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 :		Report CANDID			IDATE		СОМ	1ITTEE	✓	LOBE	SYIST						
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		FRIE	ND	S OF	JONATH	AN FRI	TZ							
Street Address:	16 LONG MEA	DOM D	R														
City:	HONESDALE							State:	PA			Zip Code: 18431					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2	2.	30 DA		POST-	POST- 3.			IENT	Yes	No	~	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRI	E- 5	5.	30 DA		POST-	6. X		TERMINA REPORT?		Yes	No	\	
report type)	ANNUAL REPORT	7.	Year 2020					NG METH CHECK (PAPER DISKE			TTE		
Name of Office S	- Sought by Candida	te:						DATE (OF ELE	CTIO	N	District Number	Office Code	Par	ty Code	County	
								МО	DAY	YE	AR		1	REP			
								1:	L	3	2020		(SEE IN	STRUCTIO	ONS FOR C	ODES)	
	Receipts and	МО	DAY	YEAF	2			МО	DAY	ΥI	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	from:		10 20) 2	020	Т	0	1	1	23	2020						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$			41,7	701.00						
B. Total Monet	ary Contributions	And Rec	eipts (Fror	n Sche	dule	I)	\$		1,600.00								
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			43,3	301.00						
D. Total Expen	ditures (From Sch	edule II	I)				\$			5,0	088.00						
E. Ending Cash	Balance (Subtract	Line D	From Line	C)			\$			38,2	13.00						
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedu	le II)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule I	/)			\$				0.00						
				AFF	IDA	١٧٢	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign	here.	If thi	is is	a Car	ndidate ı	eport,	candi	date sig	ın here.					
I swear (or affirm) correct and complete) that this report, incl ete.	uding the	attached so	hedule	s filed	d on	paper	or by elec	tronic m	edium	, are to t	he best o	f my kno	wledge a	and belie	ef , true	
Sworn to and subs	cribed before me this day of	i	20							S	ignature	of Perso	n Submit	ting Rep	ort		
	Signatu						-					Prin	ted Name	e			
My Commission Ex	•											Ema	il				
	мо	D	AY	YR					Ar	ea Cod	le	Daytim	e Teleph	none Nu	mber		
Part II- If this is	a report of a cand	lidate's	authorized	Comr	nitte	e, C	andid	ate shal	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and bel	ief this	polit	ical	comm	ittee has	not viola	ted an	y provisi	ions of the	e act of J	une 3,19	937 (P.L.	1333,	
Sworn to and subso	ribed before me this										Si	ignature o	of Candid	ate			
	day of		_ 20				-					Drinto	d Name				
	Signature						-					Fillite	u Hallie				
My Commission Exp	_											Ema	il				
	МО	D	AY	YF	R		-		Area	Code		Da	aytime T	elephon	e Numbe	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF JONATHAN FRITZ	From:	10/20/202	<u>0</u> To:	11/23/2020
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g 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)			\$	500.00
All Other Contributions (Part B)	\$	100.00		
TOTAL for the Reporting	J Period	(2)	\$	600.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	500.00
All Other Contributions (Part D)			\$	500.00
TOTAL for the Reporting	J Period	(3)	\$	1,000.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g 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			\$	1,600.00

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 Candidate	Reporting Period						
FRIENDS OF JONATHAN FRITZ	From:	10/20/2020	То:	11/23/2020			
		DATE		AMOUNT			

Full Name of Contributing Comm MALADY AND WOOTEN PAC	ittee		мо	DAY	YEAR	
Mailing Address 604 N 3RD ST						\$ 250.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	11	12	2020	
Full Name of Contributing Comm CHAMBER PAC	ittee		МО	DAY	YEAR	
Mailing Address 417 WALN	IUT ST					\$ 250.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	11	12	2020	

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

PAGE TOTAL \$ 500.00

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 Filing Committee or Candidate

Reporting Period

FRIENDS OF JONATHAN FRITZ

From: <u>10/20/2020</u> To:

DATE

11/23/2020

AMOUNT

Full Name of Contributor ALAN & AMP; RACHEL SILVERMA	мо	DAY	YEAR			
Mailing Address 520 8TH AVE FLOOR 15						\$ 100.00
City NY	State	Zip Code (Plus 4)	11	12	2020	
	NY	10018				

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

PAGE TOTAL \$ 100.00

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						
FRIENDS OF JONATHAN FRITZ	From:	10/20/2020	То:	11/23/2020			

DATE AMOUNT

Full Name of Contributing Committee CABOT OIL & DAS PAC	МО	DAY	YEAR			
Mailing Address P O BOX 4544						\$ 500.00
City HOUSTON	State TX	Zip Code (Plus 4) 77210	11	12	2020	

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

PAGE TOTAL \$ 500.00

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	Reporting Period							
FRIENDS OF JONATHAN FRITZ	Fron	From: <u>10/20/202</u>		<u>020</u> To): <u>1</u>	1/23/2020		
				D/	ATE		АМО	UNT
Full Name of Contributor DOUGLAS ADAMS				МО	DAY	YEAR		
Mailing P O BOX 534							\$	500.00
City CARBONDALE	State PA	Zip Code (Plus 18407	s 4)	11	12	2020		
Employer Name SELF ROUND HILL FA	ıRM			Occupation OWNER				
Employer Mailing Address/Principal Place Business	ce of	City		•	State		Zip Code (Plus 4)
769 ROUND HILL RD		CLIFFOR	D TWP		PA		18470	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	mmary Page,	Section	on 3.			PAG \$	E TOTAL 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	Reporting Period						
			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. Detaile	d Summary Page	Section	4			PAG	GE TOTAL		
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	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 Peri	od	
FRIENDS OF JONATHAN FRITZ	From:	<u>10/20/2020</u> To:	11/23/2020
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTO	R	
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:			То:			
				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 Section 2.	Schedule II, In-Kir	nd Contributions Deta	iled Sum	ımary Pag	ge,		PAGE TOTAL		
5551511 21						\$	0.00		

