### **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 2019	0158			Repo Filed		<i>'</i> :	CANDI	DATE		СОМ	<b>ITTEE</b>	✓	LOBI	BYIST		
Name of Filing C	Committee, Candid	ate or L	obbyist:	ŀ	KINKE	AD	, EM	IILY PEO	PLE FO	R							
Street Address:																	
City:	PITTSBURGH							State:	PA			Zip Cod	de: 15	5212-2	317		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY P PRIMARY	RE-	2.		BO DA		POST-	3.		AMENDM REPORT		Yes	No	•	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4. <b>X</b>	2ND FRIDAY F ELECTION	PRE-	- 5.		0 DA		POST-	6.		TERMINA REPORT		Yes	No		<b>\</b>
report type)	ANNUAL REPORT	7.	<b>Year</b> 2025					IG METHO				PAPER		$\overline{}$	DISKE	TTE	
Name of Office S	Sought by Candida	te:	•					DATE 0	F ELE	CTIC	N	District Number	Office Code	Par	ty Code	Coun	
	,							МО	DAY	ΥI	AR	ituilibei	Toolic	DEN	1	02	
								11		4	2025		(SEE IN	STRUCTI	ONS FOR	CODES	)
Summary of Expenditures	Receipts and	МО	DAY YE	AR				МО	DAY	Y	EAR	FC	R OFFI	CE USE	ONLY		
Expenditures			5 6	20	)25	TC	<b>)</b>	6	(	9	2025						
A. Amount Bro	ught Forward Froi	n Last R	eport				\$			18,0	048.85						
B. Total Monet	ary Contributions	And Rec	eipts (From Sc	hec	lule I	)	\$			3,:	133.00						
C. Total Funds	Available (Sum O	Lines A	and B)				\$			21,	181.85						
D. Total Expend	ditures (From Sch	edule II	I)				\$			2,1	18.50						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)				\$			19,0	63.35						
F. Value Of In-	Kind Contribution:	s Receiv	ed (From Sche	dul	e II)		\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$			4,2	271.50			•			
			Α	13	[DA\	/IT	SE	CTION									
	s a Committee rep	•							-		_						
I swear (or affirm) correct and comple	) that this report, inc ete.	luding the	e attached schedu	ıles	filed o	n pa	aper (	or by elect	ronic m	edium	, are to t	the best o	f my kno	wledge	and beli	ef , tru	ue
Sworn to and subs	cribed before me this day of	5	20							9	Signature	of Perso	n Submit	ting Rep	ort		_
	Signatu	re				_						Prin	ted Name	<b>e</b>			_
My Commission Ex	cpires											Ema	il				-
	мо	D	AY	YR					Ar	ea Cod	le	Daytim	e Telepl	none Nu	mber		
Part II- If this is	a report of a can	didate's	authorized Cor	nm	ittee,	Ca	ndida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of r	ny knowl	edge and belief t	his	politic	al c	ommi	ittee has n	ot viola	ted ar	y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333	3,
Sworn to and subsc	ribed before me this										s	ignature (	of Candid	ate			-
	day of					_						Printe	d Name				-
My Commission Exp	Signature											Ema	il				-
My Commission Exp																	
	МО	D	AY	YR					Area	Code		D	aytime T	elephor	e Numb	er	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

	_			
Name of Filing Committee or Candidate	Reporting	Period		
KINKEAD, EMILY PEOPLE FOR	From:	5/6/202	<u>5</u> To:	6/9/2025
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	) Period	(1)	\$	108.00
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)			\$	225.00
TOTAL for the Reporting	) Period	(2)	\$	225.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	2,000.00
All Other Contributions (Part D)			\$	800.00
TOTAL for the Reporting	) Period	(3)	\$	2,800.00
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			\$	3,133.00

#### **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 o	r Candidate	F	Reporting	Period			
		F	rom:		То	I	
		•		DATE			AMOUNT
Full Name of Contributing Con	mmittee		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	I		
KINKEAD, EMILY PEOPLE FOR	From:	<u>5/6/2025</u>	То:	6/9/2025

