

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 :		20180045		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF JIM GREGORY												
Street Address:												
City: TYRONE						State: PA			Zip Code: 16686			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1. <input checked="" type="checkbox"/>	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2024	FILING METHOD () CHECK ONE			PAPER <input checked="" type="checkbox"/>	DISKETTE				
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code
						MO	DAY	YEAR	REP			
						11	5	2024	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		1	1	2024		3	4	2024				
A. Amount Brought Forward From Last Report						\$ 106,456.22						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 4,750.00						
C. Total Funds Available (Sum Of Lines A and B)						\$ 111,206.22						
D. Total Expenditures (From Schedule III)						\$ 8,186.77						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 103,019.45						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 219.00						
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 0.00						

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
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 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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 4,750.00
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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			
				From:	To:		
				DATE	AMOUNT		
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					

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

PAGE TOTAL	
\$	0.00

PART B 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 JIM GREGORY	From: <u>1/1/2024</u> To: <u>3/4/2024</u>

DATE				AMOUNT	
Full Name of Contributor				MO	DAY
WILLIAM STAUFFER & JULIE MILLER				YEAR	
Mailing Address					
City ALLENTOWN	State PA	Zip Code (Plus 4) 18102	2	22	2024
				\$ 150.00	
Full Name of Contributor				MO	DAY
DAVID & BETTY BURKET				YEAR	
Mailing Address					
City ROARING SPRING	State PA	Zip Code (Plus 4) 16637	2	22	2024
				\$ 200.00	
Full Name of Contributor				MO	DAY
NEIL & MARILYN PORT				YEAR	
Mailing Address					
City HOLLIDAYSBURG	State PA	Zip Code (Plus 4) 16648	2	22	2024
				\$ 100.00	
Full Name of Contributor				MO	DAY
DIANE OSGOOD				YEAR	
Mailing Address					
City HOLLIDAYSBURG	State PA	Zip Code (Plus 4) 16648	2	22	2024
				\$ 100.00	
Full Name of Contributor				MO	DAY
DENNIS & HOLLY OCONNOR				YEAR	
Mailing Address					
City HOLLIDAYSBURG	State PA	Zip Code (Plus 4) 16648	2	9	2024
				\$ 100.00	
Full Name of Contributor				MO	DAY
ANTHEA GERMANO				YEAR	
Mailing Address					
City ALTOONA	State PA	Zip Code (Plus 4) 16602	1	22	2024
				\$ 250.00	
Full Name of Contributor				MO	DAY
CARL & NANCY CRIDER				YEAR	
Mailing Address					
City TYRONE	State PA	Zip Code (Plus 4) 16686	1	8	2024
				\$ 250.00	

Full Name of Contributor SANDRA & ROBERT DELGROSSO			MO	DAY	YEAR	\$ 250.00
Mailing Address			1	8	2024	
City TYRONE	State PA	Zip Code (Plus 4) 16686				
Full Name of Contributor JAMES DELGROSSO			MO	DAY	YEAR	\$ 250.00
Mailing Address			1	8	2024	
City ALTOONA	State PA	Zip Code (Plus 4) 16601				
Full Name of Contributor JOSEPH & LINDA DELGROSSO			MO	DAY	YEAR	\$ 250.00
Mailing Address			1	8	2024	
City TYRONE	State PA	Zip Code (Plus 4) 16686				
Full Name of Contributor SHERRY & MICHAEL DELGROSSO			MO	DAY	YEAR	\$ 250.00
Mailing Address			1	8	2024	
City ALTOONA	State PA	Zip Code (Plus 4) 16601				

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 FRIENDS OF JIM GREGORY	Reporting Period From: <u>1/1/2024</u> To: <u>3/4/2024</u>
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				DATE			AMOUNT		
Full Name of Contributing Committee					MO	DAY	YEAR	\$	1,000.00
FRIENDS OF CHRIS GEBHARD									
Mailing Address					1	22	2024		
City	LEBANON		State	PA				Zip Code (Plus 4)	17042

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

PAGE TOTAL
\$ 1,000.00

PART D
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 FRIENDS OF JIM GREGORY	Reporting Period From: <u>1/1/2024</u> To: <u>3/4/2024</u>
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				DATE		AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	\$	1,000.00
DONALD DETWILER								
Mailing Address				2	9	2024		
City		State	Zip Code (Plus 4)					
HOLLIDAYSBURG		PA	16648					
Employer Name				Occupation				
US HOTEL				RESTAURANT OWNER				
Employer Mailing Address/Principal Place of Business			City		State		Zip Code (Plus 4)	
			HOLLIDAYSBURG		PA		16648	
Full Name of Contributor				MO	DAY	YEAR	\$	500.00
WILLIAM & VICTORIA COLLINS								
Mailing Address				1	30	2024		
City		State	Zip Code (Plus 4)					
HOLLIDAYSBURG		PA	16648					
Employer Name				Occupation				
LINK COMPUTER CORP				COO				
Employer Mailing Address/Principal Place of Business			City		State		Zip Code (Plus 4)	
			BELLWOOD		PA		16617	

