

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: 227 JEFFERSON AVENUE										
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	TO	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
 My Commission Expires _____
 MO DAY YR

 Signature of Person Submitting Report

 Printed Name

 Email

 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
 My Commission Expires _____
 MO DAY YR

 Signature of Candidate

 Printed Name

 Email

 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	
Mailing Address				\$ 0.00
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	YEAR	\$ 250.00
SHERRY & MICHAEL DELGROSSO				1	8	2024	
Mailing Address 151 DEERFIELD LANE							
City ALTOONA	State PA	Zip Code (Plus 4) 16601					
Full Name of Contributor				MO	DAY	YEAR	\$ 250.00
JOSEPH & LINDA DELGROSSO				1	8	2024	
Mailing Address 2016 BUMBLEBEE DRIVE							
City TYRONE	State PA	Zip Code (Plus 4) 16686					
Full Name of Contributor				MO	DAY	YEAR	\$ 250.00
JAMES DELGROSSO				1	8	2024	
Mailing Address RR3 BOX 419							
City ALTOONA	State PA	Zip Code (Plus 4) 16601					
Full Name of Contributor				MO	DAY	YEAR	\$ 250.00
SANDRA & ROBERT DELGROSSO				1	8	2024	
Mailing Address 625 WEST 14TH STREET							
City TYRONE	State PA	Zip Code (Plus 4) 16686					
Full Name of Contributor				MO	DAY	YEAR	\$ 250.00
CARL & NANCY CRIDER				1	8	2024	
Mailing Address 115 PARKSIDE DRIVE							
City TYRONE	State PA	Zip Code (Plus 4) 16686					
Full Name of Contributor				MO	DAY	YEAR	\$ 250.00
ANTHEA GERMANO				1	22	2024	
Mailing Address 307 S 20TH STREET							
City ALTOONA	State PA	Zip Code (Plus 4) 16602					

Full Name of Contributor DENNIS & HOLLY OCONNOR			MO	DAY	YEAR	\$ 100.00
Mailing Address 313 JONES STREET			2	9	2024	
City HOLLIDAYSBURG	State PA	Zip Code (Plus 4) 16648				
Full Name of Contributor DIANE OSGOOD			MO	DAY	YEAR	\$ 100.00
Mailing Address 803 HEDGE STREET			2	22	2024	
City HOLLIDAYSBURG	State PA	Zip Code (Plus 4) 16648				
Full Name of Contributor NEIL & MARILYN PORT			MO	DAY	YEAR	\$ 100.00
Mailing Address 310 PENN STREET			2	22	2024	
City HOLLIDAYSBURG	State PA	Zip Code (Plus 4) 16648				
Full Name of Contributor DAVID & BETTY BURKET			MO	DAY	YEAR	\$ 200.00
Mailing Address 1465 POLECAT ROAD			2	22	2024	
City ROARING SPRING	State PA	Zip Code (Plus 4) 16637				
Full Name of Contributor WILLIAM STAUFFER & JULIE MILLER			MO	DAY	YEAR	\$ 150.00
Mailing Address 119 S 16TH STREET			2	22	2024	
City ALLENTOWN	State PA	Zip Code (Plus 4) 18102				

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	
FRIENDS OF CHRIS GEBHARD				\$ 1,000.00
Mailing Address 1451 QUENTIN ROAD STE 400	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 WILLIAM & VICTORIA COLLINS				MO	DAY	YEAR	\$ 500.00
Mailing Address 607 CLARK STREET				1	30	2024	
City HOLLIDAYSBURG	State PA	Zip Code (Plus 4) 16648					
Employer Name LINK COMPUTER CORP				Occupation COO			
Employer Mailing Address/Principal Place of Business 140 STADIUM DR			City BELLWOOD	State PA	Zip Code (Plus 4) 16617		
Full Name of Contributor DONALD DETWILER				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 233 STONEHEDGE ROAD				2	9	2024	
City HOLLIDAYSBURG	State PA	Zip Code (Plus 4) 16648					
Employer Name US HOTEL				Occupation RESTAURANT OWNER			
Employer Mailing Address/Principal Place of Business 401 S JUNIATA STREET			City HOLLIDAYSBURG	State PA	Zip Code (Plus 4) 16648		

