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:	on 201	80045			Repo Filed		CAI	NDI	DATE		COM	AITTEE	Y	LOBE	1131	
Name of Filing C	ommittee, Candi	date or L	obbyist:		FRIEN	DS OF	JIM G	REC	GORY							
Street Address:																
City:	TYRONE						State	e:	PA			Zip Co	de: 16	5686		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. X	2ND FRIDA PRIMARY	Y PRE-	- 2.	30 D. PRIM		P	POST-	3.		AMENDN REPORT		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	5.	30 D		P	POST-	6.		TERMIN/ REPORT		Yes	No	✓
report type)	ANNUAL REPORT	7.	Year 2024				NG ME					PAPER		$ \checkmark $	DISKE	ΓΤΕ
Name of Office S	ought by Candida	ate:			•		DAT	ΕO	F ELE	CTIO	N	District Number	Office Code	Part	y Code	County Code
							МО		DAY	YE	AR		•	REP		
								11		5	2024		(SEE IN	STRUCTIO	NS FOR C	ODES)
Summary of		МО	DAY	YEAR			МО		DAY	YE	AR	FC	OR OFFI	CE USE	ONLY	
Expenditures	from:		1 1	. 20	024	ТО		3		4	2024					
A. Amount Bro	ught Forward Fro	m Last R	eport			\$				106,4	156.22					
B. Total Moneta	ary Contributions	And Rec	eipts (Fron	n Sche	dule I)	\$	1			4,7	750.00					
C. Total Funds	Available (Sum O	f Lines A	and B)			\$;			111,2	206.22					
D. Total Expend	ditures (From Sch	nedule II	1)			\$				8,1	.86.77					
E. Ending Cash	Balance (Subtra	ct Line D	From Line	C)		\$			1	.03,0	19.45					
F. Value Of In-l	Kind Contribution	s Receiv	ed (From S	chedul	le II)	\$	<u> </u>			2	19.00					
G. Unpaid Debt	s And Obligations	s (From	Schedule IV	/)		\$	1				0.00			'		
				AFF	IDAV	IT SE	CTIC	NC								
PART I - If this is	_	-	_								_					
I swear (or affirm) correct and comple	that this report, inc ete.	cluding th	e attached sc	hedules	filed o	n paper	or by e	electi	ronic me	edium	, are to t	he best o	of my kno	wledge a	and belie	ef , true
Sworn to and subs	cribed before me th day of	is	20							S	ignature	of Perso	n Submit	ting Rep	ort	
-	Signat	ure				_						Prin	ted Nam	e		
My Commission Ex	_											Ema	il			
	мо	D	AY	YR					Are	a Cod	le	Daytin	ne Telepl	none Nui	nber	
Part II- If this is	a report of a can	didate's	authorized	Comm	ittee,	Candid	late sh	nall	sign he	ere.						
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and beli	ief this	politica	l comm	ittee h	as n	ot violat	ed an	y provis	ions of th	e act of J	une 3,19	37 (P.L.	1333,
Sworn to and subsc	ribed before me this day of	•	20								s	ignature (of Candid	ate		
						_						Printe	ed Name			— I
My Commission Exp	Signature ires					_						Ema	nil			—
	МО	D	AY	YR		_			Area	Code		D	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 JIM GREGORY	From:	1/1/202	<u>4</u> To:	3/4/2024
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g Period	(1)	\$	100.00
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)			\$	2,150.00
TOTAL for the Reporting	J Period	(2)	\$	2,150.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	1,000.00
All Other Contributions (Part D)			\$	1,500.00
TOTAL for the Reporting	J Period	(3)	\$	2,500.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	0.00
			I	
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			\$	4,750.00

