

# 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>		20160035		<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> FRIENDS OF JONATHAN FRITZ												
<b>Street Address:</b> 16 LONG MEADOW DR												
<b>City:</b> HONESDALE						<b>State:</b> PA			<b>Zip Code:</b> 18431			
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY PRIMARY	POST-	3. X	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2019	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>				
<b>Name of Office Sought by Candidate:</b>						<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	REP			
						11	5	2019	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>	
				5	7	2019		6	10	2019		
<b>A. Amount Brought Forward From Last Report</b>						\$ 21,176.00						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 0.00						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 21,176.00						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 2,281.00						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 18,895.00						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$ 0.00						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$ 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>
FRIENDS OF JONATHAN FRITZ	From: <u>5/7/2019</u> To: <u>6/10/2019</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 0.00

<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>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 0.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 0.00
<b>All Other Contributions (Part D)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 0.00

<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>	\$ 0.00
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## 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	
	From:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					

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

<b>PAGE TOTAL</b>
\$ 0.00

**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.)

Name of Filing Committee or Candidate	Reporting Period
	From: <span style="float: right;">To:</span>

				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)		

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

<b>PAGE TOTAL</b>
\$ 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: <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>	
FRIENDS OF JONATHAN FRITZ		From: <u>5/7/2019</u> To: <u>6/10/2019</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



**SCHEDULE II**  
**PART F**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OF \$50.01 TO \$250.00**

Name of Filing Committee or Candidate	Reporting Period  From: <span style="float: right;">To:</span>
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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.						<b>PAGE TOTAL</b>  \$ 0.00



# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF JONATHAN FRITZ	From <u>5/7/2019</u> To: <u>6/10/2019</u>

DATE				AMOUNT		
To Whom Paid UNION DALE FIRE CO			MO	DAY	YEAR	\$ 250.00
Mailing Address 800 N MAIN ST			5	7	2019	
City UNION DALE	State PA	Zip Code (Plus 4) 18471	Description of Expenditure RAFFLE EVENT SPONSOR			
To Whom Paid PA ROUTE 6 ALLIANCE			MO	DAY	YEAR	\$ 70.00
Mailing Address 11 W MAIN ST			5	23	2019	
City GALETON	State PA	Zip Code (Plus 4) 16922	Description of Expenditure LUNCHEON EVENT			
To Whom Paid DORFLINGER SUYDAM SANCTUARY			MO	DAY	YEAR	\$ 250.00
Mailing Address PO BOX 356			5	24	2019	
City WHITE MILLS	State PA	Zip Code (Plus 4) 18473	Description of Expenditure EVENT SPONSOR			
To Whom Paid WELLS FARGO CREDIT CARD			MO	DAY	YEAR	\$ 561.00
Mailing Address PO BOX 77053			5	24	2019	
City MINNEAPOLIS	State MN	Zip Code (Plus 4) 55480	Description of Expenditure NEWSPAPER ADS			
To Whom Paid HOUSE REPUBLICAN CAMPAIGN CMTTEE			MO	DAY	YEAR	\$ 400.00
Mailing Address PO BOX 11787			5	24	2019	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure EVENT TICKET			

To Whom Paid POCONO FOXTROT FOR PARKINSONS			MO	DAY	YEAR	\$ 100.00
Mailing Address 9 COLLAN PARK			5	24	2019	
City HONESDALE	State PA	Zip Code (Plus 4) 18431	Description of Expenditure EVENT SPONSOR			

To Whom Paid HONESDALE FRIENDS OF FOOTBALL			MO	DAY	YEAR	\$ 300.00
Mailing Address PO BOX 25			5	24	2019	
City HONESDALE	State PA	Zip Code (Plus 4) 18431	Description of Expenditure SIGNAGE SPONSOR			

To Whom Paid HONESDALE HOSE CO 1			MO	DAY	YEAR	\$ 40.00
Mailing Address PO BOX 174			5	24	2019	
City HONESDALE	State PA	Zip Code (Plus 4) 18431	Description of Expenditure FUNDRAISER SPONSOR			

To Whom Paid AYERS STONE POST 5642			MO	DAY	YEAR	\$ 50.00
Mailing Address 16972 SR 706			5	24	2019	
City MONTROSE	State PA	Zip Code (Plus 4) 18801	Description of Expenditure GOLF TOURNAMENT SPONSOR			

To Whom Paid NEW MILFORD BOROUGH			MO	DAY	YEAR	\$ 50.00
Mailing Address 948 MAIN ST			5	24	2019	
City NEW MILFORD	State PA	Zip Code (Plus 4) 18834	Description of Expenditure MIDTOWN FESTIVAL SPONSOR			

To Whom Paid WAYMART PARTIES IN THE PARK			MO	DAY	YEAR	\$ 100.00
Mailing Address 111 CENTER ST			5	24	2019	
City WAYMART	State PA	Zip Code (Plus 4) 18472	Description of Expenditure PATRIATISM DAY SPONSOR			

<b>To Whom Paid</b> CUMC MISSIONS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 205 11TH ST			5	24	2019	
<b>City</b> HONESDALE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18431	<b>Description of Expenditure</b> MISSION FUNDRAISER SPONSOR			

  

<b>To Whom Paid</b> DAMASCUS VOL AMBULANCE			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> PO BOX 63			5	24	2019	
<b>City</b> DAMASCUS	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18415	<b>Description of Expenditure</b> FUNDRAISER SPONSOR			

  

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 2,281.00

