Campaign Finance Report

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

Filer Identificati Number :	on 202	20271			Repoi		CA	NDI	DATE		COM	AITTEE	V	LUBI	51151	
Name of Filing C	ommittee, Candi	date or L	obbyist:		FRIENI	DS OF	JILL	coo	PER				•			
Street Address:																
City:	MURRYSVILL	E					Stat	e:	PA			Zip Co	de: 15	668		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2.	30 DA		F	POST-	3.		AMENDN REPORT		Yes	No	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	5.	30 DA		F	POST-	6. X		TERMINA REPORT		Yes	No	✓
report type)	ANNUAL REPORT	7.	Year 2024				NG METHOD CHECK ONE				PAPER		\	DISKE	TTE	
Name of Office S	- Sought by Candida	ate:			-	-	DAT	ΈO	F ELEC	CTIC	N	District Number	Office Code	Par	ty Code	County Code
REDRESENTATI	VE IN THE GENE	ΡΔΙ Δςς	EMRI Y				МО		DAY	YI	EAR	55	STH	REP	•	65
KEIKESENIATI	VE IN THE GENE	IVAL ASS	CINDEI					11		5	2024		(SEE IN	STRUCTI	ONS FOR C	CODES)
	Receipts and	МО	DAY	YEAR			МО		DAY	ΥI	EAR	FC	OR OFFI	CE USE	ONLY	
Expenditures	trom:		10 22	20	024	то		11	2	25	2024					
A. Amount Brought Forward From Last Report						\$				25,	158.91					
B. Total Moneta	ary Contributions	And Rec	eipts (Fron	n Sche	dule I)	\$					104.10					
C. Total Funds Available (Sum Of Lines A and B)					\$				25,2	263.01						
D. Total Expenditures (From Schedule III)					\$				6	514.71						
E. Ending Cash Balance (Subtract Line D From Line C)					\$				24,6	48.30						
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedul	le II)	\$					0.00					
G. Unpaid Debt	s And Obligation	s (From S	Schedule IV	/)		\$				14,2	216.74			· 		
				AFF	IDAV	IT SE	CTI	NC								
PART I - If this is I swear (or affirm)	s a Committee report, inc	-	_						-		_		of my knov	wledge	and belie	ef , true
correct and comple																
Sworn to and subs	cribed before me th day of ——————	ıs	20			_				5	Signature	of Perso	n Submit	ing Rep	oort	
	Signat	ure				_						Prin	ted Name	1		
My Commission Ex	rpires											Ema	il			
	МО	D	AY	YR					Are	a Cod	le	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	•				•				_						_	
No 320) as amende		•	edge and beli	ief this	politica	i comm	iittee I	nas n	ot violat	ed an	y provis	ions of th	e act of J	ıne 3,1	937 (P.L.	. 1333,
Sworn to and subsc	ribed before me this day of	i	20								s	ignature	of Candid	ate		
						_						Printe	ed Name			
My Commission Exp	Signature ires					_						Ema	il			-
	мо	D	AY	YR		_			Area	Code		D	aytime T	elephor	ne Numbe	 er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period					
FRIENDS OF JILL COOPER	From:	10/22/20	<u>24</u> To:	11/25/2024			
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor							
TOTAL for the Reporting) Period	(1)	\$	0.00			
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)	All Other Contributions (Part B)						
TOTAL for the Reporting) Period	(2)	\$	104.10			
3. Contributions Received Over \$250.00 (From Part C and Part D)							
Contributions Received From Political Committees (Part C)			\$	0.00			
All Other Contributions (Part D)			\$	0.00			
TOTAL for the Reporting	Period	(3)	\$	0.00			
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	104.10			

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 Candida	lame of Filing Committee or Candidate				Reporting Period							
		F	rom:		То	:						
		•		DATE			AMOUNT					
Full Name of Contributing Committee			МО	DAY	YEAR							
Mailing Address						\$	0.00					
City	State	Zip Code (Plus 4)										

PAGE TOTAL
0.00

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

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 JILL COOPER

From: <u>10/22/2024</u> To:

