LOBBYIST

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 20	160035				port ed B		CAND	IDATE		СОМ	1ITTEE	✓	LOBI	BYIST				
Name of Filing C	Committee, Cand	idate or L	.obbyist:		FRI	END	S OF	JONATH	AN FRI	TZ									
Street Address:	16 LONG M	EADOW [)R																
City:	HONESDAL	Ξ						State:	PA			Zip Code: 18431							
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIE PRIMARY	AY PRE	<u>-</u>	2.	30 DA PRIMA		POST-	3. X		AMENDM REPORT?		No	•	\			
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIC		E-	5.	30 DA		POST-	6.		TERMINA REPORT?	No		\				
report type)	ANNUAL REPOR	RT 7.	Year 202	.0				NG METH CHECK C				PAPER		/	DISKE	TTE			
Name of Office S	ought by Candi	date:	-					DATE (OF ELE	CTIO	N	District Number							
								МО	DAY	YE	AR	Number	Number Code REP						
								1:	L	3	2020		(SEE IN	STRUCTI	ONS FOR	CODES)		
	Receipts and	МО	DAY	YEAI	R			МО	DAY	YI	EAR	FO	R OFFI	CE USE	ONLY				
Expenditures	from:		5 1	.9 2	2020	T	0	(5	22	2020								
A. Amount Bro	ught Forward Fr	om Last F	Report				\$			32,6	585.00								
B. Total Moneta	ary Contribution	s And Red	eipts (Fro	m Sche	edule	e I)	\$			Ţ	500.00								
C. Total Funds	Available (Sum	Of Lines A	A and B)				\$			33,1	185.00								
D. Total Expend	ditures (From S	chedule I	II)				\$			ç	10.00								
E. Ending Cash Balance (Subtract Line D From Line C)										32,2	75.00								
F. Value Of In-	Kind Contribution	ns Receiv	ed (From	Schedu	ıle II	I)	\$				0.00								
G. Unpaid Debt	s And Obligatio	ns (From	Schedule	IV)			\$				0.00								
				AFF	FID/	AVI	ΓSE	CTION											
PART I - If this is		• •							•										
I swear (or affirm) correct and comple) that this report, i ete.	ncluding th	e attached :	schedule	s file	ed on p	paper	or by elec	tronic m	edium	, are to t	he best of	f my kno	wledge	and beli	ef , trı	ue		
Sworn to and subs	cribed before me t day of	his	20							S	ignature	of Persor	1 Submit	ting Rep	ort		_		
	Signa						-					Print	ted Name	•			_		
My Commission Ex	cpires											Emai	il				-		
	мо	D	AY	YR	l				Ar	ea Coc	le	Daytime Telephone Number							
Part II- If this is	a report of a ca	ındidate's	authorize	d Com	mitte	ee, Ca	andid	ate shall	sign h	ere.									
I swear (or affirm) No 320) as amende		f my knowl	edge and b	elief this	s poli	itical	comm	ittee has	not viola	ted an	y provisi	ions of the	e act of J	une 3,1	937 (P.L	. 1333	3,		
Sworn to and subsc		is									Si	ignature o	f Candid	ate			-		
	day of 		_ 20				-					Printe	d Name				-		
My Commission F	Signatui	'e					-					Emai	il				-		
My Commission Exp							_												
	мо	D	PAY	YF	₹				Area	Code		Da	ytime T	elephon	e Numb	er			

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

-				
Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF JONATHAN FRITZ	From:	<u>5/19/202</u>	<u>0</u> To:	6/22/2020
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)			\$	0.00
All Other Contributions (Part D)			\$	500.00
TOTAL for the Reporting) Period	(3)	\$	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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	500.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize onl with an aggregate val	-			•			
Name of Filing Comm	ittee or Candidate		Re					
			Fre	om:		То	:	
		1			DATE			AMOUNT
Full Name of Contribution	ng Committee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	•	•			•	•		PAGE TOTAL

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

0.00

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 Filling Committee of Candidate				Reporting Period From: To:				
					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.

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 Candi	date		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary 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.)

Name of Filing Committee or Candidate				Rep	orting Pe	riod			
FRIENDS OF JONATHAN FRITZ				Fron	n:	<u>5/19/2</u>	<u>020</u> То	:	6/22/2020
					D/	ATE		ı	AMOUNT
Full Name of Contributor EDWARD TOURJE					МО	DAY	YEAR		
Mailing 6471 S.R. 171						1.5	2020	\$	500.00
City UNION DALE	State	Zip	Code (Plus	4)	6	15	2020		
	PA	18	470						
Employer Name RETIRED	•	•			Occupat	tion		•	
Employer Mailing Address/Principal Pla Business	ce of		City			State		Zip Co	de (Plus 4)
Enter Grand Total of Part C on Scho	edule I. Detailed	Sumn	narv Page.	Section	on 3.				PAGE TOTAL
			,				\$	3	500.00
							•		

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	ting Perio	od			
			From:			To:		
				D	ATE		AM	OUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	•	•		•	•			
Enter Grand Total of Part E o	on Schedule I. Detailer	d Summary Page	Section	4			PA	GE TOTAL
	,,,	. Junimary 1 ago,	5000.011				\$	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 Perio	od	
FRIENDS OF JONATHAN FRITZ	From:	<u>5/19/2020</u> To:	<u>6/22/2020</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER 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 Candid	ate		Reporting	g Period			
			From:			To:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	те Г		PAGE TOTAL
Section 2.	ciicadic 11, 111 Kii	ia contributions beta	nea Sam	iiiiai y i aş	,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting P	Period			
				Fro	om:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occupa	tion			
Employer Mailing Address/Principal Plac Business	ce of Cit	ity	State		Zip 4)	Code(Plus	Descri	ption o	f Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-K	(ind (Contributions De	etaile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or C	andidate		Reportir	ng Period			
FRIENDS OF JONATHAN FRITZ	<u>7</u>		From	<u>5/19</u>	9/2020	То:	6/22/2020
				DATE			AMOUNT
To Whom Paid FOREST CITY NEWS			мо	DAY	YEAR		
Mailing Address 636 MAIN S	ST		6	3	2020	\$	35.00
City FOREST CITY State PA 2ip Code (Plus 4) 18421				ntion of Exp ATULATE I			
To Whom Paid KOCHMER GRAPHICS			МО	DAY	YEAR		
Mailing Address 82 MAIN ST	Г		6	12	2020	\$	750.00
City CLIFFORD	State PA	Zip Code (Plus 4) 18413	Descrip SIGNS	otion of Exp	penditure		
To Whom Paid WELLS FARGO CARD SVCS			мо	DAY	YEAR		
Mailing Address PO BOX 77053			6	19	2020	\$	125.00
City MINNEAPOLIS State MN State Zip Code (Plus 4) 55480			1	otion of Exp FOR VOLUM		SUPPORT	ERS
						F	PAGE TOTAL

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

910.00