

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 :		20150217		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: MCCLINTON, JOANNA FRIENDS OF												
Street Address:												
City: HARRISBURG						State: PA			Zip Code: 17106			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY PRIMARY	POST-	3.	AMENDMENT REPORT?	Yes	<input checked="" type="checkbox"/>	No	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6. X	TERMINATION REPORT?	Yes		No	
	ANNUAL REPORT	7.	Year 2021	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	DEM 51			
						11	2	2021	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		10	19	2021		11	22	2021				
A. Amount Brought Forward From Last Report						\$ 277,454.25						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 50,500.00						
C. Total Funds Available (Sum Of Lines A and B)						\$ 327,954.25						
D. Total Expenditures (From Schedule III)						\$ 26,540.76						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 301,413.49						
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
MCCLINTON, JOANNA FRIENDS OF	From: <u>10/19/2021</u> To: <u>11/22/2021</u>

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)	\$ 0.00
TOTAL for the Reporting Period (2)	\$ 0.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 50,500.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 50,500.00

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.)	\$ 50,500.00
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PART B
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 From: To:
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DATE				AMOUNT
Full Name of Contributor	MO	DAY	YEAR	<div style="text-align: right;">\$ 0.00</div>
Mailing Address				
City State Zip Code (Plus 4)				

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

PAGE TOTAL
\$ 0.00

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
MCCLINTON, JOANNA FRIENDS OF	From: <u>10/19/2021</u> To: <u>11/22/2021</u>

				DATE		AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$5,000.00
Gaint Eagle, Inc				11	9	2021	
Mailing Address							
City	PITTSBURGH	State	PA	Zip Code (Plus 4)		15238	
Full Name of Contributing Committee				MO	DAY	YEAR	\$1,000.00
PA ARCHITECTS PAC				11	16	2021	
Mailing Address							
City	HARRISBURG	State	PA	Zip Code (Plus 4)		17101	
Full Name of Contributing Committee				MO	DAY	YEAR	\$1,000.00
Health Partners Of Philadelphia				11	4	2021	
Mailing Address							
City	PHILADELPHIA	State	PA	Zip Code (Plus 4)		19107	
Full Name of Contributing Committee				MO	DAY	YEAR	\$1,000.00
INDEPENDENCE BLUE CROSS PAC (IBC PAC)				11	4	2021	
Mailing Address							
City	PHILADELPHIA	State	PA	Zip Code (Plus 4)		191031480	
Full Name of Contributing Committee				MO	DAY	YEAR	\$1,000.00
INDEPENDENCE BLUE CROSS PAC (IBC PAC)				11	4	2021	
Mailing Address							
City	PHILADELPHIA	State	PA	Zip Code (Plus 4)		191031480	
Full Name of Contributing Committee				MO	DAY	YEAR	\$1,000.00
Pennsylvania Optometric Pac				11	4	2021	
Mailing Address							
City	HARRISBURG	State	PA	Zip Code (Plus 4)		17101	

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 2,500.00
COMCAST CORP & NBCUNIVERSAL PAC - USA			11	4	2021	
Mailing Address						
City	PHILADELPHIA	State	PA	Zip Code (Plus 4)		191030000
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 1,000.00
K & L Gates, LLP			11	4	2021	
Mailing Address						
City	PITTSBURGH	State	PA	Zip Code (Plus 4)		152220000
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 2,500.00
PNC PAC			11	4	2021	
Mailing Address						
City	Washington	State	DC	Zip Code (Plus 4)		20006
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 1,000.00
FEINBERG SHOPP PAC			11	4	2021	
Mailing Address						
City	Mechanicsburg	State	PA	Zip Code (Plus 4)		17055
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 2,500.00
ERIE INSURANCE PAC			11	4	2021	
Mailing Address						
City	ERIE	State	PA	Zip Code (Plus 4)		16530-0000
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 1,000.00
PPG Industries, Inc			11	4	2021	
Mailing Address						
City	PITTSBURGH	State	PA	Zip Code (Plus 4)		15272
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 1,000.00
Penn Osteopathic Med			11	4	2021	
Mailing Address						
City	HARRISBURG	State	PA	Zip Code (Plus 4)		17111
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 1,500.00
PECO PAC			11	4	2021	
Mailing Address						
City	PHILADELPHIA	State	PA	Zip Code (Plus 4)		19103-0000

