

# 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 <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF JONATHAN FRITZ										
Street Address: 16 LONG MEADOW DR										
City: HONESDALE				State: PA		Zip Code: 18431				
TYPE OF REPORT  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1. <input checked="" type="checkbox"/>	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No <input checked="" type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No <input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2022	FILING METHOD ( ) CHECK ONE		PAPER <input checked="" type="checkbox"/>		DISKETTE		
Name of Office Sought by Candidate:				DATE OF ELECTION			District Number	Office Code	Party Code	County Code
				MO	DAY	YEAR	REP			
				11	8	2022	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:	MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
	1	1	2022		3	28	2022			
A. Amount Brought Forward From Last Report					\$ 43,214.00					
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 450.00					
C. Total Funds Available (Sum Of Lines A and B)					\$ 43,664.00					
D. Total Expenditures (From Schedule III)					\$ 12,475.00					
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 31,189.00					
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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF JONATHAN FRITZ	From: <u>1/1/2022</u> To: <u>3/28/2022</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 0.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 200.00
<b>All Other Contributions (Part B)</b>	\$ 250.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 450.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 0.00
<b>All Other Contributions (Part D)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 0.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>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.)</b>	\$ 450.00
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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.**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF JONATHAN FRITZ	<b>Reporting Period</b>  <b>From:</b> <u>1/1/2022</u> <b>To:</b> <u>3/28/2022</u>
<b>DATE</b>	
<b>AMOUNT</b>	

<b>Full Name of Contributing Committee</b> MILLIRON GOODMAN PAC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 200.00
<b>Mailing Address</b> 200 N 3RD ST			1	4	2022	
<b>City</b> HARRISBURG	<b>State</b>  PA	<b>Zip Code (Plus 4)</b>  17101				

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

<b>PAGE TOTAL</b>
\$ 200.00

**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)**

<b>Name of Filing Committee or Candidate</b> FRIENDS OF JONATHAN FRITZ	<b>Reporting Period</b> From: <u>1/1/2022</u> To: <u>3/28/2022</u>
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				DATE			AMOUNT	
Full Name of Contributor ROBERT S TAYLOR				MO	DAY	YEAR	\$ 250.00	
Mailing Address P O BOX 6349				2	1	2022		
City HARRISBURG		State PA	Zip Code (Plus 4) 17112					

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

<b>PAGE TOTAL</b>
\$ 250.00

**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.

<b>PAGE TOTAL</b>
\$ 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: <span style="float: right;">To:</span>

				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.

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
FRIENDS OF JONATHAN FRITZ		From: <u>1/1/2022</u> To: <u>3/28/2022</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period		(1)	\$ 0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period		(2)	\$ 0.00
<b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>			
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: <span style="float: right;">To:</span>
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			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.						<b>PAGE TOTAL</b>  \$ 0.00

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# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF JONATHAN FRITZ	From <u>1/1/2022</u> To: <u>3/28/2022</u>

DATE				AMOUNT		
To Whom Paid WAYNE CO REPUBLICAN CMTTEE			MO	DAY	YEAR	\$ 125.00
Mailing Address P O BOX 58			1	22	2022	
City HONESDALE	State PA	Zip Code (Plus 4) 18431	Description of Expenditure PROGRAM AD			
To Whom Paid WELLS FARGO CARD SVCS			MO	DAY	YEAR	\$ 1,467.00
Mailing Address P O BOX 77053			1	22	2022	
City MINNEAPOLIS	State MN	Zip Code (Plus 4) 55480	Description of Expenditure PROMOTIONAL ITEMS & MEET & GREET			
To Whom Paid FRIENDS OF HONESDALE BASEBALL			MO	DAY	YEAR	\$ 250.00
Mailing Address 482 GROVE ST			1	22	2022	
City HONESDALE	State PA	Zip Code (Plus 4) 18431	Description of Expenditure EVENT SPONSOR			
To Whom Paid HHS CLASS OF 2023			MO	DAY	YEAR	\$ 550.00
Mailing Address 459 TERRACE ST			1	29	2022	
City HONESDALE	State PA	Zip Code (Plus 4) 18431	Description of Expenditure EVENT SPONSOR			
To Whom Paid HONESDALE GOLF CLUB			MO	DAY	YEAR	\$ 750.00
Mailing Address 121 GOLF HILL RD			1	29	2022	
City HONESDALE	State PA	Zip Code (Plus 4) 18431	Description of Expenditure FACILITY USE SOCIAL MEMBER			

To Whom Paid HRCC			MO	DAY	YEAR	\$ 2,000.00
Mailing Address 500 N 3RD ST			1	29	2022	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure EVENT SPONSOR			

To Whom Paid WAYNE / PIKE FARM BUREAU			MO	DAY	YEAR	\$ 100.00
Mailing Address 62 SKYVIEW LANE			1	29	2022	
City HAWLEY	State PA	Zip Code (Plus 4) 18428	Description of Expenditure EVENT SPONSOR			

To Whom Paid WELLS FARGO CARD SVCS			MO	DAY	YEAR	\$ 2,852.00
Mailing Address P O BOX 77053			2	17	2022	
City MINNEAPOLIS	State MN	Zip Code (Plus 4) 55480	Description of Expenditure YARD SIGNS / HOLIDAY EVENT			

To Whom Paid SUSQUEHANNA CTY REPUBLICAN CMITTEE			MO	DAY	YEAR	\$ 530.00
Mailing Address 201 SUMMIT ST			2	26	2022	
City NEW MILFORD	State PA	Zip Code (Plus 4) 18834	Description of Expenditure EVENT SPONSOR			

To Whom Paid WAYNE CTY REP COMMITTEE			MO	DAY	YEAR	\$ 820.00
Mailing Address P O BOX 58			2	26	2022	
City HONESDALE	State PA	Zip Code (Plus 4) 18431	Description of Expenditure EVENT SPONSOR			

To Whom Paid WAYNE CTY CREATIVE ARTS COUNCIL			MO	DAY	YEAR	\$ 100.00
Mailing Address 627 MAIN ST			3	12	2022	
City HONESDALE	State PA	Zip Code (Plus 4) 18431	Description of Expenditure CONCERT SERIES SPONSOR			

<b>To Whom Paid</b> FARMER			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 510 S 31ST ST			3	12	2022	
<b>City</b> CAMP HILL	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17011	<b>Description of Expenditure</b> ANNUAL DINNER SPONSOR			
<b>To Whom Paid</b> HONESDALE ROOTS & RYTHM FESTIVAL			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 214 9TH ST			3	12	2022	
<b>City</b> HONESDALE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18431	<b>Description of Expenditure</b> EVENT SPONSOR			
<b>To Whom Paid</b> HONESDALE FRIENDS OF WRESTLING			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 4 GREEN ACRES			3	12	2022	
<b>City</b> HONESDALE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18431	<b>Description of Expenditure</b> PROGRAM AD			
<b>To Whom Paid</b> WELLS FARGO CARD SVCS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> PO BOX 77053						
<b>City</b> MINNEAPOLIS	<b>State</b> MN	<b>Zip Code (Plus 4)</b> 55480	<b>Description of Expenditure</b> COMMITTEE DINNER / VOTE ENGAGEMENT			
<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b> \$ 12,475.00

