Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificat	ion	20190)158			Report		CANDI	DATE	СОГ	IMITTEE	✓	LOBE	BYIST	
Number : Name of Filing (Committee. (Candida	te or la	obbvist:		Filed B		IILY PEOF		2					
							D, LI								
Street Address:															
City:	PITTSB	URGH						State:	PA		Zip Co	de: 15	212-2	317	
TYPE OF REPORT	6TH TUESDA PRE-PRIMAR		1.	2ND FRIDA PRIMARY	Y PRE-	- 2.	30 DA PRIM		POST-	3. X	AMENDMENT REPORT?		Yes	No	· 🗸
(place X to the right of	6TH TUESDA PRE-ELECTIO		4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 DA ELEC		POST-	6.	TERMIN REPORT		Yes	No	· 🗸
report type)	ANNUAL RE	EPORT	7.	Year 2024				NG METHO			PAPER	PAPER		DISKE	TTE
Name of Office S	L Sought by Ca	andidat	e:					DATE O	F ELEC	TION	District Number		Par	ty Code	County Code
REPRESENTAT	IVE IN THE	GENER		EMBLY				мо	DAY	YEAR	20	STH	DEN	1	02
		GENER						11		5 202	4	(SEE INS	STRUCTI	ONS FOR	CODES)
Summary of		and	мо	DAY	YEAR			мо	DAY	YEAR	F	OR OFFIC	E USE	ONLY	
Expenditures	s from:			4 9	20	024 T	0	5	1	3 202	4				
A. Amount Bro	ught Forwa	rd From	Last R	eport	•		\$			22,066.9	9				
B. Total Monet	B. Total Monetary Contributions And Receipts (From Schedule I						\$	\$ 7,496.00							
C. Total Funds	C. Total Funds Available (Sum Of Lines A and B)						\$			29,562.9	9				
D. Total Expen	ditures (Fro	m Sche	dule II	[)			\$			2,935.2	2				
E. Ending Cash	Balance (S	ubtract	Line D	From Line	C)		\$			26,627.7	7				
F. Value Of In-	Kind Contril	butions	Receive	ed (From S	chedu	le II)	\$			0.0)				
G. Unpaid Deb	ts And Oblig	ations	(From S	chedule IV	')		\$			9,271.5	D				
					AFF	IDAVI	T SE	CTION							
PART I - If this i		-		-							-				
I swear (or affirm correct and compl		ort, inclu	iding the	attached scl	hedules	s filed on	paper	or by elect	ronic me	dium, are t	o the best o	of my knov	vledge	and beli	ef , true
Sworn to and subs	scribed before day of	me this		20						Signatu	ire of Perso	on Submitt	ing Rep	oort	
		Signatur	e				-				Prii	nted Name	1		
My Commission E		2									Ema	ail			
	мс)	DA	AY	YR		-		Are	a Code	Daytir	ne Teleph	one Nu	mber	
Part II- If this is	a report of	a cand	idate's a	authorized	Comm	nittee, C	andid	ate shall	sign he	re.				_	
I swear (or affirm) No 320) as amend		est of m	y knowle	dge and beli	ef this	political	comm	ittee has n	ot violat	ed any prov	isions of th	ne act of Ju	ıne 3,19	937 (P.I	1333,
Sworn to and subse		me this									Signature	of Candida	ite		
	day of						-				Print	ed Name			
	Sig	nature					-								
My Commission Exp	pires										Ema	ail			
		мо	D/	AY	YR		•		Area C	ode	C	Daytime Te	elephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** KINKEAD, EMILY PEOPLE FOR From: <u>4/9/2024</u> **To:** <u>5/13/2024</u> 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 246.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 600.00 **Contributions Received From Political Committees (Part A)** 1,400.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 2,000.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 4,750.00 500.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 5,250.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount 7,496.00 \$ totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

\$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 Candidat	e		Re	porting F	Period			
KINKEAD, EMILY PEOPLE FOR			Fre	om:	<u>4/9/20</u>) <u>24</u> To:	1	<u>5/13/2024</u>
					DATE			AMOUNT
Full Name of Contributing Committee AFSCME COUNCIL 13 POL & LEG ACCT				мо	DAY	YEAR		
Mailing Address	Shake.	71-0-4-(0)		4	25	2024	\$	250.00
City HARRISBURG	State PA	Zip Code (Plus 17111-1507	4)					
Full Name of Contributing Committee				мо	DAY	YEAR		
Friends of Dan Gilman								
Mailing Address	l	1		5	9	2024	\$	250.00
City Pittsburgh	State	Zip Code (Plus	4)					
	PA	15217						
Full Name of Contributing Committee HIGHMARK PAC OF HIGHMARK INC				мо	DAY	YEAR		
Mailing Address							\$	100.00
City CAMP HILL	State	Zip Code (Plus	4)	5	13	2024	4	100.00
	РА	17089-0000	ŗ					

