### **Campaign Finance Report**

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

						ort I By	<b>/</b> :	CANDID				СОМ	AITTEE	<b>Y</b>	LUBI	51151	
Name of Filing C	Committee, Candid	ate or L	obbyist:	•	MCCL	.INT	ON,	JOAN	NA	FRIEN	DS C	)F		·			
Street Address:																	
City:	HARRISBURG							State	e:	PA			<b>Zip Code:</b> 17106				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2.		30 DA PRIMA		P	POST- 3.			AMENDMENT REPORT?		Yes	No	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	AY PRE	- 5.		30 DA ELECT		POST- 6. <b>X</b>			TERMINA REPORT		Yes	No	<b>\</b>	
report type)	ANNUAL REPORT	7.	<b>Year</b> 2021			ľ		IG ME					PAPER		$  \checkmark  $	DISKE	TTE
Name of Office S	Sought by Candida	te:						DAT	ΈO	F ELE	CTIC	N	District Number	Office Code	Par	ty Code	County Code
								МО		DAY		EAR			DEN	1	51
				_					11		2	2021		(SEE IN	STRUCTI	ONS FOR C	CODES)
Summary of Expenditures	Receipts and from:	МО	DAY	YEAR		T	•	МО		DAY		EAR	FC	R OFFI	CE USE	ONLY	
			10 19	) 20	021		<u> </u>		11		22	2021					
	ught Forward Fror ary Contributions			n Caba	dula I		\$					454.25 500.00					
	-			ii Scile	uuie 1		\$										
	Available (Sum Of						\$					954.25					
-	Balance (Subtract			<u></u>			\$					540.76					
	Balance (Subtractions  Kind Contributions				le TT\		\$				301,4	0.00					
	s And Obligations						\$ \$			0.00							
-					'IDA'	/T T		CTI	N				I				
PART I - If this is	s a Committee rep	ort. trea	surer sian							port, c	andi	date sid	ın here.				
	) that this report, incl	-	_									_		f my knov	wledge	and belie	ef , true
Sworn to and subs	cribed before me this	5									5	Signature	of Perso	n Submitt	ting Rep	oort	
	day of — ————																
	Signatu	re					•						Prin	ted Name	•		
My Commission Ex	MO	D	AY	YR						Are	ea Cod	de	Ema Daytin	il  ie Teleph	one Nu	mber	
Part II- If this is	a report of a cand	didate's	authorized	Comm	nittee	, Ca	ndid	ate sl	hall :	sign he	ere.						
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and bel	ief this	politic	cal o	omm	ittee h	ias n	ot viola	ted ar	ny provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333,
Sworn to and subsc	ribed before me this											s	ignature (	of Candida	ate		<del></del>
	day of ————————————————————————————————————												Printe	ed Name			
	Signature												F	:1			
My Commission Exp	pires												Ema				
	МО	D	AY	YR						Area Code Daytime Telephone Numb					e Numb	er	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
MCCLINTON, JOANNA FRIENDS OF	From:	10/19/202	<u>1</u> To:	11/22/2021
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g 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	J 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	g Period	(3)	\$	50,500.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g 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			\$	50,500.00

#### **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 or Candidate			Reporting Period						
		ı	From:		То	•			
		·		DATE			AMOUNT		
Full Name of Contributing Commit	tee		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					
			From:			То:		
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						

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.

Namo	Name of Filing Committee or Candidate Repor			Reporting	Period	) Period			
MCCL	LINTON, JOANNA FRIENDS OF			From:	10/1	.9/2021	То:	11/22/202	<u>!1</u>
					DA	TE		AMOUNT	
Full 1	Name of Contributing Committee				МО	DAY	YEAR		
Gaint	t Eagle, Inc							\$	5,000.00
Maili	ng Address				11	9	2021		
City	PITTSBURGH	<b>State</b> PA	<b>Zip Cod</b> 15238	e (Plus 4)					
Full 1	Name of Contributing Committee				МО	DAY	YEAR		
PA A	RCHITECTS PAC						LAK	<b> </b>	1,000.00
Maili	ng Address				- 11	16	2021	]	_,
City	HARRISBURG	State	Zip Cod	e (Plus 4)	1 **	10	2021		
		PA	17101			l			
Full Name of Contributing Committee  Health Partners Of Philadelphia					МО	DAY	YEAR	\$	1,000.00
Maili	ng Address				- 11	4	2021	*	1,000.00
City	PHILADELPHIA	State	Zip Cod	e (Plus 4)	1 11	+	2021		
		PA	19107						
	Name of Contributing Committee PENDENCE BLUE CROSS PAC (IBC	PAC)			МО	DAY	YEAR	\$	1,000.00
Maili	ng Address				11	4	2021		
City	PHILADELPHIA	State PA	<b>Zip Cod</b> 191031	<b>e (Plus 4)</b> 1480					
	Name of Contributing Committee	PAC)			мо	DAY	YEAR	\$	1,000.00
Maili	ng Address				- 11	4	2021	] '	1,000100
City	PHILADELPHIA	State	Zip Cod	e (Plus 4)	1 11		2021		
		PA	191031	.480					
Full N	Name of Contributing Committee				мо	DAY	YEAR		
Penn	sylvania Optometric Pac							\$	1,000.00
Mailii	ng Address				11	4	2021		
City	HARRISBURG	State	Zip Cod	e (Plus 4)					
		PA	17101						

