

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 :		20220271		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF JILL COOPER												
Street Address:												
City: MURRYSVILLE						State: PA			Zip Code: 15668			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3. X	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
REPRESENTATIVE IN THE GENERAL ASSEMBLY						MO	DAY	YEAR	55	STH	REP	65
						11	5	2024	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		4	9	2024		5	13	2024				
A. Amount Brought Forward From Last Report						\$ 33,070.92						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 6,825.00						
C. Total Funds Available (Sum Of Lines A and B)						\$ 39,895.92						
D. Total Expenditures (From Schedule III)						\$ 3,923.61						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 35,972.31						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 232.80						
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 14,351.74						

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 JILL COOPER	From: <u>4/9/2024</u> To: <u>5/13/2024</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 75.00

2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	
Contributions Received From Political Committees (Part A)	\$ 1,750.00
All Other Contributions (Part B)	\$ 0.00
TOTAL for the Reporting Period (2)	\$ 1,750.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 3,000.00
All Other Contributions (Part D)	\$ 2,000.00
TOTAL for the Reporting Period (3)	\$ 5,000.00

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.)	\$ 6,825.00
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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			
FRIENDS OF JILL COOPER				From: <u>4/9/2024</u> To: <u>5/13/2024</u>			
				DATE		AMOUNT	

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
PA DENTAL PAC (PAD PAC)			4	29	2024	
Mailing Address						
City HARRISBURG	State PA	Zip Code (Plus 4) 17105				

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
Dental Society of Western PA-Refunded			4	18	2024	
Mailing Address						
City Monroeville	State PA	Zip Code (Plus 4) 15146				

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
Friends of Tim Oneal			4	17	2024	
Mailing Address						
City Harrisburg	State PA	Zip Code (Plus 4) 17112				

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
NRA-Political Victory Fund			4	17	2024	
Mailing Address						
City Fairfax	State VA	Zip Code (Plus 4) 22030				

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
PSCOA PAC			4	17	2024	
Mailing Address						
City HARRISBURG	State PA	Zip Code (Plus 4) 17110				

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
PA BANKERS PUB AFFAIRS (PABPAC)			4	17	2024	
Mailing Address						
City HARRISBURG	State PA	Zip Code (Plus 4) 17110-0000				

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
INDEPENDENCE BLUE CROSS PAC (IBC PAC)			4	17	2024	
Mailing Address						
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191031480				

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

PAGE TOTAL

\$ 1,750.00

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 JILL COOPER	Reporting Period From: <u>4/9/2024</u> To: <u>5/13/2024</u>
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				DATE	AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR
HIGHMARK PAC OF HIGHMARK INC						
Mailing Address						
City	CAMP HILL	State	PA	Zip Code (Plus 4)	17089-0000	
				4	17	2024
						\$ 250.00
Full Name of Contributing Committee				MO	DAY	YEAR
HIGHMARK PAC OF HIGHMARK INC						
Mailing Address						
City	CAMP HILL	State	PA	Zip Code (Plus 4)	17089-0000	
				4	17	2024
						\$ 250.00
Full Name of Contributing Committee				MO	DAY	YEAR
PA Committee for Affordable Housing						
Mailing Address						
City	Camp Hill	State	PA	Zip Code (Plus 4)	17011	
				4	17	2024
						\$ 1,000.00
Full Name of Contributing Committee				MO	DAY	YEAR
Friends of Joe Pittman						
Mailing Address						
City	Indiana	State	PA	Zip Code (Plus 4)	15701	
				4	17	2024
						\$ 1,000.00
Full Name of Contributing Committee				MO	DAY	YEAR
Taxpayers for Torren						
Mailing Address						
City	NEW OXFORD	State	PA	Zip Code (Plus 4)	17350	
				4	22	2024
						\$ 500.00

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

PAGE TOTAL
\$ 3,000.00

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 JILL COOPER	Reporting Period From: <u>4/9/2024</u> To: <u>5/13/2024</u>
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			DATE	AMOUNT
Full Name of Contributor Gary Bowser II			MO	DAY
Mailing Address City Murrysville State PA Zip Code (Plus 4) 15668			4	24
			2024	\$ 1,000.00
Employer Name Bowser Automotive			Occupation President	
Employer Mailing Address/Principal Place of Business			City Beaver Falls	State PA Zip Code (Plus 4) 15010

