Campaign Finance Report

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

Filer Identificat Number :	ion 202	10365			Report Filed E		CANDI	DATE	СОМ	MITTEE	✓	LOB	BYIST	
Name of Filing	Committee, Candi	date or L	obbyist:			-	R CHRIS	FRYE						
Street Address:														
City:	NEW CASTLE						State:	PA		Zip Co	de: 16	105		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 DA PRIMA		POST- 3	3.	AMENDI REPORT		Yes	√ Nc)
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	5.	30 DA		POST-	6.	TERMIN REPORT		Yes	No	· 🗸
report type)	ANNUAL REPOR	r 7. x	Year 2021				NG METHO			PAPER		\checkmark	DISKE	TTE
Name of Office	Sought by Candid	ate:					DATE OF ELECTION District Office Number Code					Par	ty Code	County Code
	5						MO DAY YEAR				REP			coue
							11	:	2 2021	1	(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR	2		мо	DAY	YEAR	FC	OR OFFIC	E USE	ONLY	
Expenditures	s from:		11 23	2	021 T	0	12	3	1 2021					
A. Amount Bro	ought Forward Fro	om Last R	eport			\$		7	0.00					
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sche	dule I)	\$	\$ 6,255.00							
C. Total Funds	Available (Sum C	of Lines A	and B)			\$			6,255.00					
D. Total Expen	ditures (From Scl	hedule II	I)			\$			9.33					
E. Ending Cash	Balance (Subtra	ct Line D	From Line	C)		\$			6,245.67					
F. Value Of In-	Kind Contribution	ns Receiv	ed (From S	chedu	le II)	\$			3,484.34					
G. Unpaid Deb	ts And Obligation	s (From S	Schedule IV	/)		\$			0.00					
				AFF	IDAVI	T SE	CTION							
	s a Committee re		-							-				•
I swear (or affirm correct and compl) that this report, in ete.	cluding the	e attached sc	hedules	s filed on	paper	or by elect	ronic me	dium, are to	the best o	of my knov	vledge	and beli	ef , true
Sworn to and sub	scribed before me th day of 	is	20			_			Signatur	e of Perso	n Submitt	ing Rej	oort	
	Signat	ure				_				Prir	ited Name			
My Commission E	xpires					_				Ema	il			
	МО	D	AY	YR				Area	a Code	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a car	ndidate's	authorized	Comm	nittee, C	andid	ate shall	sign hei	re.					
I swear (or affirm) No 320) as amend) that to the best of ed.	my knowl	edge and beli	ief this	political	comm	ittee has n	ot violate	ed any provis	sions of th	e act of Ju	ine 3,1	937 (P.I	. 1333,
Sworn to and subs	cribed before me this day of	5	20						5	Signature	of Candida	ite		
						-				Printe	ed Name			
My Commission Ex	Signature	1				-		Email						
,	r					_								
	МО	D	AY	YR				Area C	ode	D	aytime Te	elephor	ne Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
CITIZENS FOR CHRIS FRYE	From:	<u>11/23/20</u>	2 <u>1</u> To:	<u>12/31/2021</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	J Period	(1)	\$	55.00
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	J 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)			\$	6,000.00
TOTAL for the Reporting	g Period	(3)	\$	6,000.00
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			\$	6,255.00

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					Period				
					From: To:				
					DATE			AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4	4)						
								PAGE TOTAL	
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.							\$	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			Rep	orting Po	eriod				
CITIZENS FOR CHRIS FRYE Fro						<u>11/23/2</u>	2 <u>021</u> To	:	<u>12/31/2021</u>	
						DATE			AMOUNT	
Full Name of Contributor Rachel Verdi					мо	DAY	YEAR			
Mailing Address								\$	100.00	
City Edinburg	State PA		Zip Code (Plus 4 16116)	12	22	2021			
Full Name of Contributor					мо	DAY	YEAR			
Joyce Gardner					MO	DAT	TEAR			
Mailing Address								\$	100.00	
City New Castle	State		Zip Code (Plus 4)	12	24	2021			
	PA		16101							
									PAGE TOTAL	
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.								\$	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:			То:		
				DA	TE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.00
Mailing Address							- \$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Sched	age, Sectio	n 3.			\$	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	Name of Filing Committee or Candidate					riod			
CITIZENS FOR CHRIS FRYE				Fron	n:	<u>11/23/2</u>	021 To: <u>12/31/20</u>		<u>12/31/2021</u>
					DA	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR	\$	5,000.00
Dallas W. Hartman							,	_	5,000.00
Mailing Address					12	21	2021		
City New Castle	State	Zi	p Code (Plus	4)					
	_{PA}	16	5105						
Employer Name Dallas W. Hartman P	.C.				Occupation Founder				
Employer Mailing Address/Principal Pla	ce of Business		City				Zip	Code (Plus 4)	
			New Castl	e		PA		161	05
Full Name of Contributor					мо	DAY	YEAR		
Joseph Mazzant					МО	DAT	TEAR	\$	1,000.00
Mailing Address					12	13	2021		
City Hermitage	State	Zi	p Code (Plus	4)	12	15			
	PA	16	5148						
Employer Name Self-Employed					Occupat	tion	Real Est	ate I	Investor
Employer Mailing Address/Principal Pla	ce of Business		City			State		Zip	Code (Plus 4)
			Hermitage	•		PA		161	48
Enter Grand Total of Part C on Sch	edule I, Detailed S	umn	nary Page,	Sectio	on 3.			\$	PAGE TOTAL 6,000.00
							'	T	0,000.00