Full Name of Contributing Committee GREATER PA CARPENTERS PEC			MO	DAY	YEAR	\$ 20,000.00
Mailing Address			10	24	2021	
City	PHILADELPHIA	State PA				

Full Name of Contributing Committee TRIAD STRATEGIES PA PAC			MO	DAY	YEAR	\$ 2,500.00
Mailing Address			10	24	2021	
City	HARRISBURG	State PA				

Full Name of Contributing Committee AQUA AMERICA INC H2O PAC (FEDERAL PAC)			MO	DAY	YEAR	\$ 2,500.00
Mailing Address			10	29	2021	
City	BRYN MAWR	State PA				

Full Name of Contributing Committee PA ASSN OF NURSE ANESTHETISTS PAC			MO	DAY	YEAR	\$ 2,500.00
Mailing Address			10	29	2021	
City	WORTHINGTON	State OH				

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

PAGE TOTAL
\$ 50,500.00

			DATE			AMOUNT	
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					
Employer Name			Occupation				
Employer Mailing Address/Principal Place of Business		City		State		Zip Code (Plus 4)	

PAGE TOTAL	
\$	0.00

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	
MCCLINTON, JOANNA FRIENDS OF		From: <u>10/19/2021</u> To: <u>11/22/2021</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 RECEIVED - 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
MCCLINTON, JOANNA FRIENDS OF	From <u>10/19/2021</u> To: <u>11/22/2021</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
MFStrategies, LLC				
Mailing Address	10	22	2021	\$ 7,007.52
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure Retainer & Reimbursement 10/21	
To Whom Paid	MO	DAY	YEAR	
MFStrategies, LLC				
Mailing Address	11	22	2021	\$ 10,051.88
City Harrisburg	State PA	Zip Code (Plus 4) 17108	Description of Expenditure Retainer & Reimbursement 11/21	
To Whom Paid	MO	DAY	YEAR	
USPS				
Mailing Address	10	30	2021	\$ 204.00
City Philadelphia	State PA	Zip Code (Plus 4) 19139	Description of Expenditure Annual Mailbox Rental Fees	
To Whom Paid	MO	DAY	YEAR	
Joanna McClinton				
Mailing Address	10	21	2021	\$ 264.36
City Philadelphia	State PA	Zip Code (Plus 4) 19139	Description of Expenditure Reimbursement Trip to Pittsburgh	
To Whom Paid	MO	DAY	YEAR	
Shields For Judge				
Mailing Address	10	19	2021	\$ 500.00
City Allentown	State PA	Zip Code (Plus 4) 18104	Description of Expenditure Donation	
To Whom Paid	MO	DAY	YEAR	
Friends Of Antonetta Stancu				
Mailing Address	11	19	2021	\$ 500.00
City Furlong	State PA	Zip Code (Plus 4) 18925	Description of Expenditure Donation	

To Whom Paid Judge Lane For Superior Court			MO	DAY	YEAR	\$ 1,000.00
Mailing Address			11	19	2021	
City Philadelphia	State PA	Zip Code (Plus 4) 19103	Description of Expenditure Donation			

To Whom Paid Summer Lee Exploratory Committee			MO	DAY	YEAR	\$ 1,000.00
Mailing Address			11	19	2021	
City Washington	State DC	Zip Code (Plus 4) 20003	Description of Expenditure Donation			

To Whom Paid Tamir Harper			MO	DAY	YEAR	\$ 600.00
Mailing Address			11	19	2021	
City Philadelphia	State PA	Zip Code (Plus 4) 19142	Description of Expenditure Election Day Services/Driver			

To Whom Paid Armah Fahnbulleh			MO	DAY	YEAR	\$ 5,000.00
Mailing Address			11	1	2021	
City Philadelphia	State PA	Zip Code (Plus 4) 19139	Description of Expenditure Professional Svs, Treasurer Jan-Nov 2021			

To Whom Paid Desaeree Jones			MO	DAY	YEAR	\$ 400.00
Mailing Address			10	26	2021	
City Philadelphia	State PA	Zip Code (Plus 4) 19143	Description of Expenditure Partial Contribution Refund			

To Whom Paid T D Bank			MO	DAY	YEAR	\$ 13.00
Mailing Address			10	29	2021	
City Philadelphia	State PA	Zip Code (Plus 4) 19101	Description of Expenditure Monthly Maintenance Fees October 2021			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 26,540.76