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	Name of Filing Committee or Candidate			Period			
		F	rom:		То	•	
		·		DATE		AMOL	JNT
Full Name of Contributing Com	mittee		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 Candida	te		Repo	orting Pe	eriod			
FRIENDS OF JIM GREGORY			Fron	n:	1/1/2	2024 To) :	3/4/2024
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
SHERRY & MICHAEL DELGROSSO	1			1-10	DAI	ILAK		
Mailing Address							\$	250.00
City ALTOONA	State	Zip Code (Plus 4)	1	8	2024		
	PA	16601						
Full Name of Contributor				мо	DAY	YEAR		
JOSEPH & LINDA DELGROSSO					5 /(.	1 L/tit		
Mailing Address							\$	250.00
City TYRONE	State	Zip Code (Plus 4)	1	8	2024		
	PA	16686						
Full Name of Contributor				мо	DAY	YEAR		
JAMES DELGROSSO								
Mailing Address							\$	250.00
City ALTOONA	State	Zip Code (Plus 4)	1	8	2024		
	PA	16601						
Full Name of Contributor				МО	DAY	YEAR		
SANDRA & amp; ROBERT DELGROSSO								
Mailing Address	T						\$	250.00
City TYRONE	State	Zip Code (Plus 4)	1	8	2024		
	PA	16686						
Full Name of Contributor				мо	DAY	YEAR		
CARL & NANCY CRIDER					27.1	1 L/tit		
Mailing Address							\$	250.00
City TYRONE	State	Zip Code (Plus 4)	1	8	2024		
	PA	16686						
Full Name of Contributor				мо	DAY	YEAR		
ANTHEA GERMANO					27.1.			
Mailing Address							\$	250.00
City ALTOONA	State	Zip Code (Plus 4)	1	22	2024		
	PA	16602						
Full Name of Contributor				мо	DAY	YEAR		
DENNIS & amp; HOLLY OCONNOR				1-10	DAI	ILAK		
Mailing Address							\$	100.00
City HOLLIDAYSBURG	State	Zip Code (Plus 4)	2	9	2024		
	PA	16648						

Full Nam	ne of Contributor			мо	DAY	YEAR	
DIANE O)SGOOD			1-10	אלו	ILAK	
Mailing A	Address						\$ 100.00
City	HOLLIDAYSBURG	State	Zip Code (Plus 4)	2	22	2024	
		PA	16648				
Full Nam	ne of Contributor			мо	DAY	YEAR	
NEIL &ar	mp; MARILYN PORT			140	DAI	ILAK	
Mailing A	Address						\$ 100.00
City	HOLLIDAYSBURG	State	Zip Code (Plus 4)	2	22	2024	
		PA	16648				
Full Nam	ne of Contributor			мо	DAY	VFAR	
	ne of Contributor Ramp; BETTY BURKET			МО	DAY	YEAR	
	kamp; BETTY BURKET			мо	DAY	YEAR	\$ 200.00
DAVID &	kamp; BETTY BURKET	State	Zip Code (Plus 4)	MO 2	DAY 22	YEAR 2024	\$ 200.00
DAVID &	Ramp; BETTY BURKET	State PA	Zip Code (Plus 4) 16637				\$ 200.00
DAVID & Mailing A	Ramp; BETTY BURKET		' ' '	2	22	2024	\$ 200.00
DAVID & Mailing A City R	kamp; BETTY BURKET Address ROARING SPRING	PA	' ' '				\$ 200.00
DAVID & Mailing A City R	Address ROARING SPRING ne of Contributor 1 STAUFFER & STAUFFER	PA	' ' '	2	22	2024	\$ 200.00 \$ 150.00
DAVID & Mailing A City R Full Nam WILLIAM Mailing A	Address ROARING SPRING ne of Contributor 1 STAUFFER & STAUFFER	PA	' ' '	2	22	2024	

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

PAGE TOTAL \$ 2,150.00

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							
FRIENDS OF JIM GREGORY	From:	1/1/2024	То:	<u>3/4/2024</u>				

AMOUNT DATE

Full Name of Contributing Committee				DAY	YEAR		
FRIENDS OF CHRIS GEBHARD					1 LAIR	\$ 1,000	.00
Mailing Address			1	22	2024	, , , , , , , , , , , , , , , , , , , ,	
City LEBANON	State	Zip Code (Plus 4)	_	22	2024		
	PA	17042					

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

PAGE TOTAL 1,000.00

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.)

