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	20240	0435				port ed B		CAND	IDATE		СОМ	4ITTEE	✓	LOB	BYIST		
Name of Filing C	committee	, Candida	ate or L	obbyist:		FRI	END	S OF	JACKIE	OBARA	4							
Street Address:																		
City:	PITTS	BURGH							State:	PA			Zip Cod	de: 15	236			
TYPE OF REPORT	6TH TUESDAY 1. 2ND FRIDAY PRE- PRE-PRIMARY PRIMARY 2. 30 DAY POST- PRIMARY							3. X AMENDMENT REPORT?				Yes	No	,	\			
(place X to the right of	6TH TUES		4.	2ND FRIDA	AY PRE	E-	5.	30 DA		POST-	6.		TERMINA REPORT		Yes	No)	\
report type)	ANNUAL	REPORT	7.	Year 2025	5				NG METH CHECK (PAPER		√	DISKE	TTE	
Name of Office S	ought by	Candidat	e:						DATE (OF ELI	ECTIO	NC	District Number	Office Code	Par	ty Code	Coun	
									МО	DAY	Y	EAR	5	CPJ	DEI	1	02	
JUDGE OF THE	COURT O	F COMM	ON PLE	AS					1	1	4	2025		(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of		and	МО	DAY	YEAR	₹			МО	DAY	Y	EAR	FO	R OFFIC	E USE	ONLY		
Expenditures	from:			5 6	5 2	025	Т	0		6	9	2025						
A. Amount Bro	ught Forw	ard From	ı Last R	eport				\$			20,	602.76						
B. Total Moneta	ary Contri	butions A	and Rec	eipts (Fror	n Sche	dule	e I)	\$			28,	793.00						
C. Total Funds	Available	(Sum Of	Lines A	and B)				\$			49,	395.76						
D. Total Expend	ditures (F	rom Sche	dule II	I)				\$			42,	061.84						
E. Ending Cash	Balance (Subtract	Line D	From Line	C)			\$			7,	333.92						
F. Value Of In-	Kind Cont	ributions	Receiv	ed (From S	Schedu	le II	I)	\$				0.00						
G. Unpaid Debt	s And Obl	igations	(From S	chedule I	V)			\$			110,	000.00		,				
					AFF	·ID/	AVI	T SE	CTION									
PART I - If this is	s a Commi	ttee repo	ort, trea	surer sign	here.	If th	nis is	a Car	ndidate ı	report,	cand	idate sig	ın here.					
I swear (or affirm) correct and comple		eport, inclu	uding the	attached so	chedule	s file	d on	paper	or by elec	tronic n	nediun	n, are to t	he best o	f my knov	/ledge	and beli	ef , tr	ue.
Sworn to and subs	cribed befo	re me this		20								Signature	of Perso	n Submitt	ing Re _l	oort		-
				-				-					Prin	ted Name				-
My Commission Ex	cpires	Signatur	e										Ema	il				-
	-	10	D	AY	YR			-		A	rea Co	de		e Teleph	one Nu	mber		_
Part II- If this is	a report	of a cand	idate's	authorized	Comn	nitte	ee, C	andid	ate shal	l sign l	nere.							
I swear (or affirm) No 320) as amende		best of m	y knowle	edge and be	lief this	poli	tical	comm	ittee has	not viol	ated a	ny provis	ions of th	e act of Ju	ine 3,1	937 (P.L	1333	3,
Sworn to and subsc		e me this										s	ignature o	of Candida	te			-
	day of —— -							_					Printe	d Name				_
	s	ignature						-						.a Hallic				_
My Commission Exp		<u> </u>											Ema	il				
	_	мо	D	AY	YR	ì		•		Area	a Code		Da	aytime Te	lephor	ne Numb	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	Period		
FRIENDS OF JACKIE OBARA	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)	\$	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)			\$	561.25
TOTAL for the Reporting) Period	(2)	\$	561.25
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	776.75
TOTAL for the Reporting) Period	(3)	\$	776.75
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	27,455.00
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			\$	28,793.00

