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	30159				port ed B		CANDI	DATE		СОМ	4ITTEE	✓	LOBE	BYIST		
Name of Filing C	Committee, Candid	late or L	obbyist:	•	FRII	END:	S OF I	NATALIE	MIHAI	EK							
Street Address:	PO BOX 81																
City:	HERSHEY							State:	PA			Zip Code: 17033					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	-	2.	30 DA PRIMA		POST- 3.			AMENDMENT REPORT?		Yes	No	,	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	D FRIDAY PRE- 5. 30 ECTION EL					POST-	6.		TERMINATION Yes REPORT?			No	•	/
report type)	ANNUAL REPORT	7. X	Year 2023		FILING METHO () CHECK ON									/	DISKE	TTE	
Name of Office S	Sought by Candida	ite:	•					DATE 0	F ELE	СТІС	N	District Number	Office Code	Par	ty Code	Count Code	y
								МО	DAY	YI	AR		1	REP			
								11		7	2023		(SEE IN	STRUCTIO	ONS FOR C	ODES)	
	Receipts and	МО	DAY	YEAR	l			МО	DAY	YI	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	s from:		11 28	20	023	T	0	12		31	2023						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			21,9	934.03						
B. Total Moneta	ary Contributions	And Rec	eipts (From	Sche	dule	e I)	\$			Ġ	928.00						
C. Total Funds Available (Sum Of Lines A and B)							\$			22,8	362.03						
D. Total Expenditures (From Schedule III)							\$			7,8	306.14						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)			\$			15,0	55.89						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	hedu	le II	I)	\$				0.00						
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV)				\$				0.00			•			
				AFF	ID/	AVI	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign h	ere. 1	If th	nis is	a Can	didate re	eport, o	andi	date sig	ın here.					
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	e attached sche	edules	file	d on	paper o	or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and belie	f , tru	e.
Sworn to and subs	cribed before me thi day of	s	20							S	Signature	of Perso	n Submit	ting Rep	ort		-
	Signatu	ıre					-					Prin	ted Name	9			-
My Commission Ex	cpires						_					Ema	il				-
	МО	D	AY	YR					Arc	ea Coc	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized C	Comm	nitte	ee, C	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of e	ny knowl	edge and belief	f this	polit	tical	commi	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,19	937 (P.L.	1333	,
Sworn to and subsc	ribed before me this		20								S	ignature o	of Candid	ate			-
	day of						-					Printe	d Name				-
	Signature						-					Ema	il				-
My Commission Exp	oires											Ema					
	МО	D	AY	YR			•		Area	Code		Da	aytime T	elephon	e Numbe	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period							
FRIENDS OF NATALIE MIHALEK	11/28/202	<u>3</u> To:	12/31/2023						
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	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)	\$	250.00							
TOTAL for the Reporting	\$	250.00							
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)			\$	500.00					
TOTAL for the Reporting) Period	(3)	\$	500.00					
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)									
TOTAL for the Reporting	J Period	(4)	\$	178.00					
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			\$	928.00					

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 Candi	ame of Filing Committee or Candidate					Reporting Period						
		F	rom:		То	ŧ						
		•		DATE			AMOUNT					
Full Name of Contributing Committee	2		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

Reporting Period

FRIENDS OF NATALIE MIHALEK

From: <u>11/28/2023</u> To:

DATE

12/31/2023

AMOUNT

Full Name of Contributor MICHAEL WARD					DAY	YEAR	
Mailin	Mailing Address 250 JACOBS WAY						\$ 250.00
City	GREENSBURG	State	Zip Code (Plus 4)	12	21	2023	
		PA	15601				

PAGE TOTAL

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

\$ 250.00

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:			То:			
				DA	TE		А	MOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR	\$		0.00
Mailing Address							7 *		0.00
City	State	Zip Cod	e (Plus 4)						
1	I	ı			ı	<u> </u>			
		_		_				PAGE TOT	AL
Enter Grand Total of Part C on Scheo	lule 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	f Filing Committee or Candidate							
FRIENDS OF NATALIE MIHALEK			Fron	n:	11/28/	2023 T o):	12/31/2023
				D/	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	500.00
AMY KAMINSKI					2111	1 = 1	*	500.00
Mailing Address 114 MARLIN DRIVE	W			12		2023		
City PITTSBURGH	State	Zip Code (Plus	4)	12	`	2023		
	PA	15216				l		
Employer Name MULBERRY PUBLIC AF	FAIRS			Occupat	ion	EXECUT	IVE	
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip C	ode (Plus 4)
PO BOX 1585		PITTSBUR	.GH		PA		1523	0

