

# Campaign Finance Report

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

<b>Filer Identification Number :</b> 20150217		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>	<b>LOBBYIST</b>
<b>Name of Filing Committee, Candidate or Lobbyist:</b> MCCLINTON, JOANNA FRIENDS OF							
<b>Street Address:</b> PO BOX 60122							
<b>City:</b> HARRISBURG				<b>State:</b> PA		<b>Zip Code:</b> 17106	
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY PRIMARY	POST-PRIMARY	3.
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-ELECTION	6.
	AMENDMENT REPORT?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2019		<b>FILING METHOD ( ) CHECK ONE</b>		<b>PAPER</b> <input checked="" type="checkbox"/> <b>DISKETTE</b> <input type="checkbox"/>
<b>Name of Office Sought by Candidate:</b>				<b>DATE OF ELECTION</b>		<b>District Number</b>	<b>Office Code</b>
				MO DAY YEAR		DEM	
				11 5 2019		(SEE INSTRUCTIONS FOR CODES)	
<b>Summary of Receipts and Expenditures from:</b>		MO	DAY	YEAR	<b>FOR OFFICE USE ONLY</b>		
		4	2	2019			
<b>A. Amount Brought Forward From Last Report</b>				<b>TO</b>	MO	DAY	YEAR
					5	6	2019
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>				\$ 40,466.10			
<b>C. Total Funds Available (Sum Of Lines A and B)</b>				\$ 7,025.00			
<b>D. Total Expenditures (From Schedule III)</b>				\$ 47,491.10			
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>				\$ 4,822.24			
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>				\$ 42,668.86			
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>				\$ 0.00			
				\$ 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

Email

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**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
MCCLINTON, JOANNA FRIENDS OF	From: <u>4/2/2019</u> To: <u>5/6/2019</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 175.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 250.00
<b>All Other Contributions (Part B)</b>	\$ 1,600.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 1,850.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 4,000.00
<b>All Other Contributions (Part D)</b>	\$ 1,000.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 5,000.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>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.)</b>	\$ 7,025.00
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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.**

<b>Name of Filing Committee or Candidate</b>  MCCLINTON, JOANNA FRIENDS OF	<b>Reporting Period</b>  <b>From:</b> <u>4/2/2019</u> <b>To:</b> <u>5/6/2019</u>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%;"><b>DATE</b></td> <td style="width: 40%;"><b>AMOUNT</b></td> </tr> </table>		<b>DATE</b>	<b>AMOUNT</b>
<b>DATE</b>	<b>AMOUNT</b>		

<b>Full Name of Contributing Committee</b> HEALTH PARTNERS PLANS PAC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 901 MARKET ST STE 500			5	1	2019	
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191074496				

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

<b>PAGE TOTAL</b>
\$ 250.00

**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)**

<b>Name of Filing Committee or Candidate</b> MCCLINTON, JOANNA FRIENDS OF				<b>Reporting Period</b> From: <u>4/2/2019</u> To: <u>5/6/2019</u>			
				<b>DATE</b>		<b>AMOUNT</b>	
<b>Full Name of Contributor</b> MIRA BAYLSON				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 4120 APALOGEN RD				4	3	2019	
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191295504					
<b>Full Name of Contributor</b> JESSICA COCKRELL				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 233 DOUGLAS ST NE				4	3	2019	
<b>City</b> WASHINGTON	<b>State</b> DC	<b>Zip Code (Plus 4)</b> 200021031					
<b>Full Name of Contributor</b> HOWARD FISCHER				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b> 1420 LOCUST ST APT 22K				5	3	2019	
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191024213					
<b>Full Name of Contributor</b> KRISTIN GIVENS				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b> 305 W MONROE ST APT 1				4	9	2019	
<b>City</b> BLOOMINGTON	<b>State</b> IL	<b>Zip Code (Plus 4)</b> 617014444					
<b>Full Name of Contributor</b> DAVID L HYMAN				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 1650 MARKET ST FL 46				4	3	2019	
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191037305					
<b>Full Name of Contributor</b> CHARLES D. LOMAX				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 700 DUBLIN ROAD				4	15	2019	
<b>City</b> HILLTOWN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18927					

Full Name of Contributor			MO	DAY	YEAR	\$250.00
BERNARD SMALLEY						
Mailing Address 1845 WALNUT ST STE 2000						
City	PHILADELPHIA	State	4	3	2019	
		PA				
		Zip Code (Plus 4)				
		191034720				

Full Name of Contributor				MO	DAY	YEAR	\$150.00
ROBERT VOGEL							
Mailing Address2021 GREEN ST APT 1				4	3	2019	
CityPHILADELPHIA		StatePA	Zip Code (Plus 4)191303457				

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

<b>PAGE TOTAL</b>
\$ 1,600.00

# 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.**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
MCCLINTON, JOANNA FRIENDS OF	<b>From:</b> <u>4/2/2019</u> <b>To:</b> <u>5/6/2019</u>