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 Candida	te	F	eporting	Period			
		F	rom:		То	:	
				DATE			AMOUNT
Full Name of Contributing Committee			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 P	eriod			
FRIENDS OF JACKIE OBA	RA		From:	<u>5/6/2</u>	2025 T o	6/9/2025	
		1		DATE		AMOUNT	
Full Name of Contributor			мо	DAY	YEAR		
DANIEL J CUDDY							
Mailing Address						\$	155.50
City PITTSBURGH	State	Zip Code (Plus 4)	5	14	2025		
	PA	152411764					
Full Name of Contributor			мо	DAY	YEAR		
MARK GUBINSKY			1-10		ILAK		
Mailing Address						\$	103.75
City MC DONALD	State	Zip Code (Plus 4)	5	12	2025		
	PA	150572665					
Full Name of Contributor			мо	DAY	YEAR		
JEFF MARTIN			MO	DAT	TEAR		
Mailing Address						\$	52.00
City CARNEGIE	State	Zip Code (Plus 4)	5	13	2025		
	PA	151063708					
Full Name of Contributor			мо	DAY	YEAR		
SUZANNE M SWAN			MO	DAT	TEAR		
Mailing Address						\$	250.00
City BETHEL PARK	State	Zip Code (Plus 4)	5	16	2025		
	PA	151021423		1	I	I	

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

PAGE TOTAL \$ 561.25

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.

ame of Filing Committee or Candidate			Reporting	Period					
			From:			То:			
				DA	TE		A	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			0.00
Mailing Address							- \$		0.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TO	Γ AL
Enter Grand Total of Part C on Scheo	dule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$		0.00

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.)

ame of Filing Committee or Candidate Rep				Rep	porting Period						
FRIENDS OF JACKIE OBARA				Fror	m:	<u>5/6/2</u>	<u>025</u> To	:	6/9/2025		
					D/	ATE			AMOUNT		
Full Name of Contributor					мо	DAY	YEAR	T .	350.00		
MICHAEL MACHEN					140	DAI	ILAK	\$	259.00		
Mailing Address	T				5	16	2025				
City PITTSBURGH	State	Zi	p Code (Plus	4)							
	I PA	1 15	2322523					l			
Employer Name SELF EMPLOYED					Occupat	ion	ATTORN	EY			
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip C	Code (Plus 4)		
			PITTSBUR	.GH		PA		1521	.92213		
Full Name of Contributor					МО	DAV	VEAD	١.			
Full Name of Contributor MARIA SASINOSKI					МО	DAY	YEAR	\$	517.75		
								-	517.75		
MARIA SASINOSKI	State	Ziį	p Code (Plus	s 4)	MO 5	DAY 13	YEAR 2025	-	517.75		
MARIA SASINOSKI Mailing Address	State PA	1 1	o Code (Plus 32342515	s 4)				-	517.75		
MARIA SASINOSKI Mailing Address	PA	1 1	•	s 4)		13			517.75		
MARIA SASINOSKI Mailing Address City PITTSBURGH	PA np; BOCKIUS LLP	1 1	•	s 4)	- 5	13	2025	EY	517.75 Sode (Plus 4)		
MARIA SASINOSKI Mailing Address City PITTSBURGH Employer Name MORGAN, LEWIS & an	PA np; BOCKIUS LLP	1 1	2342515		- 5	13	2025	EY Zip C			
MARIA SASINOSKI Mailing Address City PITTSBURGH Employer Name MORGAN, LEWIS & and Employer Mailing Address/Principal Place	PA pp; BOCKIUS LLP ce of Business	15	City PITTSBUR	.GH	Occupat	13	2025	EY Zip C	Code (Plus 4)		
MARIA SASINOSKI Mailing Address City PITTSBURGH Employer Name MORGAN, LEWIS & an	PA pp; BOCKIUS LLP ce of Business	15	City PITTSBUR	.GH	Occupat	13	2025 ATTORN	EY Zip C 1521	Code (Plus 4) 91400 PAGE TOTAL		
MARIA SASINOSKI Mailing Address City PITTSBURGH Employer Name MORGAN, LEWIS & and Employer Mailing Address/Principal Place	PA pp; BOCKIUS LLP ce of Business	15	City PITTSBUR	.GH	Occupat	13	2025	EY Zip C 1521	Code (Plus 4) 91400		

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 Perio	od	
FRIENDS OF JACKIE OBARA	From:	<u>5/6/2025</u> To:	6/9/2025

			D	ATE		A	MOUNT
Full Name			МО	DAY	VEAD		27.455.00
MPAKT VIDEO			МО	DAY	YEAR	\$	27,455.00
Mailing Address			5	6	2025		
City DES MOINES	State	Zip Code (Plus 4)			2020		
	IA	503094858					
Receipt Description WIRE R	ETURNED (INTERNAL B	ANK ERROR)		-			