11/25/2024

				DATE		AMOUNT
Full Name of Contributor	мо	DAY	YEAR			
Michelle Kish	140	DAI	ILAK			
Mailing Address						\$ 104.10
City Export	State	Zip Code (Plus 4)	11	4	2024	
	PA	15632				

PAGE TOTAL 104.10

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

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	me of Filing Committee or Candidate		Reporting Period						
			From:			То:			
				DA	TE		P	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			0.00
Mailing Address							- \$		0.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTA	AL
Enter Grand Total of Part C on Sche	dule I, Detailed Sun	nmary P	age, Sectio	n 3.			\$	(0.00

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	1			Reporting Period					
				Fron	n:		To):	
					D	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR	\$	0.00
Mailing Address									
City	State	Zi	p Code (Plus	s 4)					
Employer Name		•			Occupa	tion			
Employer Mailing Address/Principal Pl	ace of Business		City			State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detaile	ed Sumn	nary Page,	Section	on 3.			\$	PAGE TOTAL 0.00

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		Report	ing Peri	od			
			From:			To:		
		'			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	'						<u> </u>	
	- C		. .:	_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	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 Per	riod							
FRIENDS OF JILL COOPER	From:	<u>10/22/2024</u> To:	11/25/2024						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR									
TOTAL for the Reporting Pe	eriod (1)	\$	0.00						
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)									
TOTAL for the Reporting Pe	eriod (2)	\$	0.00						
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)									
TOTAL for the Reporting Pe	eriod (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,	•	\$	0.00						

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Car	me of Filing Committee or Candidate				Reporting Period					
			From:			То:				
				DATE			AMOUNT			
Full Name of Contributor				DAY	YEAR					
Mailing Address						7 \$		0.00		
City	State	Zip Code (Plus 4)								
Description of Contribution:	•		•	•		•				
					-					
Enter Grand Total of Part F o	n Schedule II, In-Ki	nd Contributions Detai	led Sun	mary Pa	ge,		PAGE TOTAL	•		
Section 2.						\$	(0.00		

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	ne of Filing Committee or Candidate			Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or C	andidate		Reporti	ng Period					
FRIENDS OF JILL COOPER			From	10/2	2/2024	То:	11/25/2024		
				DATE			AMOUNT		
To Whom Paid			мо	DAY	YEAR				
Minuteman Press Printing			1.10						
Mailing Address				4	2024	\$	447.21		
City North Versailles State Zip Code (Plus 4)				Description of Expenditure					
PA 15137				ds					
To Whom Paid			мо	DAY	YEAR				
Rightway Compliance LLC			MO		ILAK				
Mailing Address			11	6	2024	\$	163.40		
City Harrisburg	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•			
	PA	17112	Account	ting and Co	omplianc	e Service			
To Whom Paid			МО	DAY	YEAR				
Winred Technical Services LLC			MO	DAT	TEAK				
Mailing Address				12	2024	\$	4.10		
City Arlington State Zip Code (Plus 4)			Descrip	tion of Exp	enditure				

Armigeon	Description of Experiment	_							
	VA	22219	Processing Fee						
	PAGE TOTA								
Enter Grand Total of Expenditures of	on Page 1, Report C	over Page, Item D.		\$	614.71				

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							
FRIENDS OF JILL COOPER			From:	<u>10</u>)/22/2024	То:		11/25/2	2024	
					DATE				Outstanding Balance of Debt	
Name of Creditor Jill Cooper				мо	DAY	YEAR				
Mailing Address				11	28	2022	2	\$	14,037.59	
City Murrysville	State	Zip Code (Plus 4)			Description of Debt					
	PA	15668	Loans to campaign from 3/29/22 to 11/28/22							
Name of Creditor Jill Cooper				мо	DAY	YEAR				
Mailing Address				4	11	2024	4	\$	179.15	
City Murrysville State Zip Code (Plus 4) Description of						t				
	PA	15668 Campaign Literature				ire				
								PAC	GE TOTAL	
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							\$		14,216.74	