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

PAGE TOTAL

\$

Use this Part to it	emize all other 50.01 to \$250.0 butions from p	1 TO \$250.00 contribution 00 in the repo	s wit orting nittee	h an g peri s rep rting Pa	aggrega iod. ported in eriod <u>4/9/:</u>		A) p: <u>5/13/2024</u>
Full Name of Contributor			_		DATE		
Paul Ionadi				мо	DAY	YEAR	
Mailing Address	1	1					\$ 250.00
City Pittsburgh	State	Zip Code (Plus 4)	4	18	2024	
	РА	15211					
Full Name of Contributor			- 1	мо	DAY	YEAR	
Jessica McCurdy			-				
Mailing Address City Pittsburgh	State	Zip Code (Plus 4)	4	19	2024	\$ 100.00
, incodurgin	PA	15232					
Full Name of Contributor					DAY	VEAD	
Kevin P. Kinross				мо	DAY	YEAR	
Mailing Address	1						\$ 250.00
City Pittsburgh	State	Zip Code (Plus 4)	4	16	2024	
	PA	15237					
Full Name of Contributor				мо	DAY	YEAR	
Brian Bevan			_				
Mailing Address	State	Zip Code (Plus 4	,	5	8	2024	\$ 100.00
City Pittsburgh	State PA	15201		J	0	2024	
Full Name of Contributor		10201	-				
Nathaniel Yap				мо	DAY	YEAR	
Mailing Address							\$ 250.00
City Pittsburgh	State	Zip Code (Plus 4)	5	9	2024	
	PA	15232					
Full Name of Contributor				мо	DAY	YEAR	
Michael Butler				HO I	DAT		
Mailing Address	1	1					\$ 250.00
City Pittsburgh	State	Zip Code (Plus 4)	5	9	2024	
	PA	15203	_				
Full Name of Contributor				мо	DAY	YEAR	
Ellen Mazo Mailing Address	llen Mazo						\$ 100.00
City Pittsburgh	State	Zip Code (Plus 4)	5	9	2024	φ 100.00
	РА	15212					

Full Name of Contributor				DAY	YEAR		
David L. Demko	David L. Demko						
Mailing Address						\$	100.00
City Pittsburgh	State	Zip Code (Plus 4)	5	9	2024		
	PA	15212					
							PAGE TOTAL
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.							1,400.00

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			
KINKEAD, EMILY PEOPLE FOR			From:	<u>4</u> /	<u>/9/2024</u>	То:	<u>5/13/2024</u>
				DA	TE		AMOUNT
Full Name of Contributing Committee Teamsters Local Union 249				мо	DAY	YEAR	\$ 1,000.00
Mailing Address	I			4	24	2024	
City Pittsburgh	State PA	Zip Code 15201	e (Plus 4)				
Full Name of Contributing Committee CONSTELLATION ENERGY CORPORATIO COMMITTEE	N EMPLOYEE POLITIC	CAL ACTIO	N	мо	DAY	YEAR	\$ 1,500.00
Mailing Address				5	12	2024	
City WASHINGTON	State DC	Zip Code 20001	e (Plus 4)				
Full Name of Contributing Committee GREATER PA CARPENTERS PAC				мо	DAY	YEAR	\$ 1,500.00
Mailing Address				5	13	2024	_,
City PHILADELPHIA	State PA	Zip Code 19130	e (Plus 4)				
Full Name of Contributing Committee APSCUF/CAP(ASSN PA ST COL/UNIV FA	CL)	-		мо	DAY	YEAR	\$ 750.00
Mailing Address	-			5	9	2024	, 50100
City HARRISBURG	State PA	Zip Code 17101	e (Plus 4)				
							 PAGE TOTAL
iter Grand Total of Part C on Schedule I, Detailed Summary Page, Sect				n 3.			\$ 4,750.00

