

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		✓		LOBBYIST	
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF JONATHAN FRITZ													
Street Address: 16 LONG MEADOW DRIVE													
City: HONESDALE						State: PA				Zip Code: 18431			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	✓			
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	✓			
	ANNUAL REPORT	7.	Year 2022	FILING METHOD () CHECK ONE			PAPER	✓	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				
		3	29	2022		5	2	2022					
A. Amount Brought Forward From Last Report					\$ 31,190.00								
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 2,500.00								
C. Total Funds Available (Sum Of Lines A and B)					\$ 33,690.00								
D. Total Expenditures (From Schedule III)					\$ 7,755.00								
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 25,935.00								
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

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF JONATHAN FRITZ	From: <u>3/29/2022</u> To: <u>5/2/2022</u>

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 Period (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)	\$ 2,500.00
TOTAL for the Reporting Period (3)	\$ 2,500.00

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.)	\$ 2,500.00
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<div>PART A</div> <div>CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES</div> <div>\$50.01 TO \$250.00</div> <div>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.</div>	
Name of Filing Committee or Candidate	Reporting Period
	From: To:
DATEAMOUNT	

Full Name of Contributing Committee			MO	DAY	YEAR	\$0.00
Mailing Address						
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
	From: To:

					DATE			AMOUNT	
Full Name of Contributor					MO	DAY	YEAR	\$ 0.00	
Mailing Address									
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:	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.

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 FRIENDS OF JONATHAN FRITZ	Reporting Period From: <u>3/29/2022</u> To: <u>5/2/2022</u>
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				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
LEONARD AND MARGERY SCHWARTZ							
Mailing Address 1868 BETHANY TURNPIKE				3	29	2022	\$ 2,500.00
City PLEASANT MOUNT	State PA	Zip Code (Plus 4) 18453					
Employer Name HOTEL WAYNE				Occupation OWNER			
Employer Mailing Address/Principal Place of Business HOTEL WAYNE			City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 2,500.00

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
	<div style="display: flex; justify-content: space-between;"> From: To: </div>

			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

Name of Filing Committee or Candidate		Reporting Period	
FRIENDS OF JONATHAN FRITZ		From: <u>3/29/2022</u> To: <u>5/2/2022</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period (1)		\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period (2)		\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
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: To:

				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
Mailing Address							\$ 0.00
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.							PAGE TOTAL \$ 0.00

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

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF JONATHAN FRITZ	From <u>3/29/2022</u> To: <u>5/2/2022</u>

DATE				AMOUNT
To Whom Paid HRCC	MO	DAY	YEAR	
Mailing Address 500 NORTH 3RD	4	9	2022	\$ 2,000.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure WOMEN IN PA EVENT SPONSOR	
To Whom Paid SUSQUEHANNA CO DAIRY PROMOTION	MO	DAY	YEAR	
Mailing Address 168 CHENANGO ST	4	18	2022	\$ 1,000.00
City MONTROSE	State PA	Zip Code (Plus 4) 18801	Description of Expenditure 4H YOUTH PROGRAM SPONSOR	
To Whom Paid SUSQUEHANNA CO FARM BUREAU	MO	DAY	YEAR	
Mailing Address 532 PLONSKI RD	4	18	2022	\$ 115.00
City THOMPSON	State PA	Zip Code (Plus 4) 18465	Description of Expenditure SPRING BREAKFAST SPONSOR	
To Whom Paid WELLS FARGO CARD SVCS	MO	DAY	YEAR	
Mailing Address PO BOX 77053	4	19	2022	\$ 2,540.00
City MINNEAPOLIS	State MN	Zip Code (Plus 4) 55480	Description of Expenditure CAMP FREEDOM SPONSOR/PETITION SIGNING EVENTS	
To Whom Paid NEW MILLFORD BOROUGH	MO	DAY	YEAR	
Mailing Address 948 MAIN ST	4	30	2022	\$ 500.00
City NEW MILLFORD	State PA	Zip Code (Plus 4) 18834	Description of Expenditure TOWN FESTIVAL SPONSOR	

To Whom Paid KELLY LALLY FUND			MO	DAY	YEAR	\$ 100.00
Mailing Address 886 GOLF PARK DRIVE			4	30	2022	
City LAKE ARIEL	State PA	Zip Code (Plus 4) 18436	Description of Expenditure GOLF TOURNEY SPONSOR			

To Whom Paid CJR MEMORIAL FOUNDATION			MO	DAY	YEAR	\$ 500.00
Mailing Address 114 DEWBERRY DRIVE			4	30	2022	
City HAWLEY	State PA	Zip Code (Plus 4) 18428	Description of Expenditure GOLF TOURNEY SPONSOR			

To Whom Paid FRIENDS OF ROSEMARY BROWN			MO	DAY	YEAR	\$ 1,000.00
Mailing Address PO BOX 17			4	30	2022	
City TANNERSVILLE	State PA	Zip Code (Plus 4) 18372	Description of Expenditure DONATION			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 7,755.00

