

Campaign Finance Report

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

Filer Identification Number :		20160035		Report Filed By :		CANDIDATE		COMMITTEE		✓		LOBBYIST	
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF JONATHAN FRITZ													
Street Address: 16 LONG MEADOW DRIVE													
City: HONESDALE						State: PA				Zip Code: 18431			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY PRIMARY	POST-	3.	AMENDMENT REPORT?	Yes	No	✓		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6.	TERMINATION REPORT?	Yes	No	✓		
	ANNUAL REPORT	7.	Year 2021	FILING METHOD () CHECK ONE			PAPER		✓	DISKETTE			
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code	
						MO	DAY	YEAR	REP				
						11	2	2021	(SEE INSTRUCTIONS FOR CODES)				
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY				
		3	30	2021		5	3	2021					
A. Amount Brought Forward From Last Report						\$ 37,756.00							
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 240.00							
C. Total Funds Available (Sum Of Lines A and B)						\$ 37,996.00							
D. Total Expenditures (From Schedule III)						\$ 10,158.00							
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 27,838.00							
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 0.00							
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 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

Printed Name

Signature

Email

My Commission Expires

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

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF JONATHAN FRITZ	From: <u>3/30/2021</u> To: <u>5/3/2021</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 40.00

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)	\$ 200.00
TOTAL for the Reporting Period (2)	\$ 200.00

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)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 0.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 240.00
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

PAGE TOTAL	
\$	0.00

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)**

Name of Filing Committee or Candidate FRIENDS OF JONATHAN FRITZ	Reporting Period From: <u>3/30/2021</u> To: <u>5/3/2021</u>
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				DATE			AMOUNT	
Full Name of Contributor CHRISTOPHER GRADY					MO	DAY	YEAR	\$ 100.00
Mailing Address 403 MIDDLE CREEK RD					1	14	2021	
City HONEADALE		State PA	Zip Code (Plus 4) 18431					

Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
THOMAS HATHAWAY							
Mailing Address				1	14	2021	
PO BOX 426							
City		State	Zip Code (Plus 4)				
HAWLEY		PA	18428				

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

PAGE TOTAL
\$ 200.00

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 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.

PAGE TOTAL
\$ 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: To:

				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
Mailing Address							\$ 0.00
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.

PAGE TOTAL
\$ 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: To:

			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.

PAGE TOTAL
\$ 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 Period	
FRIENDS OF JONATHAN FRITZ		From: <u>3/30/2021</u> To: <u>5/3/2021</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period		(1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period		(2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
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: To:

			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.					<div>PAGE TOTAL</div> <div>\$ 0.00</div>	

SCHEDULE II
PART G
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OVER \$250.00

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF JONATHAN FRITZ	From <u>3/30/2021</u> To: <u>5/3/2021</u>

DATE				AMOUNT		
To Whom Paid HONESDALE GOLF CLUB			MO	DAY	YEAR	\$ 692.00
Mailing Address PO BOX 573			1	14	2021	
City HONESDALE	State PA	Zip Code (Plus 4) 18431	Description of Expenditure SOCIAL MEMBERSHIP FOR EVENTS			
To Whom Paid CHAMBER OF NORTHERN POCONOS			MO	DAY	YEAR	\$ 100.00
Mailing Address 32 COMMERCIAL ST			1	22	2021	
City HONESDALE	State PA	Zip Code (Plus 4) 18431	Description of Expenditure PROGRAM AD			
To Whom Paid HONESDALE FRIENDS OF FOOTBALL			MO	DAY	YEAR	\$ 200.00
Mailing Address PO BOX 25			1	22	2021	
City HONESDALE	State PA	Zip Code (Plus 4) 18431	Description of Expenditure			
To Whom Paid WELLS FARGO CARD SVCS			MO	DAY	YEAR	\$ 3,588.00
Mailing Address PO BOX 77053			1	28	2021	
City MINNEAPOLIS	State MN	Zip Code (Plus 4) 55480	Description of Expenditure HOLIDAY/NEW YEARS EVENTS			
To Whom Paid HRCC			MO	DAY	YEAR	\$ 3,000.00
Mailing Address PO BOX 11787			2	25	2021	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure DONATION			

To Whom Paid WAYNE PIKE FARM BUREAU			MO	DAY	YEAR	
Mailing Address 1062 MID VALLEY RD			2	25	2021	
City LAKE ARIEL	State PA	Zip Code (Plus 4) 18438	Description of Expenditure PROGRAM AD			

To Whom Paid WELLS FARGO CARD SVCS			MO	DAY	YEAR	
Mailing Address PO BOX 77053			3	9	2021	
City MINNEAPOLIS	State MN	Zip Code (Plus 4) 55480	Description of Expenditure SNOWMOBILE CLUB DINNER SPONSOR			

To Whom Paid WELLS FARGO CARD SVCS			MO	DAY	YEAR	
Mailing Address PO BOX 77053			4	17	2021	
City MINNEAPOLIS	State MN	Zip Code (Plus 4) 55480	Description of Expenditure DINNER WITH DONORS			

To Whom Paid CHERMAK FO PA			MO	DAY	YEAR	
Mailing Address PO BOX 412 17108			4	17	2021	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure DONATION			

To Whom Paid JUDGE BROBSON FOR SUPREME COURT			MO	DAY	YEAR	
Mailing Address PO BOX 545			4	30	2021	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure DONATION			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 10,158.00