							PAGL	- 6
Full Na	ame of Contributing Committee			МО	DAY	YEAR		
COMC	AST CORP & NBCUNIVERSAL PAG	C - USA					<b> </b>	2,500.00
Mailing	g Address			11	4	2021		·
City	PHILADELPHIA	State	Zip Code (Plus 4)			2021		
		PA	191030000					
Full Na	ame of Contributing Committee			МО	DAY	YEAR		
K & L	Gates, LLP						\$	1,000.00
Mailing	g Address			11	4	2021		
City	PITTSBURGH	State	Zip Code (Plus 4)					
		PA	152220000					
Full Na	ame of Contributing Committee			МО	DAY	YEAR		
PNC P	AC						\$	2,500.00
Mailing	g Address			11	4	2021		
City	Washington	State	Zip Code (Plus 4)					
		DC	20006					
Full Na	ame of Contributing Committee			МО	DAY	YEAR		
FEINB	ERG SHOPP PAC						\$	1,000.00
Mailing	g Address			11	4	2021		
City	Mechanicsburg	State	Zip Code (Plus 4)					
		PA	17055					
Full Na	ame of Contributing Committee			МО	DAY	YEAR		
ERIE I	INSURANCE PAC			1-10	DAI	ILAK	<b> </b>	2,500.00
Mailing	g Address			11	4	2021		,
City	ERIE	State	Zip Code (Plus 4)	] **		2021		
		PA	16530-0000					
Full Na	ame of Contributing Committee			МО	DAY	YEAR		
PPG Ir	ndustries, Inc				2111		<b>\$</b>	1,000.00
Mailin	g Address			11	4	2021		·
City	PITTSBURGH	State	Zip Code (Plus 4)			2021		
		PA	15272					
Full Na	ame of Contributing Committee		-	МО	DAY	YEAR		
Penn (	Osteopathic Med				2111		\$	1,000.00
Mailing	g Address			11	4	2021		•
City	HARRISBURG	State	Zip Code (Plus 4)	**		2021		
		PA	17111					
Full Na	Full Name of Contributing Committee			МО	DAY	YEAR		
PECO	ECO PAC						\$	1,500.00
Mailin	g Address	T	•	11	4	2021		
City	PHILADELPHIA	State	Zip Code (Plus 4)		1		I	
J.,		PA	19103-0000					

Full Name of Contributing Committee			мо	DAY	YEAR		
GREATER PA CARPENTERS PEC						\$	20,000.00
Mailing Address			10	24	2021		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
City PHILADELPHIA	State	Zip Code (Plus 4)	] '		2021		
	PA	19130					
Full Name of Contributing Committee				DAY	YEAR		
TRIAD STRATEGIES PA PAC					LAK	\$	2,500.00
Mailing Address				24	2021		2,300.00
City HARRISBURG	State	Zip Code (Plus 4)	10		2021		
	PA	17101					
	' ' '	17101	l			l	
Full Name of Contributing Committee	1	17101	МО	DAY	YEAR		
Full Name of Contributing Committee AQUA AMERICA INC H2O PAC (FEDER	1	17101	МО	DAY	YEAR	\$	2,500.00
	1	17101				\$	2,500.00
AQUA AMERICA INC H2O PAC (FEDER	1	Zip Code (Plus 4)	<b>MO</b>	<b>DAY</b> 29	<b>YEAR</b> 2021	\$	2,500.00
AQUA AMERICA INC H2O PAC (FEDER	AL PAC)					\$	2,500.00
AQUA AMERICA INC H2O PAC (FEDER	AL PAC) State	Zip Code (Plus 4)	- 10	29	2021	\$	2,500.00
AQUA AMERICA INC H2O PAC (FEDER Mailing Address City BRYN MAWR	AL PAC)  State PA	Zip Code (Plus 4)					
AQUA AMERICA INC H2O PAC (FEDER Mailing Address City BRYN MAWR  Full Name of Contributing Committee	AL PAC)  State PA	Zip Code (Plus 4)	10 MO	29 DAY	2021 YEAR	\$	2,500.00
AQUA AMERICA INC H2O PAC (FEDER Mailing Address City BRYN MAWR  Full Name of Contributing Committee PA ASSN OF NURSE ANESTHETISTS F	AL PAC)  State PA	Zip Code (Plus 4)	- 10	29	2021		