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

PAGE TOTAL
\$ 500.00

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	Reporting Period							
FRIENDS OF NATALIE MIHALEK From:					11/28/202	<u>:3</u> To:	12/31/2023	
				D	ATE		АМ	OUNT
Full Name				мо	DAY	YEAR		00.00
HILTON HOTELS				140	DAT	TEAR	\$	89.00
Mailing Address 1335 AVE. OF THE AM	MERICAS			12	8	2023		
City NEW YORK	State	Zip Code (Plus 4)					
	NY	10019						
Receipt Description REFUND FOR OV	ERPAYMENT	•						
Full Name								
HILTON HOTELS				МО	DAY	YEAR	\$	89.00
Mailing Address 1335 AVE. OF THE AN	MERICAS			12	8	2023		
City NEW YORK	State	Zip Code (Plus 4)	12		2023		
	NY	10019						
Receipt Description REFUND FOR OV	· 'ERPAYMENT	•			•	•	-	

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL	
\$ 178.00	

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 NATALIE MIHALEK	From:	11/28/2023 To:	<u>12/31/2023</u>						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER 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,	•	\$	0.00						

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Can	didate		Reporting Period					
	From:				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 or	n Schedule II, In-Ki	nd Contributions Detai	led Sun	ımary Pa	ge,		PAGE TOTAL	-
Section 2.						\$		0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					porting	Period				
				Fro	m:		To:			
						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	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

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period			
FRIENDS OF NATALIE MIHALEK	From	11/28/2023	То:	12/31/2023

			DATE				AMOUNT		
To Whom Paid				I					
SHUTTERFLY			МО	DAY	YEAR				
Mailing Address 2800 BRIDGE PARKWAY			11	28	2023	\$	142.67		
City REDWOOD CITY	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure				
	PA	94065	CAMPAI	GN MATER	IAL				
To Whom Paid CAPITOL PRESERVE COMMITTEE				DAY	YEAR				
Mailing Address 462 MAIN CAPITOL BLDG			11	30	2023	\$	474.67		
City HARRISBURG	State	Zip Code (Plus 4)	Descript	l tion of Exp	enditure				
PA 17120				CONTRIBUTION					
To Whom Paid TAR SELF STORAGE				DAY	YEAR				
Mailing Address 3054 WASHINGTON ROAD				2	2023	\$	84.80		
City MCMURRAY State Zip Code (Plus 4)			Descript	l tion of Exp	 enditure				
PA 15317				STORAGE					
To Whom Paid		<u> </u>	МО	DAY	VEAD				
To Whom Paid TUSCANY STEAKHOUSE			мо	DAY	YEAR				
			MO 12	DAY 4	YEAR 2023	\$	895.63		
TUSCANY STEAKHOUSE	State	Zip Code (Plus 4)	12		2023	\$	895.63		
TUSCANY STEAKHOUSE Mailing Address 117 W 58TH ST.	State NY	Zip Code (Plus 4) 10019	12 Descript	4	2023 enditure	\$	895.63		
TUSCANY STEAKHOUSE Mailing Address 117 W 58TH ST.			12 Descript	4 tion of Exp	2023 enditure	\$	895.63		
TUSCANY STEAKHOUSE Mailing Address 117 W 58TH ST. City NEW YORK To Whom Paid	NY		12 Descript MEETIN	4 tion of Exp G EXPENS	2023 enditure	\$	895.63 89.00		
TUSCANY STEAKHOUSE Mailing Address 117 W 58TH ST. City NEW YORK To Whom Paid HILTON HOTELS Mailing Address 1335 AVENUE OF TH	NY		Descript MEETIN MO 12	4 tion of Exp G EXPENS	2023 enditure E YEAR 2023				
TUSCANY STEAKHOUSE Mailing Address 117 W 58TH ST. City NEW YORK To Whom Paid HILTON HOTELS Mailing Address 1335 AVENUE OF TH	NY HE AMERICAS	10019	Description 12 Description 12 Description 12	4 tion of Exp G EXPENS DAY 5	2023 enditure E YEAR 2023				
TUSCANY STEAKHOUSE Mailing Address 117 W 58TH ST. City NEW YORK To Whom Paid HILTON HOTELS Mailing Address 1335 AVENUE OF TH	NY HE AMERICAS State	10019 Zip Code (Plus 4)	Description 12 Description 12 Description 12	4 tion of Exp G EXPENS DAY 5 tion of Exp	2023 enditure E YEAR 2023				
TUSCANY STEAKHOUSE Mailing Address 117 W 58TH ST. City NEW YORK To Whom Paid HILTON HOTELS Mailing Address 1335 AVENUE OF THE City NEW YORK To Whom Paid	HE AMERICAS State NY	10019 Zip Code (Plus 4)	Descript MO 12 Descript TRAVEL	d 4 tion of Exp G EXPENS DAY 5 tion of Exp EXPENSE	2023 enditure E YEAR 2023 enditure				
TUSCANY STEAKHOUSE Mailing Address 117 W 58TH ST. City NEW YORK To Whom Paid HILTON HOTELS Mailing Address 1335 AVENUE OF THE City NEW YORK To Whom Paid HILTON HOTELS	HE AMERICAS State NY	10019 Zip Code (Plus 4)	Description MO 12 Description TRAVEL MO 12	d 4 tion of Exp G EXPENS DAY 5 tion of Exp EXPENSE DAY	2023 enditure E YEAR 2023 enditure YEAR 2023	\$	89.00		