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

PAGE TOTAL \$ 27,455.00

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	
FRIENDS OF JACKIE OBARA	From:	<u>5/6/2025</u> To:	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 Candidate Re				Reporting Period					
			From:			To	·		
				DATE			AMOUNT		
Full Name of Contributor			МО	DAY	YEAR				
Mailing Address						7 \$		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	ımary 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	Reporting Period	
	From:	То:

				Fro	rom:			To:	То:		
						DATE				AMOUNT	
Full Name of Contributor					мо	DAY		YEAR			
Mailing Address				-					\$	0.00	
City	State		Zip Code(Plus 4)								
Employer of Contributor					Occu	pation					
Employer Mailing Address/Principal Plac	e of Business	Cit	ty	State	e Z	ip Code(Plu	s 4)	Descri	ption o	of Contribution	
Enter Grand Total of Part G on Scho Summary Page, Section 3.	edule II, In-Ki	nd (Contributions D	etaile	ed					PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period				
FRIENDS OF JACKIE OBARA	From	<u>5/6/2025</u>	То:	<u>6/9/2025</u>	

					DATE	AMOUNT					
To Who	om Paid			мо	DAY	YEAR					
DISRU	PTIVE DIGITAL			1-10		12/110					
Mailing Address					6	2025	\$	583.00			
City	HUNTINGDON	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•				
PA 166529783					DIGITAL MEDIA SERVICES						
To Who	om Paid			мо	DAY	YEAR					
DISRU	PTIVE DIGITAL			1-10							
Mailing	g Address			5	29	2025	\$	555.73			
City	HUNTINGDON	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•				
		PA	166529783	DIGITAL MEDIA SERVICES							
To Who	om Paid			мо	DAY	YEAR					
DISRU	PTIVE DIGITAL			110		12/110					
Mailing	g Address			6	5	2025	\$	583.00			
City HUNTINGDON State Zip Code (Plus 4)				Description of Expenditure							
PA 166529783					DIGITAL MEDIA SERVICES						
To Who	om Paid			мо	DAY	YEAR					
FACEB	оок			1-10							
Mailing	g Address			5	16	2025	\$	250.00			
City	MENLO PARK	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•				
		CA	940251456	DIGITA	L ADVERTI	SING					
To Who	om Paid			мо	DAY	YEAR					
MPAKT	VIDEO			140		ILAK					
Mailing	g Address			5	21	2025	\$	27,500.00			
City	DES MOINES	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
IA 503094858				DIGITAL ADVERTISING (PAYMENT REISSUE)							
To Who	om Paid			МО	DAY	YEAR					
NGP V	AN INC			1410		ILAN					
Mailing) Address			5	13	2025	\$	18.52			
City WASHINGTON State Zip Code (Plus 4)				Description of Expenditure							
		DC	200055738	ONLINE	DONATIO	N CREDI	T CARD FI	EES			
			-								

To Wi	nom Paid			МО	DAY	YEAR					
NGP VAN INC						12/11					
Mailing Address					15	2025	\$	5.06			
City	WASHINGTON	Description of Expenditure									
DC 200055738					ONLINE DONATION CREDIT CARD FEES						
To Wi	nom Paid			мо	DAY	YEAR					
NGP \	/AN INC			1-10		ILAK					
Mailing Address					18	2025	\$	9.46			
City	WASHINGTON	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
		DC	200055738								
To Wi	nom Paid				DAY	VEAD					
PNC E	BANK			МО	DAY	YEAR					
Mailin	g Address			6	2	2025	\$	95.00			
City	PITTSBURGH	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
		PA	152383123	BANK F	EE						
To Wi	nom Paid			МО	DAY	YEAR					
PRIM	ANTI BROS			1-10		1 = July					
Mailin	g Address			5	20	2025	\$	128.99			
City	PITTSBURGH	State	Zip Code (Plus 4)	4) Description of Expenditure							
		PA	152364519	ELECTION NIGHT GATHERING							
To Wi	nom Paid			МО	DAY	YEAR					
RAFF	PRINTING, INC			MO	DAT	TEAR					
Mailin	g Address			5	16	2025	\$	650.56			
City	PITTSBURGH	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
		PA	152030365	PRINTE	D MATERIA	ALS					
To Wi	nom Paid			мо	DAY	YEAR					
SCAL	E TO WIN			MO	DAT	TEAR					
Mailin	g Address			5	12	2025	\$	3,242.92			
City	SANTA ANA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
		CA	927031419	TEXTIN	G SERVICE	S					
To W	nom Paid	•	•								
SCAL	E TO WIN			МО	DAY	YEAR					
Mailin	g Address			5	21	2025	\$	1,725.52			
City SANTA ANA State Zip Code (Plus 4)					tion of Exp	enditure					
		CA	927031419	TEXTING SERVICES							
To Whom Paid				MO	DAY	YEAR					
SIX S	EVEN STRATEGIES, LLC			МО	DAT	TEAR					
Mailing Address					2	2025	\$	6,500.00			
City	ALLISON PARK	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	<u> </u>				
		PA	151010007	CONSU	LTING FEE						
		•	•	<u> </u>							

