

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 : 20220607		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: THE FRIENDS OF JOE MCANDREW											
Street Address: 1718 OUTLOOK DRIVE											
City: VERONA				State: PA		Zip Code: 15147					
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.	AMENDMENT REPORT?	Yes	No <input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6. X	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	32	STH	DEM	02
					11	5	2024	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		10	22	2024		11	25	2024			
A. Amount Brought Forward From Last Report					\$		59,523.97				
B. Total Monetary Contributions And Receipts (From Schedule I)					\$		2,480.00				
C. Total Funds Available (Sum Of Lines A and B)					\$		62,003.97				
D. Total Expenditures (From Schedule III)					\$		8,832.08				
E. Ending Cash Balance (Subtract Line D From Line C)					\$		53,171.89				
F. Value Of In-Kind Contributions Received (From Schedule II)					\$		0.00				
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
THE FRIENDS OF JOE MCANDREW	From: <u>10/22/2024</u> To: <u>11/25/2024</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 80.00

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

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 1,900.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 1,900.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 250.00

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.)	\$ 2,480.00
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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 THE FRIENDS OF JOE MCANDREW	Reporting Period From: <u>10/22/2024</u> To: <u>11/25/2024</u>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;">DATE</td> <td style="width: 40%; border: none;">AMOUNT</td> </tr> </table>		DATE	AMOUNT
DATE	AMOUNT		

Full Name of Contributing Committee	MO	DAY	YEAR	\$ 250.00
AMERICA'S ELECTRIC COOPERATIVES PAC PENNSYLVANIA (ACRE)				
Mailing Address PO BOX 1266	10	22	2024	
City HARRISBURG				
State PA				
Zip Code (Plus 4) 17108				

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

PAGE TOTAL
\$ 250.00

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 THE FRIENDS OF JOE MCANDREW	Reporting Period From: <u>10/22/2024</u> To: <u>11/25/2024</u>
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				DATE	AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR
PA TRUCK PAC				10	22	2024
Mailing Address 910 LINDA LANE						
City CAMP HILL	State PA	Zip Code (Plus 4) 17011				
Full Name of Contributing Committee				MO	DAY	YEAR
PA TRUCK PAC				10	22	2024
Mailing Address 910 LINDA LANE						
City CAMP HILL	State PA	Zip Code (Plus 4) 17011				
Full Name of Contributing Committee				MO	DAY	YEAR
HDR, INC. EMPLOYEES OWNERS PAC				10	23	2024
Mailing Address 1917 S 67TH STREET						
City OMAHA	State NE	Zip Code (Plus 4) 68106				
Full Name of Contributing Committee				MO	DAY	YEAR
PGH FIRE FIGHTERS LOCAL #1 FIRE PAC				11	19	2024
Mailing Address 120 FLOWERS AVE						
City PITTSBURGH	State PA	Zip Code (Plus 4) 15207				

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

PAGE TOTAL \$ 1,900.00

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 THE FRIENDS OF JOE MCANDREW	Reporting Period From: <u>10/22/2024</u> To: <u>11/25/2024</u>
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				DATE		AMOUNT	
Full Name THE FRIENDS OF JOE MCANDREW				MO 11	DAY 25	YEAR 2024	\$ 250.00
Mailing Address 1718 OUTLOOK DR							
City VERONA		State PA	Zip Code (Plus 4) 15147				
Receipt Description VOIDED CHECK #1064 - C3 NEVER RECVD BY PAYEE							

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

PAGE TOTAL
\$ 250.00

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	
THE FRIENDS OF JOE MCANDREW		From: <u>10/22/2024</u> To: <u>11/25/2024</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)			\$ 0.00
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.)			\$ 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: To:
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						PAGE TOTAL \$ 0.00

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
THE FRIENDS OF JOE MCANDREW	From <u>10/22/2024</u> To: <u>11/25/2024</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
HOUSE DEMOCRATIC CAMPAIGN COMMITTEE				
Mailing Address 800 N THIRD ST SUITE 303	10	30	2024	\$ 8,000.00
City HARRISBURGH	State PA	Zip Code (Plus 4) 17101	Description of Expenditure CONTRIBUTION	
To Whom Paid	MO	DAY	YEAR	
FIRST NATIONAL BANK				
Mailing Address 330 COLLEGE AVE	10	30	2024	\$ 30.00
City OAKMONT	State PA	Zip Code (Plus 4) 15139	Description of Expenditure BANK FEE - WIRE XFER	
To Whom Paid	MO	DAY	YEAR	
JAMAR'S PLACE OF PEACE				
Mailing Address 11524 FRANKSTOWN AVE	11	12	2024	\$ 800.00
City PITTSBURGH	State PA	Zip Code (Plus 4) 15235	Description of Expenditure DONATION	
To Whom Paid	MO	DAY	YEAR	
ACTBLUE				
Mailing Address 366 SUMMER ST	11	25	2024	\$ 2.08
City SOMERVILLE	State MA	Zip Code (Plus 4) 02144	Description of Expenditure PROCESSING FEE - C6	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.				PAGE TOTAL \$ 8,832.08