Full Name of Contributor Terence Jacobs			MO	DAY	YEAR	\$ 1,000.00
Mailing Address City Windermere State FL Zip Code (Plus 4) 34786			4	17	2024	
Employer Name Retired			Occupation Retired			
Employer Mailing Address/Principal Place of Business			City Windermere	State FL Zip Code (Plus 4) 34786		

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

PAGE TOTAL \$ 2,000.00

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 JILL COOPER		From: <u>4/9/2024</u> To: <u>5/13/2024</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)	\$ 232.80
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.)			\$ 232.80

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

Name of Filing Committee or Candidate FRIENDS OF JILL COOPER	Reporting Period From: <u>4/9/2024</u> To: <u>5/13/2024</u>
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	
House Republican Campaign Committee						\$ 232.80
Mailing Address						
City Harrisburg	State PA	Zip Code (Plus 4) 17101	4	25	2024	
Description of Contribution: In-kind: Postcards and postage						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						PAGE TOTAL \$ 232.80

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 JILL COOPER	From <u>4/9/2024</u> To: <u>5/13/2024</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
Rightway Compliance LLC				
Mailing Address	4	22	2024	\$ 150.00
City Harrisburg	State PA	Zip Code (Plus 4) 17106	Description of Expenditure Accounting and Compliance Service	
To Whom Paid	MO	DAY	YEAR	
Rightway Compliance LLC				
Mailing Address	5	13	2024	\$ 18.73
City Harrisburg	State PA	Zip Code (Plus 4) 17106	Description of Expenditure Printing and Shipping	
To Whom Paid	MO	DAY	YEAR	
Rightway Compliance LLC				
Mailing Address	5	13	2024	\$ 150.00
City Harrisburg	State PA	Zip Code (Plus 4) 17106	Description of Expenditure Accounting and Compliance Service	
To Whom Paid	MO	DAY	YEAR	
Penn Franklin News				
Mailing Address	4	11	2024	\$ 728.00
City Murrysville	State PA	Zip Code (Plus 4) 15668	Description of Expenditure Advertisement	
To Whom Paid	MO	DAY	YEAR	
Penn Franklin News				
Mailing Address	4	18	2024	\$ 728.00
City Murrysville	State PA	Zip Code (Plus 4) 15668	Description of Expenditure Advertisement	
To Whom Paid	MO	DAY	YEAR	
JFH Strategies LLC				
Mailing Address	4	22	2024	\$ 959.70
City Windber	State PA	Zip Code (Plus 4) 15963	Description of Expenditure Text Message Advertising	

To Whom Paid Italian-American Club			MO	DAY	YEAR	\$ 240.00
Mailing Address			4	23	2024	
City Export	State PA	Zip Code (Plus 4) 15632	Description of Expenditure Campaign Food			

To Whom Paid Capitol Promotions Inc			MO	DAY	YEAR	\$ 306.34
Mailing Address			4	22	2024	
City Glenside	State PA	Zip Code (Plus 4) 19038	Description of Expenditure Campaign Pens			

To Whom Paid Minuteman Press Printing			MO	DAY	YEAR	\$ 638.74
Mailing Address			4	19	2024	
City North Versailles	State PA	Zip Code (Plus 4) 15137	Description of Expenditure Campaign Literature			

To Whom Paid Winred Technical Services LLC			MO	DAY	YEAR	\$ 4.10
Mailing Address			4	15	2024	
City Arlington	State VA	Zip Code (Plus 4) 22219	Description of Expenditure Processing Fee			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 3,923.61

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 FRIENDS OF JILL COOPER	Reporting Period From: <u>4/9/2024</u> To: <u>5/13/2024</u>
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				DATE		Outstanding Balance of Debt	
Name of Creditor				MO	DAY	YEAR	
Jill Cooper							
Mailing Address				5	13	2024	\$ 14,037.59
City Murrys ville		State PA	Zip Code (Plus 4) 15668	Description of Debt Loans to campaign from 3/29/22 to 11/28/22			
Name of Creditor				MO	DAY	YEAR	
Jill Cooper							
Mailing Address				4	11	2024	\$ 179.15
City Murrys ville		State PA	Zip Code (Plus 4) 15668	Description of Debt Campaign Literature			
Name of Creditor				MO	DAY	YEAR	
Danielle Alisesky							
Mailing Address				5	13	2024	\$ 135.00
City Export		State PA	Zip Code (Plus 4) 15632	Description of Debt Advertisement- Franklin Regional Theatre Guild			
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL
							\$ 14,351.74