State PA								1,7	IGL 13	
SIX SEVEN STRATEGIES, LLC Mailing Address State Zip Code (Plus 4) Description of Expenditure Pa 151010007 REIMBURSEMENT MAILING FEE	To Who	om Paid			MO	DAY	YFAR			
City ALLISON PARK State PA 151010007 REIMBURSEMENT MAILING FEE	SIX SE	VEN STRATEGIES, LLC			МО		ILAK			
PA	Mailing Address					2	2025	\$	34.45	
No	City	ALLISON PARK	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
Mailing Address State PA			PA	151010007	REIMBU	JRSEMENT	MAILING	FEE		
STATEGIES, LLC Mailing Address State Zip Code (Plus 4) Description of Expenditure Pa State Pa	To Who	om Paid			MO	DAY	VEAD			
City ALLISON PARK State PA State State State PA State State PA State State PA State PA State State State State PA State PA State State PA State State PA State State State PA State S	SIX SE	EVEN STRATEGIES, LLC			М		ILAK			
PA	Mailing	Address			6	2	2025	\$	71.96	
To Whom Paid SIX SEVEN STRATEGIES, LLC Mailing Address City ALLISON PARK State Zip Code (Plus 4) Description of Expenditure PA SIX SEVEN STRATEGIES, LLC Mailing Address City ALLISON PARK State Zip Code (Plus 4) Description of Expenditure PA SIX SEVEN STRATEGIES, LLC Mailing Address City ALLISON PARK State Zip Code (Plus 4) Description of Expenditure PA State Sip Code (Plus 4) Description of Expenditure PA State Sip Code (Plus 4) Description of Expenditure PA State Sip Code (Plus 4) Description of Expenditure PA State Sip Code (Plus 4) Description of Expenditure PA State Sip Code (Plus 4) Description of Expenditure PA State Sip Code (Plus 4) Description of Expenditure PA State Sip Code (Plus 4) Description of Expenditure PA State Sip Code (Plus 4) Description of Expenditure PA State Sip Code (Plus 4) Description of Expenditure PA State Sip Code (Plus 4) Description of Expenditure PA State Sip Code (Plus 4) Description of Expenditure PAGE TOTA Enter Grand Total of Expenditures Page 1, Report Cover Page, Item D. PAGE TOTA PAGE T	City	ALLISON PARK	State	Zip Code (Plus 4)	Description of Expenditure					
MO			PA	151010007			ELECTIO	N DAY VO	LUNTEER	
SIX SEVEN STRATEGIES, LLC	To Who	om Paid			MO	DAY	YFAR			
City ALLISON PARK State Zip Code (Plus 4) Description of Expenditure PA 151010007 REIMBURSEMENT PRINTING COSTS To Whom Paid SIX SEVEN STRATEGIES, LLC Mailing Address 6 2 2025 \$ 2.	SIX SE	EVEN STRATEGIES, LLC			1-10		I Z/IIX			
PA 151010007 REIMBURSEMENT PRINTING COSTS TO Whom Paid SQUARESPACE, INC. State PAGE (Plus 4) PAGE TOTA TO Whom Paid SQUARESPACE, INC. MO DAY YEAR MO DAY YEAR MO DAY YEAR MO DAY YEAR State PAGE, INC. DAY Y	Mailing Address					2	2025	\$	45.15	
To Whom Paid SIX SEVEN STRATEGIES, LLC MO DAY YEAR YEAR Sate Sign Code (Plus 4) Description of Expenditure To Whom Paid SQUARESPACE, INC. MO DAY YEAR YEAR NIG Mailing Address 5 12 2025 \$ 33 City NEW YORK State NY Zip Code (Plus 4) Description of Expenditure NY PAGE TOTA Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. PAGE TOTA	City	ALLISON PARK	State	Zip Code (Plus 4)	Description of Expenditure					
SIX SEVEN STRATEGIES, LLC			PA	151010007	REIMBU	JRSEMENT	PRINTIN	G COSTS		
SIX SEVEN STRATEGIES, LLC	To Who	om Paid			МО	DAY	YEAR			
City ALLISON PARK State PA 151010007 To Whom Paid SQUARESPACE, INC. Mailing Address City NEW YORK State PA 151010007 State PA 100144383 PAGE TOTAL	SIX SE	EVEN STRATEGIES, LLC								
To Whom Paid SQUARESPACE, INC. Mailing Address City NEW YORK NY State NY 151010007 REIMBURSEMENT PARKING MO DAY YEAR 5 12 2025 \$ 33 Description of Expenditures WEBSITE DOMAIN FEE PAGE TOTAL PAGE TOTAL PAGE TOTAL	Mailing	Address			6	2	2025	\$	24.00	
To Whom Paid SQUARESPACE, INC. Mailing Address State NY 100144383 MO DAY YEAR YEAR 1 2025 \$ 33 Description of Expenditure WEBSITE DOMAIN FEE PAGE TOTA PAGE TOTA PAGE TOTA	City	ALLISON PARK	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
SQUARESPACE, INC. Mailing Address 5 12 2025 \$ 3. City NEW YORK State Zip Code (Plus 4) Description of Expenditure NY 100144383 PAGE TOTA PAGE TOTA PAGE TOTA			PA	151010007	REIMBURSEMENT PARKING					
Mailing Address 5 12 2025 \$ 33 City NEW YORK State Zip Code (Plus 4) Description of Expenditure NY 100144383 WEBSITE DOMAIN FEE PAGE TOTAL PAGE TOTAL PAGE TOTAL					мо	DAY	YEAR			
City NEW YORK State Zip Code (Plus 4) Description of Expenditure NY 100144383 WEBSITE DOMAIN FEE PAGE TOTA Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.		•				12	2025	•	38.52	
NY 100144383 WEBSITE DOMAIN FEE PAGE TOTA Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.	Mailing	Address			5	12	2025	—	30.32	
PAGE TOTA Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.	City	NEW YORK	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.			NY	100144383	WEBSIT	E DOMAIN	I FEE			
	Enter	Grand Total of Expendi	tures on Page 1. Re	eport Cover Page. Item D)_				PAGE TOTAL	
I I				.,	=			\$	42,061.84	