DATE **AMOUNT Full Name of Contributor** мо DAY YEAR Robert Boulware **Mailing Address** 125.00 City Pittsburgh State Zip Code (Plus 4) 2025 PA 15212 **Full Name of Contributor** YEAR МО DAY Cory Hart **Mailing Address** 100.00 \$ State 6 2025 City Zip Code (Plus 4) Pittsburgh PA 15212

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

**PAGE TOTAL \$** 225.00

#### **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>5/</u>	6/2025	То:	6/9/2025
				DA	TE		AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR	
Penn Osteopathic Med PAC							\$ 1,000.00
Mailing Address				5	16	2025	ŕ
City Harrisburg	State	Zip Cod	e (Plus 4)	]	10	2023	
	PA	17111					
Full Name of Contributing Committee				мо	DAY	YEAR	
APSCUF/CAP(ASSN PA ST COL/UNIV I	ACL)				5711		<b>\$</b> 1,000.00
Mailing Address				5	15	2025	,,,,,,
City HARRISBURG	State	Zip Cod	e (Plus 4)	]	13	2023	
	PA	17101					

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

**PAGE TOTAL \$** 2,000.00

### 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 of Candidate			Кер	orting Pe	rioa			
KINKEAD, EMILY PEOPLE FOR			Fror	n:	5/6/2	<u>025</u> <b>T</b> o	o:	6/9/2025
				D/	ATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		200.00
Christian Ficara				140	DAI	ILAK	\$	300.00
Mailing Address				- 5	9	2025		
City New York	State	Zip Code (Plu	s 4)			2023		
	l <sub>NY</sub>	10005						
Employer Name Cresco Labs				Occupat	ion	Vice Pre	esiden	nt
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip C	Code (Plus 4)
		Chicago			IL		6066	61
		-			-			
Full Name of Contributor					DAY	VEAD		
Full Name of Contributor Sadie Restivo				МО	DAY	YEAR	\$	500.00
								500.00
Sadie Restivo	State	Zip Code (Plu	s 4)	<b>MO</b> 6	<b>DAY</b> 3	<b>YEAR</b> 2025		500.00
Sadie Restivo  Mailing Address	State PA	Zip Code (Plu 15203	s 4)					500.00
Sadie Restivo  Mailing Address		. ,	s 4)		3			
Sadie Restivo  Mailing Address  City Pittsburgh	PA	. ,	s 4)	- 6	3	2025	ve Dir	
Sadie Restivo  Mailing Address  City Pittsburgh  Employer Name PAAR	PA	15203		- 6	3	2025	ve Dir	rector Code (Plus 4)
Sadie Restivo  Mailing Address  City Pittsburgh  Employer Name PAAR  Employer Mailing Address/Principal Place	PA re of Business	City Pittsburg	1	- 6 Occupat	3 cion State	2025	ve Dir	rector Code (Plus 4)
Sadie Restivo  Mailing Address  City Pittsburgh  Employer Name PAAR	PA re of Business	City Pittsburg	1	- 6 Occupat	3 cion State	2025	ve Dir Zip C	rector Code (Plus 4) 03
Sadie Restivo  Mailing Address  City Pittsburgh  Employer Name PAAR  Employer Mailing Address/Principal Place	PA re of Business	City Pittsburg	1	- 6 Occupat	3 cion State	2025	ve Dir	rector Code (Plus 4) 03
Sadie Restivo  Mailing Address  City Pittsburgh  Employer Name PAAR  Employer Mailing Address/Principal Place	PA re of Business	City Pittsburg	1	- 6 Occupat	3 cion State	2025	ve Dir Zip C	rector Code (Plus 4) 03 PAGE TOTAL

## 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:		
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (	Plus 4)					
Receipt Description	•	•			•			
Forten Commit Tatal of Boot	F an Cabadala I Batallad	I C B	C					PAGE TOTAL
Enter Grand Total of Part	e on Schedule I, Detalled	summary 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 Perio	d	
KINKEAD, EMILY PEOPLE FOR	From:	<u>5/6/2025</u> <b>To:</b>	6/9/2025
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T 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 Ca	ndidate		Reportin	g Period			
			From:			To:	
				DATE			AMOUNT
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address						<b> </b>	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:	•		•	•			
				_	Г		
Enter Grand Total of Part F of Section 2.	n Schedule II, In-Ki	nd Contributions Detai	led Sum	nmary Pa	ge,		PAGE TOTAL
						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate				Rep	porting	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					Occup	ation			
Employer Mailing Address/Principal Plac	e of Business	City	у	State	e Zip	Code(Plus 4)	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, In-Kin	nd C	Contributions D	etaile	ed				PAGE TOTAL
Summary Page, Section 3.									0.00

