#### **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:	60035				port		CANDI	DATE		СОМ	<b>ITTEE</b>	<b>✓</b>	LOBE	BYIST		
Name of Filing C	Committee, Cand	idate or L	obbyist:		FRIE	END	S OF	JONATHA	N FRI	TZ							
Street Address:	16 LONG MI	ADOW D	RIVE														
City:	HONESDALE							State:	PA			Zip Cod	le: 18	3431			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	-	2.	30 DA PRIMA		POST-	3. <b>X</b>		AMENDM REPORT?		Yes	No	•	<b>/</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDATELECTION	y pre	≣- !	5.	30 DA ELECT		POST-	6.		TERMINA REPORT?		Yes	No		<b>\</b>
report type)	ANNUAL REPOR	<b>T</b> 7.	<b>Year</b> 2021					IG METHO				PAPER		/	DISKE	TTE	
Name of Office S	Sought by Candid	late:						DATE O	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Coun	
	,							МО	DAY	YE	AR	Ivamber	Code	REP		couc	
								11		2	2021		(SEE IN	STRUCTIO	ONS FOR (	ODES)	
Summary of Expenditures	Receipts and	МО	DAY	YEAR	ł		_	МО	DAY	YI	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures			5 4	2	021	Т	0	6		7	2021						
A. Amount Bro	ught Forward Fr	om Last R	eport				\$			27,8	38.00						
B. Total Monet	ary Contribution	s And Red	eipts (From	Sche	dule	· I)	\$				0.00						
C. Total Funds	Available (Sum	Of Lines A	and B)				\$			27,8	38.00						
D. Total Expen	ditures (From So	hedule II	I)				\$			2,2	293.00						
E. Ending Cash	Balance (Subtra	ct Line D	From Line	C)			\$			25,5	45.00						
F. Value Of In-	Kind Contributio	ns Receiv	ed (From S	chedu	le II	:)	\$				0.00						
G. Unpaid Debt	s And Obligation	s (From	Schedule IV	)			\$				0.00			'			
				AFF	IDA	\VI	T SE	CTION									
PART I - If this is		•	_						•								
I swear (or affirm) correct and complete		cluding the	e attached scl	hedule	s filed	d on	paper (	or by elect	ronic m	edium	, are to t	the best o	f my kno	wledge	and belie	ef , tru	ıe.
Sworn to and subs	cribed before me t	nis	20							S	Signature	of Perso	n Submit	ting Rep	ort		-
							-					Prin	ted Name	e			-
My Commission Ex	Signa opires	ture										Ema	il				-
	мо	D	AY	YR			_		Are	ea Cod	le		e Telepi	none Nu	mber		-
Part II- If this is	a report of a ca	ndidate's	authorized	Comn	nitte	e, C	andida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende		f my knowl	edge and beli	ef this	polit	tical	commi	ittee has n	ot viola	ted an	y provis	ions of the	e act of J	une 3,19	937 (P.L	. 1333	3,
Sworn to and subso	ribed before me th	is									s	ignature o	of Candid	ate			-
	day of		_ 20				_										_
	C;t	<u> </u>					_					Printe	d Name				
My Commission Exp	Signatur ires	5										Ema	il				-
	мо	D	AY	YR	l		-		Area	Code		Da	aytime 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>5/4/202</u>	<u>1</u> To:	6/7/2021
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	(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)			\$	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
			1	
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			\$	0.00

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu								
Name of Filing Comm	nittee or Candidate		Re	porting	Period				
			From:			То	То:		
		<u> </u>			DATE			AMOUNT	
Full Name of Contributi	ing Committee			МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4	)						
	•	·			•	•	$\overline{}$	DACE TOTAL	

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

**PAGE TOTAL**\$ 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 Filing Committee or Candidat	e		Rep	orting P	eriod			
			Fro	m:		0:		
					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 Candidate			Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule 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.)

Name of Filing Committee or Candidate			Rep	orting Pe	riod			
			Fron	n:		То	:	
				D	ATE		АМО	DUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address	Iress						\$	0.00
City	State	Zip Code (Plu	s 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page,	Section	on 3.			PAG	<b>GE TOTAL</b> 0.00

## 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			AMOUNT
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			,	PAGE TOTAL
	m Schedule 1, Betailet	<i>z</i> 50a. <b>y</b> 1 dgc,	Section				\$	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>5/4/2021</u> <b>To:</b>	<u>6/7/2021</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 Candidat	:e		Reporting	g Period			
			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate	1				Re	porting l	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						Occupa	ition			
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iptio	n of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	nedule II, I	n-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period				
FRIENDS OF JONATHAN FRITZ	From	<u>5/4/2021</u>	То:	6/7/2021	
		DATE		AMOUNT	

				DATE		AMOUNT
To Whom Paid WELLS FARGO CARD SVCS			мо	DAY	YEAR	
Mailing Address PO BOX 77053			5	19	2021	\$ 328.00
City MINNEAPOLIS	State MN	<b>Zip Code (Plus 4)</b> 55480		otion of Exp		
To Whom Paid HONESDALE IN=NTL WRESTLING CLUE	3		МО	DAY	YEAR	
Mailing Address 23 FORDS ROAD			5	25	2021	\$ 200.00
City HONESDALE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18431		otion of Exp		
To Whom Paid HONESDALE FRIENDS OF FOOTBALL			МО	DAY	YEAR	
Mailing Address PO BOX 25			5	25	2021	\$ 150.00
City HONESDALE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18431		otion of Exp		
To Whom Paid FOREST CITY NEWS			МО	DAY	YEAR	
Mailing Address 636 MAIN STREET			5	29	2021	\$ 35.00
City FOREST CITY	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18421	<b>Descrip</b> AD	otion of Exp	penditure	
To Whom Paid HRCC			МО	DAY	YEAR	
Mailing Address PO BOX 11787			6	1	2021	\$ 1,500.00
City HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17108	<b>Descrip</b> DONAT	otion of Exp	penditure	

							PAGE 12
To Whom Paid HRCC			мо	DAY	YEAR		
Mailing Address PO BOX 11787			6	7	2021	\$	80.00
City HARRISBURG	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	17108	DONATION				
	<u> </u>						PAGE TOTAL
Enter Grand Total of E	xpenditures on Page 1, Re	eport Cover Page, Item D	•			\$	2,293.00