								AGL 12	
To Whom Paid					DAY	YEAR			
HILTON HOTELS				МО					
Mailing	iling Address 1335 AVENUE OF THE AMERICAS			12	5	2023	\$	89.00	
City	NEW YORK	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
NY 10019				TRAVEL EXPENSE					
To Whor	m Paid			МО	DAY	YEAR			
HILTON HOTELS					7_7.11				
Mailing A	Mailing Address 1335 AVENUE OF THE AMERICAS			12	5	2023	\$	89.00	
City NEW YORK State Zip Code (Plus 4)			Description of Expenditure						
		NY	10019	TRAVEL	EXPENSE				
To Whom Paid HILTON HOTELS			мо	DAY	YEAR				
	Address 1335 AVENUE OF T	HE AMEDICAS		12	5	2023	\$	3,000.04	
_		1							
City	NEW YORK	State	Zip Code (Plus 4)	1	tion of Exp	enditure			
		NY	10019	TRAVEL	EXPENSE				
To Whor	m Paid SE SRATEGIES LLC			мо	DAY	YEAR			
				12	-	2022	\$	2,088.11	
Mailing	Address PO BOX 23173	T		12	6	2023	· ·	2,000.11	
City PITTSBURGH State Zip Code (Plus 4)			Description of Expenditure						
		PA	15222	CONSU	LTING				
To Whor				мо	DAY	YEAR			
	Address 201 S HILLS VLG			12	11	2023	\$	120.00	
City	PITTSBURGH	State	Zip Code (Plus 4)	Description of Expenditure					
PA 15241			CAMPAIGN SUPPLIES						
To Whor	m Paid			Mo	DAY	YEAR			
MARKET	T DISTRICT			МО	DAT	TEAK			
Mailing	Address 7000 OXFORD DRIV	/E		12	18	2023	\$	300.00	
City	BETHEL PARK	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
PA 15102			CAMPAIGN GIFTS						
To Whor	m Paid			МО	DAY	VEAD			
NATALII	E MIHALEK			МО	DAY	YEAR			
Mailing Address 120 HARDWOOD DRIVE			12	31	2023	\$	344.22		
City	City VENETIA State Zip Code (Plus 4)			Description of Expenditure					
				REIMBURSEMENT					
								PAGE TOTAL	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.									