

Commonwealth of Pennsylvania

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 : 20210365		Report Filed By :		CANDIDATE	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST					
Name of Filing Committee, Candidate or Lobbyist: CITIZENS FOR CHRIS FRYE											
Street Address: 1192 KINGS CHAPEL ROAD											
City: NEW CASTLE			State: PA		Zip Code: 16105						
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>
	ANNUAL REPORT	7. X	Year 2021	FILING METHOD () CHECK ONE			PAPER	<input checked="" type="checkbox"/>	DISKETTE	<input type="checkbox"/>	
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		
		11	23	2021	TO	12	31	2021			
A. Amount Brought Forward From Last Report				\$		0.00					
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		6,255.00					
C. Total Funds Available (Sum Of Lines A and B)				\$		6,255.00					
D. Total Expenditures (From Schedule III)				\$		9.33					
E. Ending Cash Balance (Subtract Line D From Line C)				\$		6,245.67					
F. Value Of In-Kind Contributions Received (From Schedule II)				\$		3,484.34					
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
 My Commission Expires _____
 MO DAY YR

 Signature of Person Submitting Report

 Printed Name

 Email

 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
 My Commission Expires _____
 MO DAY YR

 Signature of Candidate

 Printed Name

 Email

 Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
CITIZENS FOR CHRIS FRYE	From: <u>11/23/2021</u> To: <u>12/31/2021</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting 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 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 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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 6,255.00
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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
	From: To:
DATE AMOUNT	

Full Name of Contributing Committee	MO	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 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	Reporting Period
CITIZENS FOR CHRIS FRYE	From: <u>11/23/2021</u> To: <u>12/31/2021</u>

				DATE	AMOUNT
Full Name of Contributor			MO	DAY	YEAR
Rachel Verdi					
Mailing Address 11 Leslie Drive			12	22	2021
City Edinburg	State PA	Zip Code (Plus 4) 16116			
					\$ 100.00

Full Name of Contributor			MO	DAY	YEAR
Joyce Gardner					
Mailing Address 418 South Cascade St.			12	24	2021
City New Castle	State PA	Zip Code (Plus 4) 16101			
					\$ 100.00

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	
Mailing Address				\$ 0.00
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 CITIZENS FOR CHRIS FRYE	Reporting Period From: <u>11/23/2021</u> To: <u>12/31/2021</u>
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				DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR		
Dallas W. Hartman					
Mailing Address 201 Green Ridge Drive	12	21	2021	\$	5,000.00
City New Castle State PA Zip Code (Plus 4) 16105					
Employer Name Dallas W. Hartman P.C.	Occupation Founder				
Employer Mailing Address/Principal Place of Business 201 Green Ridge Drive	City New Castle		State PA	Zip Code (Plus 4) 16105	

Full Name of Contributor	MO	DAY	YEAR		
Joseph Mazzant					
Mailing Address 288 Trumpet Terrace	12	13	2021	\$	1,000.00
City Hermitage State PA Zip Code (Plus 4) 16148					
Employer Name Self-Employed	Occupation Real Estate Investor				
Employer Mailing Address/Principal Place of Business 288 Trumpet Terrace	City Hermitage		State PA	Zip Code (Plus 4) 16148	

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

PAGE TOTAL
\$ 6,000.00

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	Reporting Period
	From: _____ To: _____

				DATE	AMOUNT
Full Name	MO	DAY	YEAR		
Mailing Address				\$	0.00
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 CITIZENS FOR CHRIS FRYE	Reporting Period From: <u>11/23/2021</u> To: <u>12/31/2021</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ 24.34
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)	
TOTAL for the Reporting Period (2)	\$ 110.00
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)	
TOTAL for the Reporting Period (3)	\$ 3,350.00
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.)	\$ 3,484.34

**SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OF \$50.01 TO \$250.00**

Name of Filing Committee or Candidate CITIZENS FOR CHRIS FRYE	Reporting Period From: <u>11/23/2021</u> To: <u>12/31/2021</u>
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				DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR		
Saad, Theodore A.					
Mailing Address 1192 Kings Chapel Road	12	13	2021	\$	110.00
City New Castle	State PA	Zip Code (Plus 4) 16105			
Description of Contribution: Post Office Box Fee					
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.					PAGE TOTAL \$ 110.00

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

Name of Filing Committee or Candidate CITIZENS FOR CHRIS FRYE	Reporting Period From: <u>11/23/2021</u> To: <u>12/31/2021</u>
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				DATE	AMOUNT		
Full Name of Contributor Aaron Elliott				MO	DAY	YEAR	\$ 3,000.00
Mailing Address 864 Rogers Road				12	16	2021	
City New Castle	State PA	Zip Code(Plus 4) 16105					
Employer of Contributor Self-Employed				Occupation Web Designer			
Employer Mailing Address/Principal Place of Business 864 Rogers Road		City New Castle	State PA	Zip Code(Plus 4) 16105	Description of Contribution Campaign Website Design		
Full Name of Contributor Mike Clark				MO	DAY	YEAR	\$ 350.00
Mailing Address 13 Lower Idlewild Drive				12	16	2021	
City New Castle	State PA	Zip Code(Plus 4) 16101					
Employer of Contributor Clark's Studio				Occupation Photographer			
Employer Mailing Address/Principal Place of Business 334 East Washington Street		City New Castle	State PA	Zip Code(Plus 4) 16101	Description of Contribution Campaign Photo Session		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 3,350.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate CITIZENS FOR CHRIS FRYE	Reporting Period From <u>11/23/2021</u> To: <u>12/31/2021</u>
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				DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR		
PayPal	12	22	2021	\$	3.38
Mailing Address 2211 North First St.					
City San Jose	State CA	Zip Code (Plus 4) 95131	Description of Expenditure PayPal Fee		
To Whom Paid PayPal	12	23	2021	\$	0.63
Mailing Address 2211 North First St.					
City San Jose	State CA	Zip Code (Plus 4) 95131	Description of Expenditure PayPal Fee		
To Whom Paid PayPal	12	23	2021	\$	1.94
Mailing Address 2211 North First St.					
City San Jose	State CA	Zip Code (Plus 4) 95131	Description of Expenditure PayPal Fee		
To Whom Paid PayPal	12	24	2021	\$	3.38
Mailing Address 2211 North First St.					
City San Jose	State CA	Zip Code (Plus 4) 95131	Description of Expenditure PayPal Fee		
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.					PAGE TOTAL \$ 9.33

