

# Campaign Finance Report

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

<b>Filer Identification Number :</b> 20210365		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>			
<b>Name of Filing Committee, Candidate or Lobbyist:</b> CITIZENS FOR CHRIS FRYE											
<b>Street Address:</b> 1192 KINGS CHAPEL ROAD											
<b>City:</b> NEW CASTLE					<b>State:</b> PA		<b>Zip Code:</b> 16105				
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY PRIMARY	POST-	3. X	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	Year 2022	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>		<b>DISKETTE</b>		
<b>Name of Office Sought by Candidate:</b>					<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
LIEUTENANT GOVERNOR					<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	-1	LTG	REP	37
					11	8	2022	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>		
		5	3	2022		6	6	2022			
<b>A. Amount Brought Forward From Last Report</b>					\$ 8,530.61						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>					\$ 4,117.15						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>					\$ 12,647.76						
<b>D. Total Expenditures (From Schedule III)</b>					\$ 9,389.42						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>					\$ 3,258.34						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>					\$ 33.00						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>					\$ 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>
CITIZENS FOR CHRIS FRYE	From: <u>5/3/2022</u> To: <u>6/6/2022</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 52.79

<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>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 200.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 200.00

<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>	\$ 3,664.36
<b>TOTAL for the Reporting Period (3)</b>	\$ 3,664.36

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 200.00

<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>	\$ 4,117.15
-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------



**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>	<b>Reporting Period</b>
CITIZENS FOR CHRIS FRYE	From: <u>5/3/2022</u> To: <u>6/6/2022</u>

DATE				AMOUNT
<b>Full Name of Contributor</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
James Crivelli				
<b>Mailing Address</b> 102 Olde Manor Ln				\$ 200.00
<b>City</b> Moon Twp.	<b>State</b>	<b>Zip Code (Plus 4)</b>		
	PA	15108	5 12 2022	

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

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

DATE				AMOUNT
Full Name of Contributing Committee				
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.)**

<b>Name of Filing Committee or Candidate</b>  CITIZENS FOR CHRIS FRYE	<b>Reporting Period</b>  <b>From:</b> <u>5/3/2022</u> <b>To:</b> <u>6/6/2022</u>
-----------------------------------------------------------------------------	----------------------------------------------------------------------------------------

				DATE	AMOUNT		
<b>Full Name of Contributor</b> Curt Coccodrilli				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 364.36
<b>Mailing Address</b> 96 Mountain Road				5	13	2022	
<b>City</b> Lake Ariel	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18436					
<b>Employer Name</b> Self-Employed				<b>Occupation</b> Self-Employed Consultant			
<b>Employer Mailing Address/Principal Place of Business</b> 96 Mountain Road			<b>City</b> Lake Ariel		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18436	
<b>Full Name of Contributor</b> John Mozzocio				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 300.00
<b>Mailing Address</b> 3478 Tuscarora Dr				5	6	2022	
<b>City</b> New Castle	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16105					
<b>Employer Name</b> New Castle Area School District				<b>Occupation</b> Director of Special Services			
<b>Employer Mailing Address/Principal Place of Business</b> 420 Fern Street			<b>City</b> New Castle		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16101	
<b>Full Name of Contributor</b> Angelo Papa				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,500.00
<b>Mailing Address</b> 234 Northview Ave.				5	14	2022	
<b>City</b> New Castle	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16105					
<b>Employer Name</b> Angelo A. Papa, Attorney at Law				<b>Occupation</b> Attorney			
<b>Employer Mailing Address/Principal Place of Business</b> 318 Highland Avenue			<b>City</b> New Castle		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16101	
<b>Full Name of Contributor</b> Angelo Papa				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b> 234 Northview Ave.				5	14	2022	
<b>City</b> New Castle	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16105					
<b>Employer Name</b> Angelo A. Papa, Attorney at Law				<b>Occupation</b> Attorney			
<b>Employer Mailing Address/Principal Place of Business</b> 318 Highland Avenue			<b>City</b> New Castle		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16101	

<b>Full Name of Contributor</b> Ronald H. Betz, Jr.			<b>MO</b> 5	<b>DAY</b> 12	<b>YEAR</b> 2022	<b>\$</b> 500.00
<b>Mailing Address</b> 308 Oakwood Circle						
<b>City</b> McDonald	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15057				
<b>Employer Name</b> Retired			<b>Occupation</b> Retired			
<b>Employer Mailing Address/Principal Place of Business</b> Retired		<b>City</b> Retired	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15057		

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

<b>PAGE TOTAL</b>
<b>\$</b> 3,664.36

## 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.**

<b>Name of Filing Committee or Candidate</b>  CITIZENS FOR CHRIS FRYE	<b>Reporting Period</b>  From: <u>5/3/2022</u> To: <u>6/6/2022</u>
-----------------------------------------------------------------------------	--------------------------------------------------------------------------

				DATE			AMOUNT
Full Name	MO	DAY	YEAR				
Cooking 4 Autism						\$ 100.00	
<b>Mailing Address</b> 852 North 44th St.							
<b>City</b> Philadelphia				6	6	2022	
<b>State</b> PA							
<b>Zip Code (Plus 4)</b> 19104							
<b>Receipt Description</b> Void Check #1033 - Check lost in mail							