SCHEDULE IV 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				ng Period						
FRIENDS OF JACKIE OBARA From:			From:	<u>5/6/2025</u> To:			6/9/2025			
						DATE				standing ince of Debt
Name	of Creditor				мо	DAY	YEAR			
JACKIE OBARA				1.0						
Mailin	g Address				11	25	2024	4	\$	10,000.00
City	ELIZABETH	State	Zip Code (P	lus 4)	Descrip	tion of Deb	t			
		PA	150372550)	LOAN R	ECEIVED				
Name	of Creditor					DAY	VEAD			
JACKI	E OBARA				МО	DAY	YEAR			
Mailin	g Address				1	8	202!	5	\$	15,000.00
City ELIZABETH State Zip Code (Plus 4)				Description of Debt						
		PA	150372550)	LOAN RECEIVED					
Name	of Creditor				мо	DAY	YEAR			
JACKI	E OBARA				MO	DAT	IEAR			
Mailin	g Address				2	28	202!	5	\$	40,000.00
City	ELIZABETH	State	Zip Code (P	lus 4)	Description of Debt					
		PA	150372550)	LOAN R	ECEIVED				
Name	of Creditor				мо	DAY	YEAR			
JACKI	E OBARA				MO	DAT	IEAR			
Mailin	g Address				4	22	202!	5	\$	15,000.00
City	ELIZABETH	State	Zip Code (P	lus 4)	Description of Debt					
		PA	150372550)	LOAN RECEIVED					
Name	of Creditor					DAY	VEAD			
JACKI	E OBARA				МО	DAY	YEAR			
Mailing Address			5	2	202!	5	\$	30,000.00		
City	ELIZABETH	State	Zip Code (P	lus 4)	Descrip	tion of Deb	t			
		PA	150372550)	LOAN R	ECEIVED				
									PAGE TOTAL	
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item				G.			\$		110,000.00	