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				port ed B		CANDI	DATE		СОМ	4ITTEE	✓	LOBI	SYIST		
Name of Filing C	Committee, Candid	ate or L	obbyist:		FRIE	END	S OF	JIM GRE	GORY								_
Street Address:																	
City:	TYRONE							State:	PA	PA			le: 16	686			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. X	2ND FRIDAY PRE- PRIMARY 2. 30 DAY POST- PRIMARY 3.							AMENDMENT Yes No				1			
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- [5.	30 DAY POST- 6. ELECTION					TERMINATION Yes REPORT?			No	1	
report type)	ANNUAL REPORT	7.	Year 2024				FILING METHOD () CHECK ONE					PAPER	PAPER DISKETTE				
Name of Office S	- Sought by Candida	te:	-		-			DATE 0	F ELE	СТІО	N	District Number	Office Code	Par	ty Code	County	,
								МО	DAY	YE	AR		10000	REP			
								11		5	2024		(SEE IN	STRUCTIO	ONS FOR C	ODES)	_
	Receipts and	МО	DAY Y	EAR				МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
Expenditures	s trom:		1 1	20	024	Т	0	3		4	2024						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$			106,4	156.22						
B. Total Monet	ary Contributions	And Rec	eipts (From S	che	dule	ı)	\$			4,7	750.00						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			111,2	206.22						
D. Total Expend	ditures (From Sch	edule II	I)				\$			8,1	86.77						
E. Ending Cash	Balance (Subtract	t Line D	From Line C)				\$:	103,0	19.45						
F. Value Of In-	Kind Contributions	Receiv	ed (From Sch	edul	e II	()	\$			2	19.00						
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV)				\$				0.00						
			A	۱FF	IDA	۱۷۶	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign he	re. I	[f thi	is is	a Can	ndidate re	eport, o	candio	date sig	ın here.					
I swear (or affirm) correct and comple) that this report, incl ete.	uding the	e attached sched	lules	filed	d on	paper (or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge :	and belie	ef , true	Э,
Sworn to and subs	cribed before me this day of	;	20							S	ignature	of Perso	n Submit	ting Rep	ort		•
	Signatu	re					-					Prin	ted Name	.			-
My Commission Ex	cpires						_					Ema	il				•
	мо	D	AY	YR					Ar	ea Cod	e	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a cand	didate's	authorized Co	mm	itte	e, C	andida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of n	ny knowl	edge and belief	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,	
Sworn to and subsc	ribed before me this										s	ignature o	of Candid	ate			۱ .
	day of						-					Printe	d Name				.
	Signature						-										.
My Commission Exp	ires											Ema					
	МО	D	AY	YR			-		Area	Code		Da	ytime T	elephon	e Numbe	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	y 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) 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) 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	Period	(3)	\$	2,500.00
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 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 Ca	ndidate	R	eporting	Period		
		F	rom:		То	:
		·		DATE		AMOUNT
Full Name of Contributing Commit	ttee		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)

Reporting Period Name of Filing Committee or Candidate FRIENDS OF JIM GREGORY From: 3/4/2024 1/1/2024 **To:** DATE **AMOUNT Full Name of Contributor** мо DAY YEAR WILLIAM STAUFFER & amp; JULIE MILLER **Mailing Address** 150.00 City **ALLENTOWN** State Zip Code (Plus 4) 2 22 2024 PA 18102 **Full Name of Contributor** МО DAY YEAR DAVID & BETTY BURKET **Mailing Address** 200.00 2 22 2024 State Zip Code (Plus 4) City **ROARING SPRING** PA 16637 **Full Name of Contributor** мо DAY YEAR NEIL & amp; MARILYN PORT **Mailing Address** 100.00 2024 City **HOLLIDAYSBURG** State Zip Code (Plus 4) 2 22 PΑ 16648 **Full Name of Contributor** МО DAY YEAR DIANE OSGOOD **Mailing Address** 100.00 2 22 2024 City **HOLLIDAYSBURG** State Zip Code (Plus 4) PA 16648 **Full Name of Contributor** МО DAY **YEAR** DENNIS & amp; HOLLY OCONNOR **Mailing Address** 100.00 2 2024 City **HOLLIDAYSBURG** State Zip Code (Plus 4) PΑ 16648 **Full Name of Contributor** МО DAY YEAR ANTHEA GERMANO **Mailing Address** 250.00 2024 22 City **ALTOONA** State Zip Code (Plus 4) 1 PA 16602 **Full Name of Contributor** МО DAY **YEAR** CARL & amp; NANCY CRIDER **Mailing Address** 250.00 8 2024 City **TYRONE** State Zip Code (Plus 4) 1 PA 16686