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

PAGE TOTAL
\$ 1,500.00

PART E 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 From: To:
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				DATE	AMOUNT		
Full Name				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					
Receipt Description							

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

PAGE TOTAL
\$ 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 PER CONTRIBUTOR			
TOTAL for the Reporting Period		(1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period		(2)	\$ 219.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period		(3)	\$ 0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)			\$ 219.00

SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate FRIENDS OF JIM GREGORY	Reporting Period From: <u>1/1/2024</u> To: <u>3/4/2024</u>
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			DATE			AMOUNT
Full Name of Contributor HOLLAND BROTHERS			MO	DAY	YEAR	\$ 219.00
Mailing Address			1	26	2024	
City DUNCANSVILLE	State PA	Zip Code (Plus 4) 16635				
Description of Contribution: FOOD SUPPLIES						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						PAGE TOTAL \$ 219.00

SCHEDULE II
PART G
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OVER \$250.00

Name of Filing Committee or Candidate	Reporting Period
	From: To:

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

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

				DATE	AMOUNT			
To Whom Paid				MO	DAY	YEAR	\$ 50.00	
JIM GREGORY								
Mailing Address				1	8	2024		
City	TYRONE	State	PA	Zip Code (Plus 4)	16686			Description of Expenditure
				REIMBURSEMENT				
To Whom Paid				MO	DAY	YEAR	\$ 300.00	
BLAIR COUNTY CHAMBER OF COMMERCE								
Mailing Address				1	12	2024		
City	ALTOONA	State	PA	Zip Code (Plus 4)	16602			Description of Expenditure
				ADVERTISING				
To Whom Paid				MO	DAY	YEAR	\$ 1,000.00	
ALTOONA KIWANIS CLUB								
Mailing Address				1	22	2024		
City	HOLLIDAYSBURG	State	PA	Zip Code (Plus 4)	16648			Description of Expenditure
				ADVERTISING				
To Whom Paid				MO	DAY	YEAR	\$ 24.99	
JIM GREGORY								
Mailing Address				1	24	2024		
City	TYRONE	State	PA	Zip Code (Plus 4)	16686			Description of Expenditure
				REIMBURSEMENT				
To Whom Paid				MO	DAY	YEAR	\$ 1,500.00	
FRIENDSHIP FIRE COMPANY 1 INC								
Mailing Address				2	22	2024		
City	ROARING SPRING	State	PA	Zip Code (Plus 4)	16673			Description of Expenditure
				ADVERTISING				
To Whom Paid				MO	DAY	YEAR	\$ 1,817.76	
LN CONSULTING								
Mailing Address				1	26	2024		
City	HARRISBURG	State	PA	Zip Code (Plus 4)	17101			Description of Expenditure
				ADVERTISING				

To Whom Paid			MO	DAY	YEAR	\$ 100.00
ALTOONA RIFLE AND PISTOL CLUB						
Mailing Address			2	9	2024	
City	ALTOONA	State	Zip Code (Plus 4)	Description of Expenditure		
		PA	16601	ADVERTISING		
To Whom Paid			MO	DAY	YEAR	\$ 302.00
BLAIR COUNTY CHAMBER OF COMMERCE						
Mailing Address			2	9	2024	
City	ALTOONA	State	Zip Code (Plus 4)	Description of Expenditure		
		PA	16602	ADVERTISING		
To Whom Paid			MO	DAY	YEAR	\$ 242.02
JIM GREGORY						
Mailing Address			2	13	2024	
City	TYRONE	State	Zip Code (Plus 4)	Description of Expenditure		
		PA	16686	REIMBURSEMENT		
To Whom Paid			MO	DAY	YEAR	\$ 500.00
TYRONE EVENTS & PROMOTIONS						
Mailing Address			1	30	2024	
City	TYRONE	State	Zip Code (Plus 4)	Description of Expenditure		
		PA	16686	ADVERTISING		
To Whom Paid			MO	DAY	YEAR	\$ 1,000.00
PRECIOUS LIFE						
Mailing Address			2	9	2024	
City	ALTOONA	State	Zip Code (Plus 4)	Description of Expenditure		
		PA	16601	ADVERTISING		
To Whom Paid			MO	DAY	YEAR	\$ 1,000.00
CENTRAL BLAIR RECREATION & PARK						
Mailing Address			2	24	2024	
City	ALTOONA	State	Zip Code (Plus 4)	Description of Expenditure		
		PA	16602	ADVERTISING		
To Whom Paid			MO	DAY	YEAR	\$ 250.00
BOY SCOUT TROOP 3032						
Mailing Address			2	16	2024	
City	HOLLIDAYSBURG	State	Zip Code (Plus 4)	Description of Expenditure		
		PA	16648	ADVERTISING		
To Whom Paid			MO	DAY	YEAR	\$ 100.00
HCRC						
Mailing Address			2	21	2024	
City	HUNTINGDON	State	Zip Code (Plus 4)	Description of Expenditure		
		PA	16652	ADVERTISING		

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL

\$ 8,186.77

