9 Occupat		2023 OWNER		
City ALTOONA	PA					Zip Code (	Plus 4)
City ALTOONA  Employer Name SP MCCARL	PA	16602		ion (		<b>Zip Code (</b> 16602	Plus 4)
City ALTOONA  Employer Name SP MCCARL  Employer Mailing Address/Principal Place 2221 9TH AVENUE	PA	16602 City		State		•	Plus 4)
City ALTOONA  Employer Name SP MCCARL  Employer Mailing Address/Principal Place 2221 9TH AVENUE  Full Name of Contributor	PA	16602 City		State		•	Plus 4)
City ALTOONA  Employer Name SP MCCARL  Employer Mailing Address/Principal Place 2221 9TH AVENUE  Full Name of Contributor  DAVID & DAV	PA	16602 City	Occupat	State PA DAY	OWNER	16602	
City ALTOONA  Employer Name SP MCCARL  Employer Mailing Address/Principal Place 2221 9TH AVENUE  Full Name of Contributor DAVID & DAVI	PA e of Business	City ALTOONA	Occupat	State PA	OWNER	16602	
City ALTOONA  Employer Name SP MCCARL  Employer Mailing Address/Principal Place 2221 9TH AVENUE  Full Name of Contributor  DAVID & DAV	PA State	City ALTOONA Zip Code (Plus 4)	Occupat	State PA DAY	OWNER	16602	
City ALTOONA  Employer Name SP MCCARL  Employer Mailing Address/Principal Place 2221 9TH AVENUE  Full Name of Contributor DAVID & DAVI	PA ce of Business	City ALTOONA	Occupat MO 8	State PA  DAY	OWNER  YEAR  2023	\$	
City ALTOONA  Employer Name SP MCCARL  Employer Mailing Address/Principal Place 2221 9TH AVENUE  Full Name of Contributor  DAVID & DAV	PA State PA	City ALTOONA  Zip Code (Plus 4)	Occupat	State PA  DAY  31	OWNER	\$ \$	1,000.00
City ALTOONA  Employer Name SP MCCARL  Employer Mailing Address/Principal Place 2221 9TH AVENUE  Full Name of Contributor DAVID & DAVI	PA State PA	City ALTOONA  Zip Code (Plus 4) 16648  City	Occupat MO 8	State PA  DAY  31  ion State	OWNER  YEAR  2023	\$ \$ ENT Zip Code (	1,000.00 Plus 4)
City ALTOONA  Employer Name SP MCCARL  Employer Mailing Address/Principal Place 2221 9TH AVENUE  Full Name of Contributor  DAVID & DAV	PA State PA	City ALTOONA  Zip Code (Plus 4)	Occupat MO 8	State PA  DAY  31	OWNER  YEAR  2023	\$ \$	1,000.00 Plus 4)
City ALTOONA  Employer Name SP MCCARL  Employer Mailing Address/Principal Place 2221 9TH AVENUE  Full Name of Contributor  DAVID & DAV	PA State PA	City ALTOONA  Zip Code (Plus 4) 16648  City	Occupat MO 8	State PA  DAY  31  ion State	OWNER  YEAR  2023	\$ \$ ENT Zip Code (	1,000.00 Plus 4)
City ALTOONA  Employer Name SP MCCARL  Employer Mailing Address/Principal Place 2221 9TH AVENUE  Full Name of Contributor  DAVID & DAV	PA  Ce of Business  State PA  Ce of Business	City ALTOONA  Zip Code (Plus 4) 16648  City	MO 8	State PA  DAY  31  State MI	OWNER  YEAR  2023	\$ ENT Zip Code ( 49636970	1,000.00 Plus 4)
City ALTOONA  Employer Name SP MCCARL  Employer Mailing Address/Principal Place 2221 9TH AVENUE  Full Name of Contributor  DAVID & DAV	PA  See of Business  State PA  Dece of Business	City ALTOONA  Zip Code (Plus 4) 16648  City GLEN ARBOR	MO 8	State PA  DAY  31  State MI	OWNER  YEAR  2023	\$ ENT Zip Code ( 49636970	1,000.00 Plus 4)
City ALTOONA  Employer Name SP MCCARL  Employer Mailing Address/Principal Place 2221 9TH AVENUE  Full Name of Contributor  DAVID & DAV	State A State State State State A Stat	City ALTOONA  Zip Code (Plus 4)  L6648  City GLEN ARBOR	MO 8	State PA  DAY  31  ion State MI  DAY	YEAR 2023 PRESID	\$ ENT Zip Code ( 49636970	1,000.00 Plus 4)
City ALTOONA  Employer Name SP MCCARL  Employer Mailing Address/Principal Place 2221 9TH AVENUE  Full Name of Contributor  DAVID & DAV	State A State State State State A Stat	City ALTOONA  Zip Code (Plus 4) 16648  City GLEN ARBOR	MO 8	State PA  DAY  31  ion State MI  DAY	YEAR 2023 PRESID	\$ ENT Zip Code ( 49636970	1,000.00 Plus 4)
City ALTOONA  Employer Name SP MCCARL  Employer Mailing Address/Principal Place 2221 9TH AVENUE  Full Name of Contributor  DAVID & DAV	PA  State PA  State PA  State PA  State PA	City ALTOONA  Zip Code (Plus 4)  L6648  City GLEN ARBOR	MO 8	State PA  DAY  31  ion State MI  DAY  4	YEAR 2023 PRESID	\$ ENT Zip Code ( 49636970	1,000.00 Plus 4)
City ALTOONA  Employer Name SP MCCARL  Employer Mailing Address/Principal Place 2221 9TH AVENUE  Full Name of Contributor  DAVID & DAV	State PA  State PA  State PA  State PA  HOMES	City ALTOONA  Zip Code (Plus 4)  L6648  City GLEN ARBOR	MO 8	State PA  DAY  31  ion State MI  DAY  4	YEAR 2023 PRESID YEAR 2023	\$ ENT Zip Code ( 49636970	1,000.00 Plus 4) 06 5,000.00