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Per	riod		
KINKEAD, EMILY PEOPLE FOR	From	5/6/2025	То:	<u>6/9/2025</u>

Gainey for Mayor  Mailing Address  City Pittsburgh State Zip Code (Plus 4) De 15206  To Whom Paid Campaign Deputy  Mailing Address  City Louisville State Zip Code (Plus 4) De KY 40202  To Whom Paid Google Inc  Mailing Address  City Mountain View State Zip Code (Plus 4) De CA 94043  To Whom Paid	5 Description of Communication of Commun	DATE  DAY  16  ion of Exprine Contrib  DAY  2  ion of Exprine Contact  DAY  2  ion of Exprine Contact  DAY	YEAR 2025 enditure  YEAR 2025	\$	1,000.00 150.00
Gainey for Mayor  Mailing Address  City Pittsburgh State Zip Code (Plus 4) De 15206  To Whom Paid Campaign Deputy  Mailing Address  City Louisville State Zip Code (Plus 4) De KY 40202  To Whom Paid Google Inc  Mailing Address  City Mountain View State Zip Code (Plus 4) De KY 40202  To Whom Paid Google Inc  Mailing Address  City Mountain View State Zip Code (Plus 4) De CA 94043	5 Description of Communication of Commun	16 ion of Exponential DAY 2 ion of Exponentact DAY 2 ion of Exponential	2025 enditure ution  YEAR 2025 enditure  YEAR 2025	\$	150.00
Gainey for Mayor  Mailing Address  City Pittsburgh State Zip Code (Plus 4) De 15206  To Whom Paid Campaign Deputy  Mailing Address  City Louisville State Zip Code (Plus 4) De KY 40202  To Whom Paid KY 2002  To Whom Paid Google Inc  Mailing Address  City Mountain View State Zip Code (Plus 4) De CA 94043  To Whom Paid	5 Description of Communication of Commun	ion of Exponential DAY  2 ion of Exponentact  DAY  2 ion of Exponentact	enditure ution  YEAR  2025 enditure  YEAR  2025	\$	150.00
City Pittsburgh State Zip Code (Plus 4) De 15206 Car  To Whom Paid Campaign Deputy Mailing Address  City Louisville State Zip Code (Plus 4) De KY 40202 Do  To Whom Paid Google Inc  Mailing Address  City Mountain View State Zip Code (Plus 4) De CA 94043 Em	Pescripti Pescripti Pescripti Pescripti	ion of Exponential DAY  2 ion of Exponentact  DAY  2 ion of Exponentact	enditure ution  YEAR  2025 enditure  YEAR  2025	\$	150.00
To Whom Paid Campaign Deputy  Mailing Address  City Louisville  State KY  40202  Do  To Whom Paid Google Inc  Mailing Address  City Mountain View  State CA  State Zip Code (Plus 4) Me  Em  To Whom Paid  CA  94043  Em	MO 6 Description of Common Com	DAY  2 ion of Expontact  DAY  2 ion of Expontact	YEAR 2025 enditure  YEAR 2025		
To Whom Paid Campaign Deputy  Mailing Address  City Louisville  State  KY  40202  Do  To Whom Paid Google Inc  Mailing Address  City Mountain View  State  CA  2ip Code (Plus 4)  Me  Address  Me  To Whom Paid  CA  Paid  Me  To Whom Paid  CA  Me  To Whom Paid  To Whom Paid	6 Pescripti	DAY  2 ion of Exponentact  DAY  2 ion of Exponentact	YEAR 2025 enditure YEAR 2025 enditure		
Campaign Deputy  Mailing Address  City Louisville  State KY  40202  Do  To Whom Paid Google Inc  Mailing Address  City Mountain View  State CA  2ip Code (Plus 4) Me  Mo  Mo  Mo  To Whom Paid Mo  CA  94043  Em	6 Description 6 Description 6	2 ion of Expontact  DAY  2 ion of Exponential	2025 enditure  YEAR  2025 enditure		