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			Repo	orting Pe	riod			
KINKEAD, EMILY PEOPLE FOR			Fron	From: <u>4/9/2024</u>			To: <u>5/13/2024</u>	
				DA	TE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	500.00
Michael Quatrini								
Mailing Address				4	23	2024	1	
City Pittsburgh	State	Zip Code (Plus	; 4)	4	23	2024	*	
	PA	15208						
Employer Name Quatrini Law Group				Occupat	ion	Attorne	ey	
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip C	ode (Plus 4)
		Pittsburgh	1		PA		1520	8
Enter Grand Total of Part C on Schee	dule I, Detailed Su	ummary Page,	Sectio	on 3.			\$	PAGE TOTAL 500.00
								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	2		Report	ing Peric	d				
			From:			То:			
				D	ATE			AMOUNT	r
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (Plus 4)						
Receipt Description									
		-	o .:					PAGE TO	TAL
Enter Grand Total of Part E on Sched	ule 1, Detailed Sumr	mary 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		
KINKEAD, EMILY PEOPLE FOR	From:	<u>4/9/2024</u> то:	<u>5/13/2024</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	「 F)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, I		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporting	Period				
			From:			То:		
				DATE			AMOUNT	
Full Name of Contributor				DAY	YEAR			
Mailing Address		_				 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:								
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Deta Section 2.				mary Pag	ie,		PAGE TOTA	L
						\$		0.00

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

Name of Filing Committee or Candidate			Rep	porting I	Period		
			Fro	m:		То:	
					DATE		AMOUNT
Full Name of Contributor				мо	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code(Plus 4)					
Employer of Contributor		•		Occupa	ation		
Employer Mailing Address/Principal Plac	e of Business	City	State	e Zip	Code(Plus 4)	Descri	ption of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-Kin	d Contributions D	etaile	d			PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Cand	idate		Reporti	ng Period					
KINKEAD, EMILY PEOPLE FOR			From	<u>4/</u>	9/2024	То:	<u>5/13/2024</u>		
				DATE			AMOUNT		
To Whom Paid			мо	DAY	YEAR				
Google Inc			HO						
Mailing Address			5	2	2024	\$	77.04		
City Mountain View	State	Zip Code (Plus	4) Descrip	tion of Exp	enditure				
	CA	94043	Email/C	Cloud Stora	ge				
To Whom Paid Google Inc			мо	DAY	YEAR				
Mailing Address			5	2	2024	\$	12.65		
City Mountain View	State	Zip Code (Plus	4) Descrip	Description of Expenditure					
	СА	94043	Additio	Additional Email/Cloud Storage					
To Whom Paid 1&1 IONOS Inc			мо	DAY	YEAR				
Mailing Address			5	3	2024	\$	69.40		
City Chesterbrook	State	Zip Code (Plus	4) Descrip	l tion of Exp	enditure				
	PA	19087	Website	Website Maintenance					
To Whom Paid			мо	DAY	YEAR				
Campaign Deputy			МО		TLAK				
Mailing Address			5	3	2024	\$	150.00		
City Louisville	State	Zip Code (Plus	4) Descrip	tion of Exp	enditure				
	КY	40202	Donor (Contact					
To Whom Paid			мо	DAY	YEAR				
Carver Murphy							1 000 00		
Mailing Address			4	30	2024	\$	1,000.00		
City Pittsburgh	State	Zip Code (Plus	4) Descrip	tion of Exp	enditure				
	PA	15212	Consult	ing Fee					
To Whom Paid			мо	DAY	YEAR				
Mailing Address	lailing Address		5	8	2024	\$	52.04		
City Dallas	State	Zip Code (Plus	4) Descrip	tion of Exp	ı enditure	1			
	тх	75202	Campai	Campaign Phone					

To Whom Paid			мо	DAY	YEAR		
MFStrategies, LLC			мо		TEAR		
Mailing Address			5	8	2024	\$	1,500.00
City Harrisburg State Zip Code (Plus 4)			Description of Expenditure				
PA 17108				ing Fee			
To Whom Paid			мо	DAY	YEAR		
ActBlue			MO		TEAR		
Mailing Address			5	13	2024	\$	74.09
City Somerville	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure		
	MA	02144	Process	ing Fees (N	lisc)		
							PAGE TOTAL
inter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	2,935.22

SCHEDULE IV STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate			Reporting Period					
KINKEAD, EMILY PEOPLE FOR			From:		<u>4/9/2024</u>	То:		<u>5/13/2024</u>
					DATE			Outstanding Balance of Debt
Name of Creditor				мо	DAY	YEAR		
Emily Kinkead								
Mailing Address			12	31	201	9 \$	9,100.00	
City Pittsburgh	State Zip Code (Plus 4) Description of Debt						•	
PA 15212				Candidate Campaign Contribution				
Name of Creditor				мо	DAY	YEAR		
Emily Kinkead				MO				
Mailing Address				3	5	202	1 \$	171.50
City Pittsburgh	State	Zip Code (P	lus 4)	4) Description of Debt				
PA 15212				Holiday Cards				
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.								PAGE TOTAL
							\$	9,271.50