Full Name of Contributor				мо	DAY	YEAR			
JEFF LONG				MO	DAT	TEAR	\$	5,000.00	
Mailing Address 1916 HILEN	1AN ROAD			8	1	2023			
City TYRONE	State	Zi	p Code (Plus 4)	7		2025			
	PA PA	16	6686						
Employer Name JEFF LONG Co	ONSTRUCTION			Occupat	tion	OWNER			
Employer Mailing Address/Princ	cipal Place of Business		City		State		Zip Code (Plus 4)		
1916 HILEMAN ROAD			TYRONE		PA		16686		
Full Name of Contributor									
DONALD DEGOL SR REVOCABL	E TRUST			МО	DAY	YEAR	\$	5,000.00	
	SANT VALLEY BLVD				24	2025			
City ALTOONA	State	Zi	p Code (Plus 4)	8	31	2023	·		
	PA	16	6602						
Employer Name N/A				Occupat	tion	RETIRE	D		
Employer Mailing Address/Princ	cipal Place of Business		City		State		Zip Cod	e (Plus 4)	
			-						
Full Name of Contributor									
DAVID DEGOL REVOCABLE TRU	JST			МО	DAY	YEAR	\$	5,000.00	
Mailing Address 3229 PLEAS	SANT VALLEY BLVD				0.4	2025	_		
City ALTOONA	State	Zi	p Code (Plus 4)	8	31	2023	•		
	PA	16	6602						
Employer Name N/A				Occupat	tion	RETIRE			
Employer Mailing Address/Princ	cipal Place of Business		City	<u> </u>	State			e (Plus 4)	
			-				•		
Full Name of Contributor									
DENNIS W DEGOL REV TR				МО	DAY	YEAR	\$	5,000.00	
	SANT VALLEY BLVD			_			_		
City ALTOONA	State	Zi	p Code (Plus 4)	8	31	2023	3		
	PA	16	6602						
Employer Name N/A	·			Occupat	tion				
Employer Mailing Address/Princ	cipal Place of Business		City	•	State		Zip Cod	e (Plus 4)	
Full Name of Contributor							<del>'</del>		
BRUNO DEGOL, JR REV TR AGF	RFF			МО	DAY	YEAR	\$	5,000.00	
	SANT VALLEY BLVD			_		255	Ħ		
_				8	31	2023	·		
City ALTOONA	State	Zi	p Code (Plus 4)		l				
City ALTOONA			<b>p Code (Plus 4)</b> 6602						
	State			Occupat	tion	RETIRF	 D		
Employer Name N/A	State PA		6602	Occupat	1	RETIRE		e (Plus 4)	
	State PA			Occupat	State	RETIRE		e (Plus 4)	
Employer Name N/A	State PA		6602	Occupat	1	RETIRE	Zip Cod		
Employer Name N/A	State PA  cipal Place of Business	16	City	-	1	RETIRE	Zip Cod	e (Plus 4) AGE TOTAL	
Employer Name N/A Employer Mailing Address/Prince	State PA  cipal Place of Business	16	City	-	1		Zip Cod		

## 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:			То:		
		<b>'</b>			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	lus 4)					
Receipt Description	<b>'</b>	<b>.</b>					<u> </u>	
				_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	Section	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 Perio	od							
FRIENDS OF JIM GREGORY	From:	<u>6/6/2023</u> <b>To:</b>	9/18/2023						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTOR								
TOTAL for the Reporting Pe	eriod (1)	\$	0.00						
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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,	•	\$	0.00						