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Re	Reporting Period						
					Fro	om:		To:				
					•		DATE			AMOUNT		
Full Name of Contributor						МО	DAY	YEAR				
Mailing Address									\$	0.00		
City	State		Zip Code(I	Plus 4)								
Employer of Contributor						Occupation						
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iption	of Contribution		
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, I	in-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00		

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period					
FRIENDS OF JONATHAN FRITZ							11/23/2020	
				DATE			AMOUNT	
To Whom Paid MAY FOR PA			МО	DAY	YEAR			
Mailing Address 1588 HEART LAKE RD			10	24	2020	\$	1,000.00	
City JERMYN	State PA	Zip Code (Plus 4) 18433		escription of Expenditure ONTRIBUTION				
To Whom Paid FRIENDS OF TOM MEHAFFIE			МО	DAY	YEAR			
Mailing Address P O BOX 414			10	24	2020	\$	1,000.00	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	Description of Expenditure CONTRIBUTION					
To Whom Paid ST DOMINICS ACADEMY			мо	DAY	YEAR			
Mailing Address 329 CLIFF ST			10	24	2020	\$	1,000.00	
City HONESDALE	State PA	Zip Code (Plus 4) 18431	Description of Expenditure SCHOLARSHIP SPONSOR					
To Whom Paid TEXAS # 4 FIRE CO			МО	DAY	YEAR			
Mailing Address P O BOX 1065			10	24	2020	\$	40.00	
City HONESDALE	State PA	Zip Code (Plus 4) 18431	Description of Expenditure SMOKE DETECTOR EVENT					
To Whom Paid DAMASCUS VOL AMBULANCE			МО	DAY	YEAR			
Mailing Address PO BOX 63			10	24	2020	\$	35.00	
	lot-t-	The Code (Block A)	1					

Zip Code (Plus 4)

18415

Description of Expenditure

FUNDRAISER

State

PΑ

City

DAMASCUS

To Whom Paid HONESDALE HOSE CO #1			мо	DAY	YEAR			
Mailing Address P O BOX 174			10	24	2020	\$	40.00	
City HONESDALE	State PA	Zip Code (Plus 4) 18431	Description of Expenditure EVENT SPONSOR					
To Whom Paid WAYNE CO COMMUNITY FOUNDATION				DAY	YEAR			
Mailing Address 214 9TH ST			10	24	2020	\$	50.00	
City HONESDALE	State PA	Zip Code (Plus 4) 18431		Description of Expenditure EVENT SPONSOR				
To Whom Paid WAYNE COUNTY PUBLIC LIBRARY			МО	DAY	YEAR			
Mailing Address 1406 MAIN ST			10	24	2020	\$	175.00	
City HONESDALE	State PA	Zip Code (Plus 4) 18431	Description of Expenditure EVENT SPONSOR					
To Whom Paid SUSQUEHANNA CO C CLUB			МО	DAY	YEAR			
Mailing Address P O BOX 101			10	24	2020	\$	100.00	
City MONTROSE	State PA	Zip Code (Plus 4) 18801	Description of Expenditure FUNDRAISER SPONSOR					
To Whom Paid COTTAGE HOSE AMBULANCE			МО	DAY	YEAR			
Mailing Address P O BOX 331			10	24	2020	\$	35.00	
City CARBONDALE	State	Zip Code (Plus 4)	Description of Expenditure MEMBERSHIP DRIVE					
CARBONDALL	PA	18407	МЕМВЕ	RSHIP DRI	IVE			
To Whom Paid ALERT HOOK AND LADDER	PA	18407	мо	RSHIP DRI	YEAR			
To Whom Paid		18407				\$	40.00	

							IAGE 13
To Whom Paid HONESDALE HIGH SCHOOL Mailing Address 459 TERRACE ST			мо	DAY	YEAR		
			11	3	2020	\$	100.00
City HONESDALE	State PA	Zip Code (Plus 4) 18431	Description of Expenditure BLOOD DRIVE SPONSOR				
To Whom Paid HONESDALE FRIENDS OF WRESTLING				DAY	YEAR		
Mailing Address 23 FORDS RD			11	22	2020	\$	75.00
City HONESDALE	State PA	Zip Code (Plus 4) 18431	Description of Expenditure PROGRAM AD				
To Whom Paid FOREST CITY BOROUGH			МО	DAY	YEAR		
Mailing Address 535 MAIN ST			11	22	2020	\$	250.00
City FOREST CITY	State PA	Zip Code (Plus 4) 18421	Description of Expenditure HOLIDAY DISPLAY SPONSOR				
To Whom Paid WELLS FARGO CARD SVCS			МО	DAY	YEAR		
Mailing Address P O BOX 77053			11	22	2020	\$	1,148.00
City MINNEAPOLIS	State MN	Zip Code (Plus 4) 55480	Description of Expenditure FOOD FOR RALLY / STAMPS				
Enter Grand Total of Expendit	tures on Page 1, Re	port Cover Page, Item D				\$	PAGE TOTAL 5,088.00