			кер	orting Pei	rioa			
FRIENDS OF JIM GREGORY			Fron	n:	1/1/2	<u>024</u> To	:	3/4/2024
				D#	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	F00.00
WILLIAM & VICTORIA COLLINS					-	12/11	_] *	500.00
Mailing Address				1	30	2024		
City HOLLIDAYSBURG	State	Zip Code (Plu	s 4)	_	30			
	l _{PA}	16648						
Employer Name LINK COMPUTER COR	Р			Occupat	ion	COO		
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip C	ode (Plus 4)
		BELLWOO	D		PA		1661	.7
Full Name of Contallington								
Full Name of Contributor				мо	DAY	VEAD		1 000 00
DONALD DETWILER				мо	DAY	YEAR	\$	1,000.00
							-	1,000.00
DONALD DETWILER	State	Zip Code (Plu	s 4)	мо 2	DAY 9	YEAR 2024	-	1,000.00
DONALD DETWILER Mailing Address	State PA	Zip Code (Plu	s 4)				-	1,000.00
DONALD DETWILER Mailing Address		. ,	s 4)		9	2024		1,000.00 OWNER
DONALD DETWILER Mailing Address City HOLLIDAYSBURG	PA	. ,	s 4)	2	9	2024	RANT	,
DONALD DETWILER Mailing Address City HOLLIDAYSBURG Employer Name US HOTEL	PA	16648		2 Occupat	9	2024	RANT	OWNER
DONALD DETWILER Mailing Address City HOLLIDAYSBURG Employer Name US HOTEL Employer Mailing Address/Principal Place	PA ce of Business	City HOLLIDA	/SBURG	2 Occupat	9 State	2024	RANT Zip C	OWNER
DONALD DETWILER Mailing Address City HOLLIDAYSBURG Employer Name US HOTEL	PA ce of Business	City HOLLIDA	/SBURG	2 Occupat	9 State	2024	RANT Zip C	OWNER Tode (Plus 4)
DONALD DETWILER Mailing Address City HOLLIDAYSBURG Employer Name US HOTEL Employer Mailing Address/Principal Place	PA ce of Business	City HOLLIDA	/SBURG	2 Occupat	9 State	2024	RANT Zip C	OWNER Tode (Plus 4)

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 o	or Candidate		Report	ing Peri	od		
			From:			To:	
				D	ATE		AMOUNT
Full Name				мо	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)				
Receipt Description	•	•			•		
Enter Grand Total of Part E	on Schodulo I. Dotailed	Summary Dage	Section	4			PAGE TOTAL
cinter Granu Total Of Part E	on Schedule 1, Detalled	Summary Page,	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 Period		
FRIENDS OF JIM GREGORY	From:	<u>1/1/2024</u> To:	<u>3/4/2024</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)	\$	219.00
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,		\$	219.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Can	didate	1	Reporting	Period			
FRIENDS OF JIM GREGORY	RIENDS OF JIM GREGORY				L/1/2024	2024 To: 3/4/	
				DATE			AMOUNT
Full Name of Contributor				DAY	VEAD		
HOLLAND BROTHERS			МО	DAY	YEAR	 	210.00
Mailing Address			1	26	2024	↑ *	219.00
City DUNCANSVILLE	State	Zip Code (Plus 4)] †	20	2024		
	PA	16635					
Description of Contribution: F	OOD SUPPLIES	+	1			•	
Enter Grand Total of Part F or Section 2.	n Schedule II, In-Kii	nd Contributions Detail	ed Sumi	mary Pag	je,		PAGE TOTAL
						\$	219.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Rep	orting	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	ation				
Employer Mailing Address/Principal Plac	e of Business	City	V	State	e Zip	Code(Plus 4)	Descr	ript	ion of Contribution	on
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	Contributions De	etaile	ed				PAGE TO	ΓAL
Summary Page, Section 3.	,									0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period			
FRIENDS OF JIM GREGORY	From	1/1/2024	То:	<u>3/4/2024</u>