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

**PAGE TOTAL**\$ 50,500.00

### 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	ame of Filing Committee or Candidate			Reporting Period					
			Fror	n:		To	):		
				D	ATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR	\$	0.00	
Mailing Address							7		
City	State	Zip Code (Plu	s 4)						
Employer Name		•		Occupa	tion				
Employer Mailing Address/Principal Pla	ce of Business	City		•	State		Zip Co	ode (Plus 4)	
Enter Grand Total of Part C on Scho	dule I, Detailed S	Summary Page,	, Sectio	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:		
		<b>'</b>			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	lus 4)					
Receipt Description	<b>'</b>	<b>.</b>					<u> </u>	
				_				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 Peri	od						
MCCLINTON, JOANNA FRIENDS OF	From:	10/19/2021 <b>To:</b>	11/22/2021					
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 Can	ame of Filing Committee or Candidate				Reporting Period				
						То:			
				DATE			AMOUNT		
Full Name of Contributor				DAY	YEAR				
Mailing Address						<b>7</b> \$		0.00	
City	State	Zip Code (Plus 4)							
Description of Contribution:	•	•	•	•		·			
					-				
Enter Grand Total of Part F or	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	ame of Filing Committee or Candidate			Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUNT	-
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address									\$	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 <sub>l</sub>	p Code(Plus 4)	Descr	iptio	on of Contribut	ion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE TO	TAL
Summary Page, Section 3.										0.00

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period					
MCCLINTON, JOANNA FRIENDS OF	From	10/19/2021	То:	11/22/2021		

