Campaign Finance Report

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

Filer Identificati Number :	on 202	10365			Rep File			CAN	DII	DATE		COM	1ITTEE	✓	LOBI	BYIST		
Name of Filing C	ommittee, Candi	date or L	obbyist:		CITI	ZEN	NS FO	R CHR	IS	FRYE								
Street Address:	1192 KINGS	CHAPEL	ROAD															
City:	NEW CASTLE							State:		PA			Zip Cod	le: 16	105			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA' PRIMARY	Y PRE-	- 2	2.	30 DA		P				AMENDM REPORT?	Yes	N	0	\	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	Y PRE	- 5	5.	30 DA					TERMINA REPORT?	Yes	٨	0	\		
report type)									_			PAPER		\checkmark	DISK	ETTE		
Name of Office S	ought by Candid	ate:	-					DATE	0	F ELE	CTIC	ON	District Number	Office Code	Par	ty Cod	e Cour	
								МО		DAY	Υ	EAR	-1	LTG	REP	1	37	
LIEUTENANT G	OVERNOR								11		8	2022		(SEE INS	TRUCTI	ONS FO	CODES)
Summary of		МО	DAY	YEAR				МО		DAY	Y	EAR	FO	R OFFIC	E USE	ONL	7	
Expenditures	from:		5 3	20	022	Т	0		6		6	2022						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$		-		8,	530.61						
B. Total Moneta	ary Contributions	And Rec	eipts (From	Sche	dule	I)	\$				4,	117.15						
C. Total Funds	Available (Sum C	f Lines A	and B)				\$				12,	647.76						
D. Total Expend	ditures (From Scl	nedule II	I)				\$				9,	389.42						
E. Ending Cash	Balance (Subtra	ct Line D	From Line (C)			\$				3,2	258.34						
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedul	le II))	\$					33.00						
G. Unpaid Debt	s And Obligation	s (From S	Schedule IV)			\$					0.00						
				AFF	IDA	VI	T SE	CTIO	N									
PART I - If this is			_															
I swear (or affirm) correct and comple	that this report, in ete.	cluding the	e attached scl	nedules	filed	on	paper	or by el	ectr	onic m	ediun	ı, are to t	he best o	f my knov	rledge	and be	lief , tr	ue
Sworn to and subs	cribed before me th day of	is	20						•		:	Signature	of Perso	1 Submitt	ing Rep	ort		_
	Signat	ure					- -		•				Prin	ted Name				_
My Commission Ex	pires						_		-				Emai	il				
	МО	D	AY	YR						Are	ea Co	de	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a car	ididate's	authorized	Comm	nittee	e, C	andid	ate sha	all s	sign he	ere.							
I swear (or affirm) No 320) as amende		my knowl	edge and beli	ef this	politi	ical	comm	ittee ha	s no	ot viola	ted a	ny provis	ions of the	e act of Ju	ine 3,1	937 (P	.L. 133	з,
Sworn to and subsc		5										S	ignature o	f Candida	te			-
	day of —— ————		_ 20				_						Printe	d Name				-
	Signature						-		_									_
My Commission Exp	ires												Emai	iI				
	мо	D	AY	YR			-			Area	Code		Da	ytime Te	lephor	e Num	ber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

-				
Name of Filing Committee or Candidate	Reporting	g Period		
CITIZENS FOR CHRIS FRYE	From:	<u>5/3/202</u>	<u>2</u> To:	6/6/2022
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g Period	(1)	\$	52.79
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)			\$	3,664.36
TOTAL for the Reporting	J Period	(3)	\$	3,664.36
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	200.00
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			\$	4,117.15

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 C	andidate	R	eporting	Period			
		Fi	rom:		То	•	
		•		DATE			AMOUNT
Full Name of Contributing Comm	ittee		МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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

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

DATE

CITIZENS FOR CHRIS FRYE

From:

<u>5/3/2022</u> **To:**

6/6/2022

AMOUNT

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

PAGE TOTAL \$ 200.00

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

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		P	AMOUNT	
Full Name of Contributing Committee				МО	DAY	YEAR		0	00
Mailing Address							+	0.	00
City	State	Zip Code	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on Scheo	dule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.0	0