Campaign Deputy  Mailing Address  City Louisville  State KY  40202  Do  To Whom Paid Google Inc  Mailing Address  City Mountain View  State CA  2ip Code (Plus 4) De KY  40202  Do  Mc  Address  Mc  To Whom Paid  CA  94043	6 Description 6 Description 6	2 ion of Expontact  DAY  2 ion of Exponential	2025 enditure  YEAR  2025 enditure		
City Louisville  State KY  40202  Do  To Whom Paid Google Inc  Mailing Address  City Mountain View  State CA  Zip Code (Plus 4) Mountain View  CA  Paid  To Whom Paid  Mountain View  To Whom Paid	Pescripti Onor Co MO 6 Descripti	ion of Exponentact  DAY  2 ion of Exponentact	YEAR 2025 enditure		
To Whom Paid Google Inc  Mailing Address  City Mountain View  CA  CA  MY  40202  MY  MY  CA  Pool  MY  Address  MY  MY  MY  MY  Address  CA  Address  Addres	MO 6	DAY 2 ion of Exp	YEAR 2025 enditure	\$	77.04
To Whom Paid Google Inc  Mailing Address  City Mountain View  CA  CA  State  State  CA  State  St	MO 6	DAY 2 ion of Exp	2025 enditure	\$	77.04
Google Inc  Mailing Address  City Mountain View  State Zip Code (Plus 4) De CA  CA 94043  To Whom Paid	6 Pescripti	2 ion of Exp	2025 enditure	\$	77.04
Google Inc  Mailing Address  City Mountain View  State Zip Code (Plus 4) Dec CA  CA 94043  To Whom Paid	6 Pescripti	2 ion of Exp	2025 enditure	\$	77.04
City Mountain View State Zip Code (Plus 4) De CA 94043 Em	escripti	ion of Exp	enditure	\$	77.04
To Whom Paid CA 94043 Em					
To Whom Paid	mail/Clo	oud Stora			
MG			ge		
	MO	DAY	YEAR		
Google Inc		DAI	ILAK		
Mailing Address	6	2	2025	\$	12.86
City Mountain View State Zip Code (Plus 4) De	escripti	ion of Exp	enditure		
CA 94043 Add	dditiona	al Email/C	Cloud Stor	rage	
To Whom Paid	мо	DAY	YEAR		
Unreal Catering HBG LLC		DAI	ILAK		
Mailing Address	5	31	2025	\$	365.70
City Camp Hill State Zip Code (Plus 4) De	escripti	ion of Exp	enditure		
PA 17011 Eve	vent Fo	ood			
To Whom Paid	мо	DAY	VEAD		
Crown Awards	-10	DAI	ILAK		
Mailing Address	5	22	2025	\$	83.75
City Hawthorne State Zip Code (Plus 4) De	escripti	ion of Exp	enditure	1	
NY 10532 Eve					
o Whom Paid		DAY	YEAR		

To Whom Paid				мо	DAY	YEAR		
Erin Wise				PIO	JA.	ILAK		
Mailing Address				6	3	2025	\$	157.17
City Pittsburgh	State	Zi	ip Code (Plus 4)	Description of Expenditure				
	PA	15	5206	Event Beverages				
To Whom Paid					DAY	YEAR		
Water Golf on City Island				МО		1 L/ux		
Mailing Address				6	4	2025	\$	271.98
<b>City</b> Harrisburg	State	Zi	ip Code (Plus 4)	Description of Expenditure				
PA 17101 Event Cost								
	111 mm							PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.								2,118.50

## 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>5/6/2025</u> <b>To:</b>				6/9/2025	
						DATE			tstanding lance of Debt	
Name of Creditor					мо	DAY	YEAR			
Emily Kinkead										
Mailing Address					12	31	2019	\$	4,271.50	
<b>City</b> Pittsb	urgh	State	Zip Code (P	lus 4)	Description of Debt					
PA 15212 Candidate Campaig					gn Con	tributi	on			
									PAGE TOTAL	
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.									4,271.50	