MFStrategies, LLC  Mailing Address  City Harrisburg  State PA  To Whom Paid MFStrategies, LLC  Mailing Address  City Harrisburg  State PA  To Whom Paid MFStrategies, LLC  Mailing Address  City Harrisburg PA  To Whom Paid PA  To Whom Paid	MO 11 Descript	DAY  22  tion of Exp r & Reimbu  DAY  22  tion of Exp Reimbu	YEAR 2021 enditure	\$ 10/21	7,007.52 10,051.88	
MFStrategies, LLC  Mailing Address  City Harrisburg State PA 17108 Re  To Whom Paid MFStrategies, LLC  Mailing Address  City Harrisburg State Zip Code (Plus 4) PA 17108 Re  City Harrisburg PA 17108 Re  To Whom Paid PA 17108 Re	Descript Retainer  MO  11  Descript Retainer	22  tion of Exp r & Reimbu  DAY  22  tion of Exp r & Reimbu	2021 enditure ursement YEAR 2021 enditure	10/21		
MFStrategies, LLC  Mailing Address  City Harrisburg State Zip Code (Plus 4) PA 17108  To Whom Paid MFStrategies, LLC  Mailing Address  City Harrisburg State Zip Code (Plus 4) PA 17108  To Whom Paid PA 17108  To Whom Paid PA 17108	Descript Retainer  MO  11  Descript Retainer	22  tion of Exp r & Reimbu  DAY  22  tion of Exp r & Reimbu	2021 enditure ursement YEAR 2021 enditure	10/21		
City Harrisburg State PA 17108 Re  To Whom Paid MFStrategies, LLC  Mailing Address  City Harrisburg State PA 17108 Re  To Whom Paid PA 17108 Re  To Whom Paid PA 17108 Re	MO  11  Descript Retainer	DAY  22  tion of Exp  A Reimbu  22  tion of Exp  R Reimbu	enditure ursement YEAR 2021 enditure	10/21		
To Whom Paid MFStrategies, LLC  Mailing Address  City Harrisburg  State PA  To Whom Paid USPS  PA  17108  Re  Zip Code (Plus 4) PA  17108  Re  MM  MM  MM  MM  MM  MM  MM  MM  MM	MO 11 Descript Retainer	DAY  22  tion of Exp r & Reimbu	YEAR 2021 enditure		10,051.88	
To Whom Paid MFStrategies, LLC  Mailing Address  City Harrisburg  PA  To Whom Paid USPS  M  M  M  M  M  M  M  M  M  M  M  M  M	MO 11 Descript Retainer	22 tion of Exp r & Reimbu	YEAR 2021 enditure		10,051.88	
MFStrategies, LLC  Mailing Address  City Harrisburg  State PA  To Whom Paid USPS  M  M  M  M  M  M  M  M  M  M  M  M  M	11 <b>Descript</b> Retainer	22 tion of Exp r & Reimbu	2021 enditure	\$	10,051.88	
MFStrategies, LLC  Mailing Address  City Harrisburg  PA  To Whom Paid USPS  State PA  To Whom Paid USPS	11 <b>Descript</b> Retainer	22 tion of Exp r & Reimbu	2021 enditure	\$	10,051.88	
City Harrisburg State Zip Code (Plus 4) Do Code (Plus 4) PA 17108 Results of the USPS To Whom Paid Marking Mar	<b>Descript</b> Retainer	tion of Exp	enditure	\$	10,051.88	
PA 17108 Re To Whom Paid USPS	Retainer	r & Reimbu				
To Whom Paid USPS			ursement			
USPS	мо			11/21		
USPS	МО	IDAV	YEAR			
Mailing Address		DAY	TEAR			
-	10	30	2021	\$	204.00	
City Philadelphia State Zip Code (Plus 4) Do	Description of Expenditure					
PA 19139 Ar	Annual Mailbox Rental Fees					
To Whom Paid	МО	DAY	YEAR			
Joanna McClinton	МО	DAY	TEAK			
Mailing Address	10	21	2021	\$	264.36	
City Philadelphia State Zip Code (Plus 4) Do	Description of Expenditure					
PA 19139 Re						
To Whom Paid	мо	DAY	VEAD			
Shields For Judge	МО	DAT	TEAR			
Mailing Address	10	19	2021	\$	500.00	
City Allentown State Zip Code (Plus 4) Do	Descript	tion of Exp	enditure	l		
PA 18104 Do	Donation					
To Whom Paid	мо	DAY	YEAR			
	MO	541	ILAK			
Friends Of Antonetta Stancu				\$	500.00	
Friends Of Antonetta Stancu  Mailing Address	11	19	2021		500.00	
Mailing Address		19				
City Philadelphia State Zip Code (Plus 4) Do 19139 Re  To Whom Paid Shields For Judge Mailing Address	Descript Reimbur MO	DAY	enditure rip to Pitt YEAR 2021	sburgh		

							P.A	AGE 14
To W	hom Paid			МО	DAY	YEAR		
Judge	Lane For Superior Cour	t		1-10				
Mailing Address			11	19	2021	\$	1,000.00	
<b>City</b> Phi	Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
		PA	19103	Donatio	n			
To Whom Paid				мо	DAY	YEAR		
Summer Lee Exploratory Committee								
Mailin	ng Address			11 19 2021			\$	1,000.00
City	Washington	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	DC 20003			Donation				
To Wi	hom Paid			МО	DAY	YEAR		
Tamir	r Harper							
Mailin	ng Address			11	19	2021	\$	600.00
City	Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
		PA	19142	Election	Day Servi	ices/Drive	er	
To W	hom Paid			мо	DAY	YEAR		
Arma	h Fahnbulleh			1-10				
Mailing Address			11	1	2021	\$	5,000.00	
City	Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
		PA	19139	Professional Svs, Treasure			r Jan-Nov	2021
To Whom Paid				мо	DAY	YEAR		
Desa	eree Jones			1-10		12/110		
Mailing Address         10         26         2021				\$	400.00			
City	Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA 19143			Partial Contribution Refund				
To W	hom Paid			мо	DAY	YEAR		
TDB	ank					7 = 7 0		
Mailing Address			10	29	2021	\$	13.00	
City	Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
		PA	19101	Monthly	Maintena	nce Fees	October 2	021
								PAGE TOTAL
⊏ntei	r Grand Total of Expen	aitures on Page 1, Re	port Cover Page, Item D	<b>'.</b>			\$	26,540.76