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: _____

				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 FRIENDS OF JIM GREGORY	Reporting Period 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 RECEIVED - 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	MO	DAY	YEAR	
HOLLAND BROTHERS				\$ 219.00
Mailing Address 16627 DUNNINGS HWY	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: _____
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				DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR		
Mailing Address					\$ 0.00
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		
JIM GREGORY	1	8	2024	\$	50.00
Mailing Address 227 JEFFERSON AVENUE					
City TYRONE					
State PA					
Zip Code (Plus 4) 16686					
Description of Expenditure REIMBURSEMENT					
To Whom Paid	MO	DAY	YEAR		
BLAIR COUNTY CHAMBER OF COMMERCE	1	12	2024	\$	300.00
Mailing Address 3900 INDUSTRIAL PARK DR					
City ALTOONA					
State PA					
Zip Code (Plus 4) 16602					
Description of Expenditure ADVERTISING					
To Whom Paid	MO	DAY	YEAR		
ALTOONA KIWANIS CLUB	1	22	2024	\$	1,000.00
Mailing Address 809 SPRUCE STREET					
City HOLLIDAYSBURG					
State PA					
Zip Code (Plus 4) 16648					
Description of Expenditure ADVERTISING					
To Whom Paid	MO	DAY	YEAR		
JIM GREGORY	1	24	2024	\$	24.99
Mailing Address 227 JEFFERSON AVENUE					
City TYRONE					
State PA					
Zip Code (Plus 4) 16686					
Description of Expenditure REIMBURSEMENT					
To Whom Paid	MO	DAY	YEAR		
FRIENDSHIP FIRE COMPANY 1 INC	2	22	2024	\$	1,500.00
Mailing Address 808 E MAIN STREET					
City ROARING SPRING					
State PA					
Zip Code (Plus 4) 16673					
Description of Expenditure ADVERTISING					
To Whom Paid	MO	DAY	YEAR		
LN CONSULTING	1	26	2024	\$	1,817.76
Mailing Address 121 STATE STREET					
City HARRISBURG					
State PA					
Zip Code (Plus 4) 17101					
Description of Expenditure ADVERTISING					

To Whom Paid ALTOONA RIFLE AND PISTOL CLUB			MO	DAY	YEAR	\$	100.00
Mailing Address 207 STONEY POINT			2	9	2024		
City ALTOONA	State PA	Zip Code (Plus 4) 16601	Description of Expenditure ADVERTISING				
To Whom Paid BLAIR COUNTY CHAMBER OF COMMERCE			MO	DAY	YEAR	\$	302.00
Mailing Address 3900 INDUSTRIAL PARK DR			2	9	2024		
City ALTOONA	State PA	Zip Code (Plus 4) 16602	Description of Expenditure ADVERTISING				
To Whom Paid JIM GREGORY			MO	DAY	YEAR	\$	242.02
Mailing Address 227 JEFFERSON AVENUE			2	13	2024		
City TYRONE	State PA	Zip Code (Plus 4) 16686	Description of Expenditure REIMBURSEMENT				
To Whom Paid TYRONE EVENTS & PROMOTIONS			MO	DAY	YEAR	\$	500.00
Mailing Address 1004 LOGAN AVENUE			1	30	2024		
City TYRONE	State PA	Zip Code (Plus 4) 16686	Description of Expenditure ADVERTISING				
To Whom Paid PRECIOUS LIFE			MO	DAY	YEAR	\$	1,000.00
Mailing Address 1716 12TH AVENUE			2	9	2024		
City ALTOONA	State PA	Zip Code (Plus 4) 16601	Description of Expenditure ADVERTISING				
To Whom Paid CENTRAL BLAIR RECREATION & PARK			MO	DAY	YEAR	\$	1,000.00
Mailing Address 2101 FIFTH AVENUE			2	24	2024		
City ALTOONA	State PA	Zip Code (Plus 4) 16602	Description of Expenditure ADVERTISING				
To Whom Paid BOY SCOUT TROOP 3032			MO	DAY	YEAR	\$	250.00
Mailing Address 801 ALLEGHENY STREET			2	16	2024		
City HOLLIDAYSBURG	State PA	Zip Code (Plus 4) 16648	Description of Expenditure ADVERTISING				
To Whom Paid HCRC			MO	DAY	YEAR	\$	100.00
Mailing Address PO BOX 61			2	21	2024		
City HUNTINGDON	State PA	Zip Code (Plus 4) 16652	Description of Expenditure ADVERTISING				

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

PAGE TOTAL

\$ 8,186.77