					1	
ame of Contributor			мо	DAY	YEAR	
RA & ROBERT DELGROSSO						
g Address						\$ 250.00
TYRONE	State	Zip Code (Plus 4)	1	8	2024	
	PA	16686				
ame of Contributor			МО	DAY	ΥFΔR	
S DELGROSSO				5 /(1		
g Address						\$ 250.00
ALTOONA	State	Zip Code (Plus 4)	1	8	2024	
	PA	16601				
ame of Contributor			МО	DAY	VFΔR	
PH & LINDA DELGROSSO			140	ואס	LEAK	
g Address						\$ 250.00
TYRONE	State	Zip Code (Plus 4)	1	8	2024	
	PA	16686				
ame of Contributor			МО	DAY	VEAR	
ame of Contributor RY & MICHAEL DELGROSSC	1		мо	DAY	YEAR	
	,		МО	DAY	YEAR	\$ 250.00
RY & MICHAEL DELGROSSC	State	Zip Code (Plus 4)	MO	DAY 8	YEAR 2024	\$ 250.00
	g Address TYRONE ame of Contributor DELGROSSO g Address ALTOONA ame of Contributor H & amp; LINDA DELGROSSO g Address	RA & BAMP; ROBERT DELGROSSO g Address TYRONE State PA Ame of Contributor G DELGROSSO g Address ALTOONA State PA Ame of Contributor PH & Amp; LINDA DELGROSSO g Address TYRONE State PA State	RA & Samp; ROBERT DELGROSSO TYRONE State PA 16686 TYRONE State PA 16686 TYRONE State Specific Solution Specific Solution Specific Solution Specific Solution Specific Solution State PA 16601 Tyrone Tyrone Tyrone State State Specific Solution Tyrone Tyrone	RA & Samp; ROBERT DELGROSSO g Address TYRONE State PA 16686 MO DELGROSSO g Address ALTOONA State PA 16601 MO MO MO MO MO MO MO MO MO M	RA & Bamp; ROBERT DELGROSSO TYRONE State PA 16686 TYRONE State PA 16686 MO DAY 8 AUTOONA State PA 16601 AUTOONA H & Amp; LINDA DELGROSSO G Address TYRONE State PA State PA State PA 16601 MO DAY DAY DAY B & B DAY AUTOONA AUTOONA State PA 16601 AUTOONA DAY DAY DAY DAY DAY DAY DAY D	RA & Bamp; ROBERT DELGROSSO g Address TYRONE State PA 16686 TYRONE TYRONE State PA 16686 TYRONE TYRONE TYRONE State PA TOBELGROSSO G Address ALTOONA State PA TOBELGROSSO TYRONE State PA TOBELGROSSO TYRONE TYRONE

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

			DA	TE		AMOUNT
Full Name of Contributing Committee			мо	DAY	YEAR	
FRIENDS OF CHRIS GEBHARD				DA!	IEAR	\$ 1,000.00
Mailing Address			1	22	2024	2,000.00
City LEBANON	State	Zip Code (Plus 4)	1	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.)

Name of Filing Committee or Candidate					Reporting Period					
FRIENDS OF JIM GREGORY				Fron	n:	<u>1/1/2</u>	<u>1/1/2024</u> To:		<u>3/4/2024</u>	
					D/	ATE		AMOUNT		
Full Name of Contributor					мо	DAY	YEAR	T	1 000 00	
DONALD DETWILER					1-10	DAI	ILAN	\$	1,000.00	
Mailing Address					2	9	2024	1		
City HOLLIDAYSBURG	State	Zij	Code (Plus	34)						
	PA	16	648				l	I		
Employer Name US HOTEL				Occupat	tion	RESTA	JRAN	IT OWNER		
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip	Code (Plus 4)	
			HOLLIDAY	'SBURG	j	PA		166	548	
Full Name of Contributor					мо	DAY	YEAR			
WILLIAM & VICTORIA COLLINS					MO	DAT	ILAK	\$	500.00	
Mailing Address					1	30	2024	1		
City HOLLIDAYSBURG	State	Zij	Code (Plus	(4)	_		===	`		
	PA	16	648					l		
Employer Name LINK COMPUTER CORI					Occupat	tion	COO			
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip	Code (Plus 4)	
			BELLWOO	D		PA		166	517	
Enter Crand Tatal of Bart Con School	lula I. Datailad C			Co otio	2		Γ		PAGE TOTAL	
Enter Grand Total of Part C on Scheo	iule I, Detalled Si	umn	nary Page,	Section	on 3.			\$	1,500.00	