				DATE				AMOUNT	
To Wi	nom Paid			МО	DAY	YEAR			
JIM G	REGORY								
Mailin	ng Address			1	8	2024	\$	50.00	
City	TYRONE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		PA	16686	REIMBURSEMENT					
To Wi	nom Paid			МО	DAY	YEAR			
BLAIR COUNTY CHAMBER OF COMMERCE			140		ILAK				
Mailing Address			1	12	2024	\$	300.00		
City	ALTOONA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
PA 16602				ADVERTISING					
To Wi	nom Paid			мо	DAY	YEAR			
ALTO	ONA KIWANIS CLUB			МО	DAI	ILAK			
Mailin	ng Address			1	22	2024	\$	1,000.00	
City	HOLLIDAYSBURG	State	Zip Code (Plus 4)) Description of Expenditure					
PA 16648				ADVERTISING					
To Wi	nom Paid			МО	DAY	YEAR			
JIM G	REGORY			МО	DAT	TEAR			
Mailing Address			1	24	2024	\$	24.99		
City	TYRONE	State	Zip Code (Plus 4)	1) Description of Expenditure					
		PA	16686	REIMBURSEMENT					
To Wi	nom Paid				DAY	YEAR			
FRIEN	NDSHIP FIRE COMPANY 1 IN	NC .		МО	DAT	TEAR			
Mailin	ng Address			2	22	2024	\$	1,500.00	
City	ROARING SPRING	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		PA	16673	ADVER	ΓISING				
To Wi	nom Paid			мо	DAY	YEAR			
LN CONSULTING			MO	DAT	TEAR				
LN CC	DINSULTING		Mailing Address						
				1	26	2024	\$	1,817.76	
		State	Zip Code (Plus 4)		26		\$	1,817.76	

To WI	nom Paid			мо	DAY	YEAR			
ALTOONA RIFLE AND PISTOL CLUB				MO	DAT	TEAR			
Mailing Address			2	9	2024	\$	100.00		
City	ALTOONA	State	Zip Code (Plus 4)	Descrip					
		PA	16601	ADVERTISING					
To WI	nom Paid				DAY	VEAD			
BLAIR COUNTY CHAMBER OF COMMERCE				МО	DAY	YEAR			
Mailing Address				2	9	2024	\$	302.00	
City	ALTOONA	State	Zip Code (Plus 4)	4) Description of Expenditure					
		PA	16602	ADVERTISING					
To WI	nom Paid				DAY	VEAD			
JIM G	REGORY			МО	DAY	YEAR			
Mailir	ng Address			2	13	2024	\$	242.02	
City	TYRONE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		PA	16686	REIMBU	IRSEMENT				
To WI	nom Paid			мо	DAY	YEAR			
TYRO	NE EVENTS & amp; PROMOTIONS	5		1-10		1 = July			
Mailir	ng Address			1	30	2024	\$	500.00	
City	TYRONE	State	Zip Code (Plus 4)	Description of Expenditure					
		PA	16686	ADVERTISING					
To Whom Paid				мо	DAY	YEAR			
PRECIOUS LIFE			1-10		ILAK				
Mailir	ng Address			2	9	2024	\$	1,000.00	
City	ALTOONA	State	Zip Code (Plus 4)	Description of Expenditure					
		PA	16601	ADVERTISING					
To WI	nom Paid			мо	DAY	YEAR			
CENT	RAL BLAIR RECREATION & amp;	PARK		MO	DAT	TEAR			
Mailir	ng Address			2	24	2024	\$	1,000.00	
City	ALTOONA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		PA	16602	ADVERTISING					
To WI	nom Paid			MO	DAY	YEAR			
BOY S	SCOUT TROOP 3032			МО	DAY	YEAR			
Mailing Address			2	16	2024	\$	250.00		
City	HOLLIDAYSBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		PA	16648	ADVERTISING					
To Whom Paid				МС	DAY	YEAR			
HCRC			МО	DAT	TEAK				
Mailir	ng Address			2	21	2024	\$	100.00	
City	HUNTINGDON	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA 16652 AI				ADVERTISING				

PAGE 14

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.		PAGE TOTAL
		8,186.77