				DATE		AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 1,000.00
AFSCME COUNCIL 13				5	1	2019	
Mailing Address 4031 EXECUTIVE PARK DR							
City HARRISBURG	State PA	Zip Code (Plus 4) 171111507					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
COALITION FOR PENNSYLVANIA'S FUTURE				5	1	2019	
Mailing Address PO BOX 12090							
City HARRISBURG	State PA	Zip Code (Plus 4) 171082090					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
ENERGY TRANSFER PAC				5	1	2019	
Mailing Address 400 W 15TH ST STE 720							
City AUSTIN	State TX	Zip Code (Plus 4) 787011661					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 1,000.00
PA AUTOMOTIVE ASSOCIATION PAC (PAA)				5	1	2019	
Mailing Address 1925 N FRONT ST							
City HARRISBURG	State PA	Zip Code (Plus 4) 171022214					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
PA MEDICAL SOCIETY PAC				5	1	2019	
Mailing Address PO BOX 8820							
City HARRISBURG	State PA	Zip Code (Plus 4) 171058820					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
VISION COMMITTEE				5	1	2019	
Mailing Address 2205 STRAWBERRY SQ							
City HARRISBURG	State PA	Zip Code (Plus 4) 171011801					

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

**PAGE TOTAL**

\$ 4,000.00

**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.)**

<b>Name of Filing Committee or Candidate</b>  MCCLINTON, JOANNA FRIENDS OF	<b>Reporting Period</b>  <b>From:</b> <u>4/2/2019</u> <b>To:</b> <u>5/6/2019</u>
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				DATE	AMOUNT		
<b>Full Name of Contributor</b> DUANE MORRIS GOVERNMENT AFFAIRS, LLP				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 500.00
<b>Mailing Address</b> 300 N 2ND ST PH				5	1	2019	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 171011303					
<b>Employer Name</b>				<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b> 300 N 2ND ST PH			<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 171011303		
<b>Full Name of Contributor</b> MUSTAFA RASHED				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 500.00
<b>Mailing Address</b> 200 S BROAD ST STE 850				4	3	2019	
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191023823					
<b>Employer Name</b> BELLVUE STRATEGIES				<b>Occupation</b> PRESIDENT AND CEO			
<b>Employer Mailing Address/Principal Place of Business</b> 200 S BROAD STSTE 850			<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191023823		

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

<b>PAGE TOTAL</b>
\$ 1,000.00



## 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: <span style="float: right;">To:</span>
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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.

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
MCCLINTON, JOANNA FRIENDS OF		From: <u>4/2/2019</u> To: <u>5/6/2019</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)		\$	0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)		\$	0.00
<b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>			
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

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# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
MCCLINTON, JOANNA FRIENDS OF	From <u>4/2/2019</u> To: <u>5/6/2019</u>

DATE				AMOUNT
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
ACTBLUE				
<b>Mailing Address</b> PO BOX 441146	4	1	2019	\$ 26.63
<b>City</b> WEST SOMERVILLE	<b>State</b> MA	<b>Zip Code (Plus 4)</b> 021440031	<b>Description of Expenditure</b> CREDIT CARD PROCESSING FEE	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
ACTBLUE				
<b>Mailing Address</b> PO BOX 441146	5	1	2019	\$ 18.38
<b>City</b> WEST SOMERVILLE	<b>State</b> MA	<b>Zip Code (Plus 4)</b> 021440031	<b>Description of Expenditure</b> CREDIT CARD PROCESSING FEE	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
CITIZENS FOR OMAR SABIR				
<b>Mailing Address</b> 7300 CITY AVE STE 360	4	26	2019	\$ 500.00
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191512218	<b>Description of Expenditure</b>	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
DARBY BOROUGH DEMOCRATIC COMMITTEE				
<b>Mailing Address</b> 25 SOUTHRIDGE RD	5	4	2019	\$ 500.00
<b>City</b> DARBY	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 190231113	<b>Description of Expenditure</b>	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
DELTA SIGMA THETA SORORITY, INC.				
<b>Mailing Address</b> PO BOX 1930	5	4	2019	\$ 250.00
<b>City</b> BOOTHWYN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 190617930	<b>Description of Expenditure</b>	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
EAST COAST BLACK AGE OF COMIC CONVENTION				
<b>Mailing Address</b> PO BOX 34059	5	4	2019	\$ 500.00
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191014059	<b>Description of Expenditure</b>	

<b>To Whom Paid</b> FRIENDS OF ROHAN HEPKINS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b> PO BOX 5504			5	4	2019	
<b>City</b> YEADON	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 190509504	<b>Description of Expenditure</b>			
<b>To Whom Paid</b> PAULINE LLOYD			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b> 6063 KINGSESSING AVE			5	4	2019	
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191421431	<b>Description of Expenditure</b> DONATION FOR KINGSESSING PARK			
<b>To Whom Paid</b> JOANNA MCCLINTON			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 182.99
<b>Mailing Address</b> PO Box 16668			5	4	2019	
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19139	<b>Description of Expenditure</b> Reimbursement			
<b>To Whom Paid</b> MFSTRATEGIES, LLC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 2,349.24
<b>Mailing Address</b> PO BOX 439			4	25	2019	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 171080439	<b>Description of Expenditure</b> CONSULTING AND REIMBURSEMENTS			
<b>To Whom Paid</b> RICK LOWE FOR DELAWARE COUNTY			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 205 N EDMONT ST			4	26	2019	
<b>City</b> MEDIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 190633015	<b>Description of Expenditure</b>			
<b>To Whom Paid</b> VFW DISTRICT 7			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 45.00
<b>Mailing Address</b> 137 N 10TH ST			4	26	2019	
<b>City</b> DARBY	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 190231608	<b>Description of Expenditure</b>			
<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b> \$ 4,822.24