Full Name	MO	DAY	YEAR			
Cooking 4 Autism						\$ 100.00
<b>Mailing Address</b> 852 North 44th St.						
<b>City</b> Philadelphia				6	6	2022
<b>State</b> PA						
<b>Zip Code (Plus 4)</b> 19104						
<b>Receipt Description</b> Void Check #1053 - Checks lost in mail						

**Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.**

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



## 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>	
CITIZENS FOR CHRIS FRYE		From: <u>5/3/2022</u> To: <u>6/6/2022</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period		(1)	\$ 33.00
<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.)			\$ 33.00

**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>
---------------------------------------	----------------------------------------------------------------------

			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

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

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)					
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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
CITIZENS FOR CHRIS FRYE	From <u>5/3/2022</u> To: <u>6/6/2022</u>

DATE				AMOUNT
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
Sunoco				
<b>Mailing Address</b> 256 Danner Rd	5	5	2022	\$ 74.00
<b>City</b> Jim Thorpe	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18229	<b>Description of Expenditure</b> Gas	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
Sunoco				
<b>Mailing Address</b> 850 Franklin Rd	5	7	2022	\$ 82.00
<b>City</b> Jackson Center	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16137	<b>Description of Expenditure</b> Gas	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
Speedway				
<b>Mailing Address</b> 208 N. Jefferson St.	5	7	2022	\$ 62.00
<b>City</b> New Castle	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16101	<b>Description of Expenditure</b> Gas	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
Forward Trends, LLC				
<b>Mailing Address</b> 864 Rogers Road	5	7	2022	\$ 30.00
<b>City</b> New Castle	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16105	<b>Description of Expenditure</b> Website Maintenance Fee	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
Dropbox				
<b>Mailing Address</b> 333 Brannan St.	5	7	2022	\$ 19.99
<b>City</b> San Francisco	<b>State</b> CA	<b>Zip Code (Plus 4)</b> 94107	<b>Description of Expenditure</b> Campaign Media Storage	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
Get Go				
<b>Mailing Address</b> 1700 B New Butler Road	5	13	2022	\$ 85.00
<b>City</b> New Castle	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16101	<b>Description of Expenditure</b> Gas	

To Whom Paid			MO	DAY	YEAR	\$ 58.51
Corner Bar and Grillz LLC						
Mailing Address 32 E. Main St.			5	14	2022	
City Corry	State PA	Zip Code (Plus 4) 16407	Description of Expenditure Meal - Campaign Walk			
To Whom Paid			MO	DAY	YEAR	\$ 92.25
Cobblestone Inn & Suites						
Mailing Address 864 E. Columbus Ave.			5	14	2022	
City Corry	State PA	Zip Code (Plus 4) 16407	Description of Expenditure Hotel			
To Whom Paid			MO	DAY	YEAR	\$ 56.00
Get Go						
Mailing Address 3224 Wilmington Road			5	14	2022	
City New Castle	State PA	Zip Code (Plus 4) 16105	Description of Expenditure Gas			
To Whom Paid			MO	DAY	YEAR	\$ 8,548.22
Campaign Sidekick						
Mailing Address 1550 Old Annetta			5	19	2022	
City Aledo	State TX	Zip Code (Plus 4) 76008	Description of Expenditure Campaign Messages			
To Whom Paid			MO	DAY	YEAR	\$ 14.36
WinRed Technical Services						
Mailing Address 1776 Wilson Blvd			5	13	2022	
City Arlington	State VA	Zip Code (Plus 4) 22209	Description of Expenditure Merchant Fee			
To Whom Paid			MO	DAY	YEAR	\$ 0.11
WinRed Technical Services						
Mailing Address 1776 Wilson Blvd			5	5	2022	
City Arlington	State VA	Zip Code (Plus 4) 22209	Description of Expenditure Merchant Fee			
To Whom Paid			MO	DAY	YEAR	\$ 0.99
WinRed Technical Services						
Mailing Address 1776 Wilson Blvd			5	10	2022	
City Arlington	State VA	Zip Code (Plus 4) 22209	Description of Expenditure Merchant Fee			
To Whom Paid			MO	DAY	YEAR	\$ 0.99
WinRed Technical Services						
Mailing Address 1776 Wilson Blvd			5	16	2022	
City Arlington	State VA	Zip Code (Plus 4) 22209	Description of Expenditure Merchant Fee			

<b>To Whom Paid</b> Cooking 4 Autism			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 200.00
<b>Mailing Address</b> 852 North 44th Street			6	6	2022	
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19104	<b>Description of Expenditure</b> Donation - Reissue Lost Checks			

  

<b>To Whom Paid</b> Brittany Frye Rice Bee's Tees			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 65.00
<b>Mailing Address</b> 220 Bellview Avenue			5	17	2022	
<b>City</b> New Castle	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16101	<b>Description of Expenditure</b> Campaign T-Shirts			

  

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						<b>\$</b> 9,389.42