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			Report	ing Peric	d				
			From:			То:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (Plus 4)						
Receipt Description	·	•					•		
		_						PAGE TO	TAL
Enter Grand Total of Part E on Sched	ule 1, Detailed Sumn	nary Page,	Section	4.			\$		0.00

SCHEDULE II IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS

THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THIN DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Perio	d	
CITIZENS FOR CHRIS FRYE	From:	<u>11/23/2021</u> To:	<u>12/31/2021</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	24.34
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	riod (2)	\$	110.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (3)	\$	3,350.00
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, 1		\$	3,484.34

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate R				Period			
CITIZENS FOR CHRIS FRYE			From:	<u>11/</u>	То:	<u>12/31/2021</u>	
		DATE	AMOUNT				
Full Name of Contributor Saad, Theodore A.	мо	DAY	YEAR	\$	110.00		
Mailing Address			12	13	2021	- ≯	110.00
City New Castle	State	Zip Code (Plus 4)		15	2021		
	РА	16105					
Description of Contribution: Post Offic	e Box Fee	-	-+	·	L		
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind C	Contributions Deta	iled Sum	mary Pag	je,		PAGE TOTAL
Section 2.					9	\$	110.00

PAGE 10

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

Name of Filing Committee or Candidate				Re	portir	ng P	eriod			
CITIZENS FOR CHRIS FRYE				Fro	om:		<u>11/23/202</u>	2 <u>1</u> To:		<u>12/31/2021</u>
							DATE		AMOUNT	
Full Name of Contributor					мо		DAY	YEAR		
Aaron Elliott									\$	3,000.00
Mailing Address						12	16	2021	Ψ	5,000.00
City New Castle	State		Zip Code(Plus 4)		1					
	PA		16105							
Employer of Contributor Self-Employed					Occupa		tion W	eb Desig	ner	
Employer Mailing Address/Principal Plac	e of Business	Cit	Ξγ	Stat	te Zip		Code(Plus 4)	Descri	otior	n of Contribution
		Ne	w Castle	PA		161	05	Campa	ign	Website Design
Full Name of Contributor					мо		DAY	YEAR		
Mike Clark									*	
Mailing Address						12	16	2021	\$	350.00
City New Castle	State		Zip Code(Plus 4)							
	РА		16101							
Employer of Contributor Clark's Stud	dio				Occ	upa	tion Ph	otograpi	her	
Employer Mailing Address/Principal Plac	e of Business	Cit	γ	Stat	e i	Zip (Code(Plus 4)	Descri	otior	n of Contribution
New Castle				PA		161	01	Campa	ign	Photo Session
Enter Grand Total of Part G on Schedule II, In-Kind Contributions I				etaile	مر					PAGE TOTAL
Summary Page, Section 3.		II.u .		Clairs	54					3,350.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filin	ng Committee or Candidate			Reporti	ng Period					
CITIZENS FO	OR CHRIS FRYE			From	<u>11/2</u>	<u>3/2021</u>	To:	<u>12/31/2021</u>		
					DATE			AMOUNT		
To Whom Pai	d			мо	DAY	YEAR				
PayPal						,				
Mailing Addre	255			12	22	2021	\$	3.38		
City San J	CitySan JoseStateZip Code (Plus 4)				tion of Exp	enditure				
CA 95131				PayPal	Fee					
To Whom Paid				мо	DAY	YEAR				
PayPal										
Mailing Address				12	23	2021	\$	0.63		
City San J	ose	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
		CA	95131	PayPal Fee						
To Whom Pai	d			мо	DAY	YEAR				
PayPal										
Mailing Addre	255			12	23	2021	\$	1.94		
City San J	ose	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
		СА	95131	PayPal	Fee					
To Whom Pai	d			мо	DAY	YEAR				
PayPal										
Mailing Address				12	24	2021	\$	3.38		
CitySan JoseStateZip Code (Plus 4)			Descrip	tion of Exp	enditure					
	CA 95131			PayPal	Fee					
Enter Cor								PAGE TOTAL		
Enter Grand	Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	9.33		