

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 :		20190132		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF MARCI MUSTELLO												
Street Address: 202 BELLEFIELD DRIVE												
City: BUTLER						State: PA			Zip Code: 16001			
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.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7. X	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			
		11	26	2024		12	31	2024				
A. Amount Brought Forward From Last Report						\$ 82,470.42						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 8,191.86						
C. Total Funds Available (Sum Of Lines A and B)						\$ 90,662.28						
D. Total Expenditures (From Schedule III)						\$ 2,616.03						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 88,046.25						
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

Signature

Printed Name

My Commission Expires

MO DAY YR

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 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 MARCI MUSTELLO	From: <u>11/26/2024</u> To: <u>12/31/2024</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 150.00

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)	\$ 150.00
TOTAL for the Reporting Period (2)	\$ 400.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 7,250.00
All Other Contributions (Part D)	\$ 300.00
TOTAL for the Reporting Period (3)	\$ 7,550.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 91.86

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.)	\$ 8,191.86
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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 MARCI MUSTELLO	From: 11/26/2024 To: 12/31/2024

DATE				AMOUNT
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
THE AFFORDABLE EDUCATION PAC						
Mailing Address			11	30	2024	
PO BOX 532						
City	CONSHOHOCKEN	State				
		PA				
Zip Code (Plus 4)						
		19428				

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

PAGE TOTAL
\$ 250.00

<div>PART B</div> <div>ALL OTHER CONTRIBUTIONS</div> <div>\$50.01 TO \$250.00</div> <div>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)</div>					
Name of Filing Committee or Candidate			Reporting Period		
FRIENDS OF MARCI MUSTELLO			From: 11/26/2024 To: 12/31/2024		
			DATE		AMOUNT
Full Name of Contributor			MO	DAY	YEAR
MURRAY SHAPIRO					
Mailing Address 229 THORNWOOD DRIVE					
City BUTLER	State PA	Zip Code (Plus 4) 16001	11	30	2024
					\$ 150.00
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.					PAGE TOTAL
					\$ 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	Reporting Period
FRIENDS OF MARCI MUSTELLO	From: <u>11/26/2024</u> To: <u>12/31/2024</u>

				DATE		AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 6,250.00
ALPAC				12	3	2024	
Mailing Address PO BOX 81							
City HERSHEY	State PA	Zip Code (Plus 4) 17033					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 1,000.00
IUPAT POLITICAL ACTION TOGETHER PAC				12	30	2024	
Mailing Address 7234 PARKWAY DRIVE							
City HANOVER	State MD	Zip Code (Plus 4) 21076					

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

PAGE TOTAL
\$ 7,250.00

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 MARCI MUSTELLO	Reporting Period From: <u>11/26/2024</u> To: <u>12/31/2024</u>
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			DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
ARMAND R CINGOLANI III	12	3	2024	\$ 300.00
Mailing Address 300 N MCKEAN STREET				
City BUTLER	State PA		Zip Code (Plus 4) 16001	
Employer Name CINGOLANI & CINGOLANI				Occupation ATTORNEY AT LAW
Employer Mailing Address/Principal Place of Business 300 N MCKEAN STREET		City BUTLER	State PA	Zip Code (Plus 4) 16001

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

PAGE TOTAL
\$ 300.00

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 FRIENDS OF MARCI MUSTELLO	Reporting Period From: <u>11/26/2024</u> To: <u>12/31/2024</u>
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				DATE	AMOUNT		
Full Name OLLIE'S BARGAIN OUTLETT				MO 12	DAY 11	YEAR 2024	\$ 63.90
Mailing Address 602 MORAIN POINT PLAZA							
City BUTLER		State PA	Zip Code (Plus 4) 16001				
Receipt Description RETURN OF UN-NEEDED HALLOWEEN CANDY FOR TRUNK OR TREAT							
Full Name OLLIE'S BARGAIN OUTLETT				MO 12	DAY 11	YEAR 2024	\$ 27.96
Mailing Address 602 MORAIN POINT PLAZA							
City BUTLER		State PA	Zip Code (Plus 4) 16001				
Receipt Description RETURN OF UN-NEEDED HALLOWEEN CANDY FOR TRUNK OR TREAT							

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

PAGE TOTAL	
\$	91.86

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 MARCI MUSTELLO		From: <u>11/26/2024</u> To: <u>12/31/2024</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
FRIENDS OF MARCI MUSTELLO	From <u>11/26/2024</u> To: <u>12/31/2024</u>

				DATE		AMOUNT	
To Whom Paid				MO	DAY	YEAR	
OLLIE'S BARGAIN OUTLET							
Mailing Address 602 MORAIN POINTE PLAZA				11	29	2024	\$ 52.43
City BUTLER		State PA	Zip Code (Plus 4) 16001	Description of Expenditure			
				CANDY FOR CHRISTMAS PARADE			
To Whom Paid				MO	DAY	YEAR	
BULLDOG BUSINESS SOLUTIONS							
Mailing Address 254 STATE ROUTE 168				12	2	2024	\$ 1,300.00
City NEW GALILEE		State PA	Zip Code (Plus 4) 16141	Description of Expenditure			
				CONSULTING SERVICES			
To Whom Paid				MO	DAY	YEAR	
UBER							
Mailing Address 1455 3RD STREET				12	9	2024	\$ 103.00
City SAN FRANCISCO		State CA	Zip Code (Plus 4) 94158	Description of Expenditure			
				PA SOCIETY TRANSPORTATION COSTS			
To Whom Paid				MO	DAY	YEAR	
MAILCHIMP							
Mailing Address 675 PONCE DE LEON AVENUE				12	23	2024	\$ 116.60
City ATLANTA		State GA	Zip Code (Plus 4) 30308	Description of Expenditure			
				MONTHLY SUBSCRIPTION - EMAIL DISTRIBUTION			
To Whom Paid				MO	DAY	YEAR	
HARVEY'S SWEET SHOPPE							
Mailing Address 148 NORTH MONROE STREET				12	10	2024	\$ 144.00
City BUTLER		State PA	Zip Code (Plus 4) 16001	Description of Expenditure			
				DESSERTS FOR VOLUNTEER LUNCH			
To Whom Paid				MO	DAY	YEAR	
MICHELE MUSTELLO							
Mailing Address 177 MEDICAL CENTER ROAD				12	10	2024	\$ 900.00
City CHICORA		State PA	Zip Code (Plus 4) 16025	Description of Expenditure			
				RNC HOTEL REIMBURSEMENT - JULY 15-19 2024			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
							\$ 2,616.03