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Filing Committee or Ca	ndidate		Reporting Period					
			From:			To:		
				DATE			AMOUNT	
full Name of Contributor				DAY	YEAR			
Mailing Address						<b> </b>	0.00	
City	State	Zip Code (Plus 4)						
Description of Contribution:	•		•	•				
				_	Г			
Enter Grand Total of Part F of Section 2.	n Schedule II, In-Ki	nd Contributions Detai	led Sum	nmary Pa	ge,		PAGE TOTAL	
						\$	0.00	

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUNT	-
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address							\$	0.00		
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Place of Business City				Stat	e Zi <sub>l</sub>	p Code(Plus 4)	Descr	iptio	on of Contribut	ion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE TO	TAL
Summary Page, Section 3.										0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period			
FRIENDS OF JIM GREGORY	From	6/6/2023	То:	9/18/2023

				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
GRIFFITH FAMILY FOUNDATION			1-10		1 Z / LIK		
Mailing Address 309 ALLEGHENY STREET		6	21	2023	\$	500.00	
City HOLLIDAYSBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	16648	ADVER	ΓISING			
To Whom Paid			мо	DAY	YEAR		
GLORIA GATES FOUNDATION			1.10		1 Z / LIK		
Mailing Address 118 E SPRUCE COURT		7	14	2023	\$	500.00	
City ALTOONA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
PA 16601			ADVERTISING				
To Whom Paid			мо	DAY	YEAR		
OLD TOWN DELI			1-10		1 Z / LIK		
Mailing Address 512 N 3RD STRE	ET		7	17	2023	\$	312.70
City HARRISBURG	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	17101	VOLUN	TEER APPR	ECIATION	N	
To Whom Paid			МО	DAY	YEAR		
HOLLIDAYSBURG PHOENIX VOL FIRI	E COMPANY		140		IZAK		
Mailing Address 206 WAYNE STREET		7	31	2023	\$	1,000.00	
City HOLLIDAYSBURG	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	16648	ADVERT	ΓISING			
To Whom Paid			МО	DAY	YEAR		
DUNCANSVILLE VFW			MO		ILAK		
Mailing Address 1665 NEWRY LAN	IE		7	31	2023	\$	100.00
City DUNCANSVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	16635	ADVERTISING				
To Whom Paid		МО	DAY	YEAR			
ALTOONA TEENER LEAGUE		1410		ILAK			
Mailing Address 918 S 15TH STREET		7	31	2023	\$	250.00	
City ALTOONA	Zip Code (Plus 4)	Description of Expenditure					
	PA	16602	ADVERT	ΓISING			
1.77							

							PAGE 14
To Whom Paid			мо	DAY	YEAR		
CARLUCCIO FOR JUDGE			1-10		ILAK		
Mailing Address PO BOX 85			7	31	2023	\$	100.00
City BLUE BELL	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	19422	DONAT	ION			
To Whom Paid			мо	DAY	YEAR		
MEGAN MARTIN FOR PA			140		IZAK		
Mailing Address 1600 APPLETREE RD			7	31	2023	\$	100.00
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	17110	DONAT	ION			
To Whom Paid  BATTISTA FOR JUDGE			МО	DAY	YEAR		
Mailing Address PO BOX	66		7	31	2023	\$	100.00
	<u> </u>		-				
City RICHBORO	State	Zip Code (Plus 4)	Description of Expenditure  DONATION				
	PA	18954	I DONAT.	ION	l	I	
To Whom Paid FRIENDS OF HARRY SMALL			мо	DAY	YEAR		
Mailing Address PO BOX 11732		7	31	2023	\$	100.00	
		<u> </u>					
City HARRISBURG	State	Zip Code (Plus 4)	Description of Expenditure  DONATION				
To Whom Paid	PA	17108	I DONAT	ION			
JIM GREGORY			МО	DAY	YEAR		
Mailing Address 227 JEFFERSON AVENUE			8	21	2023	\$	5,188.73
	1						
City TYRONE	State	Zip Code (Plus 4)	Description of Expenditure  DONATION REIMBURSE				
To Whom Paid	PA	16686	I DONAT	ION REIME	I		
THE DAILY NEWS			МО	DAY	YEAR		
Mailing Address PO BOX 384		9	8	2023	\$	225.00	
		Zin Code (Blue 4)					
City HUNTINGDON	State	Zip Code (Plus 4)	1	tion of Exp	enaiture		
	PA	16652	ADVER	DING			PAGE TOTAL
Enter Grand Total of Expe	enditures on Page 1, Re	port Cover Page, Item D	) <b>.</b>				
						\$	8,476.43