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 o	or Candidate		Report	ing Peri	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				МО	DAY	YEAR	\$	0.00
Mailing Address							\neg	
City	State	Zip Code (Plus 4)					
Receipt Description	•	,			I			
			. .:	_				PAGE TOTAL
Enter Grand Total of Part I	E on Schedule I, Detailed	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 Perio	d	
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	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)	\$	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	From: <u>1/1/20</u> 2				L/1/2024	To:	<u>3/4/2024</u>
				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				Re	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 Per	iod		
FRIENDS OF JIM GREGORY	From	1/1/2024	То:	<u>3/4/2024</u>

			•						
				DATE				AMOUNT	
To Whom Paid				МО	DAY	YEAR			
JIM GREGORY				1.0					
Mailing Address				1	8	2024	\$	50.00	
City	TYRONE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		PA	16686	REIMBL	JRSEMENT				
To Whom 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)	Description of Expenditure					
	PA 16602			ADVERTISING					
To Who	m Paid			мо	DAY	YEAR			
ALTOONA KIWANIS CLUB				140		TEAR			
Mailing Address				1	22	2024	\$	1,000.00	
City	HOLLIDAYSBURG	State	Zip Code (Plus 4)	Descrip	Description of Expenditure				
		PA	16648	ADVERTISING					
To Who	m Paid			мо	DAY	YEAR			
JIM GREGORY				140		ILAK			
Mailing Address			1	24	2024	\$	24.99		
City	TYRONE	State Zip Code (Plus 4			tion of Exp	enditure			
		PA	16686	REIMBURSEMENT					
To Whom Paid				мо	DAY	YEAR			
FRIENDSHIP FIRE COMPANY 1 INC				MO	DAI	ILAK			
Mailing 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 Whom Paid				МО	DAY	YEAR			
LN CONSULTING				140		ILAK			
Mailing Address				1	26	2024	\$	1,817.76	
City HARRISBURG State			Zip Code (Plus 4)	Description of Expenditure					

								PAGE 13
To Whom Paid				МО	DAY	YEAR		
ALTOONA RIFLE AND PISTOL CLUB								
Mailing Address				2	9	2024	\$	100.00
City	ALTOONA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	16601	ADVER1	TISING			
To Wi	nom Paid			мо	DAY	YEAR		
BLAIF	COUNTY CHAMBER OF COMME	RCE		МО		ILAK		
Mailing Address				2	9	2024	\$	302.00
City	ALTOONA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	16602	ADVERT	ΓISING			
To Wi	nom Paid			МО	DAY	YEAR		
ЈІМ G	REGORY			МО	DAT	TEAK		
Mailin	g Address			2	13	2024	\$	242.02
City	TYRONE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	16686	REIMBURSEMENT				
To W	nom Paid			МО	DAY	YEAR		
TYRO	NE EVENTS & PROMOTION	5		MO	DAI	ILAK		
Mailing Address			1	30	2024	\$	500.00	
City	TYRONE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	16686	ADVERTISING				
To Wi	nom Paid			МО	DAY	YEAR		
PRECIOUS LIFE				М		ILAK		
Mailin	g Address			2	9	2024	\$	1,000.00
City	ALTOONA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	16601	ADVERTISING				
To W	nom Paid			МО	DAY	YEAR		
CENT	RAL BLAIR RECREATION & amp;	PARK		1-10		1 Z/IIX		
Mailing Address			2	24	2024	\$	1,000.00	
City	ALTOONA	State	Zip Code (Plus 4)	Description of Expenditure				
		PA	16602	ADVERTISING				
To Whom Paid				МО	DAY	YEAR	_	_
BOY SCOUT TROOP 3032				1.10		LAIN		
Mailing Address			2	16	2024	\$	250.00	
City	HOLLIDAYSBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	16648	ADVERT	ΓISING			
To Whom Paid				МО	DAY	YEAR		
HCRC				140		ILAK		
Mailin	Mailing Address			2	21	2024	\$	100.00
City	HUNTINGDON	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	16652	ADVERTISING				

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