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						
CITIZENS FOR CHRIS FRYE				Fron	n:	<u>5/3/2</u>	<u>022</u> To	:	6/6/2022	
					DA	ATE		Α	MOUNT	
Full Name of Contributor					мо	DAY	YEAR		254.25	
Curt Coccodrilli					МО	DAI	ILAK	\$	364.36	
Mailing Address96 Mountain Road					5	13	2022			
City Lake Ariel	State	Zip	Code (Plus	4)						
	PA	18	436							
Employer Name Self-Employed					Occupat	ion	Self-Em	nployed Consultant		
Employer Mailing Address/Principal Plac	e of Business		City		State			Zip Cod	le (Plus 4)	
96 Mountain Road			Lake Ariel			PA		18436		
Full Name of Contributor					мо	DAY	YEAR	\$	500.00	
Ronald H. Betz, Jr.] *	300.00	
Mailing Address 308 Oakwood Circle				5	12	2022				
City McDonald	State	Zip	Code (Plus	4)						
PA 15057								l		
Employer Name Retired					Occupat	ion	Retired			
Employer Mailing Address/Principal Plac	e of Business		City		State		Zip Cod	le (Plus 4)		
Retired			Retired			PA		15057		
Full Name of Contributor					МО	DAY	VEAD			
Angelo Papa					МО	DAY	YEAR	\$	1,500.00	
Mailing Address 234 Northview Ave.					5	14	2022			
City New Castle	State	Zip	Code (Plus	4)			LULL			
	PA	16	105					l		
Employer Name Angelo A. Papa, Attorn	ney at Law				Occupat	ion ,	Attorney	/		
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip Cod	le (Plus 4)	
318 Highland Avenue			New Castl	е		PA		16101		
Full Name of Contributor					мо	DAY	YEAR	\$	1,000.00	
Angelo Papa						27.1.	,] *	1,000.00	
Mailing Address 234 Northview Ave.				5	14	2022				
City New Castle	State	Zip	Code (Plus	4)						
PA 16105								1		
Employer Name Angelo A. Papa, Attorney at Law				Occupation Attorney						
Employer Mailing Address/Principal Plac	e of Business		City			State	State		Zip Code (Plus 4)	
318 Highland Avenue			New Castl	e	PA 16101					

Full Name of Contributor	ull Name of Contributor					4 300.00
John Mozzocio				DAY	YEAR	\$ 300.00
Mailing Address 3478 Tuscarora Dr	5	6	2022			
City New Castle	State	Zip Code (Plus 4)]		2022	
	PA	16105				1
Employer Name New Castle Area Scho	ool District		Occupat	ion	Director	of Special Services
Employer Mailing Address/Principal Plac	City	State Zip			Zip Code (Plus 4)	
420 Fern Street		PA		16101		

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

PAGE TOTAL
\$ 3,664.36

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 C	andidate		Report	ting Perio	od			
CITIZENS FOR CHRIS FRYE			From:		5/3/202	<u>22</u> To:		6/6/2022
				D	ATE			AMOUNT
Full Name				МО	DAY	YEAR	\$	100.00
Cooking 4 Autism	411. 01							
Mailing Address 852 North 4		72. 0. 4. (Di 4)	6	6	2022	2	
City Philadelphia	State	Zip Code (Pius 4)					
	PA	19104						
Receipt Description Void Ch	neck #1033 - Check lost	: in mail						
Full Name				мо	DAY	YEAR	\$	100.00
Cooking 4 Autism				MO	DAI	ILAN	*	100.00
Mailing Address 852 North 4	4th St.			6	6	2022	,	
City Philadelphia	State	Zip Code (Plus 4)					
	PA	19104						
Receipt Description Void Ch	neck #1053 - Checks los	st in mail		•	•	•		
Futor Curred Total of Bout F or	- Cabadula I Datailad	C Dom	Cootion	4				PAGE TOTAL
Enter Grand Total of Part E or	n Schedule 1, Detailed	Summary Page,	Section	4.			\$	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

Name of Filing Committee or Candidate	Reporting Period		
CITIZENS FOR CHRIS FRYE	From:	<u>5/3/2022</u> To:	<u>6/6/2022</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	33.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	0.00
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,		\$	33.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	ame of Filing Committee or Candidate				Reporting Period				
			From:			To:			
				DATE			AMOUNT		
Full Name of Contributor			мо	DAY	YEAR				
Mailing Address		_				 		0.00	
City	State	Zip Code (Plus 4)							
Description of Contribution:		•	•			•			
Enter Grand Total of Part F on Sche Section 2.	dule II, In-Kind (Contributions Detai	iled Sum	mary Pag	je,		PAGE TOTAL		
						\$	(0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate				porting	Period			
				Fro	m:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address				-				\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occup	ation			
Employer Mailing Address/Principal Plac	ce of Business	Cit	ty	State	e Zij	o Code(Plus 4)	Descri	ptio	n of Contribution
Enter Grand Total of Part G on Sch	edule II, In-Kir	nd (Contributions D	etaile	ed				PAGE TOTAL
Summary Page, Section 3.									0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period				
CITIZENS FOR CHRIS FRYE	From	5/3/2022	То:	6/6/2022	

				DATE		AMOUNT				
To Whom Paid			МО	DAY	YEAR					
Sunoco			140							
Mailing Address 256 Danner	Rd		5	5	2022	\$	74.00			
City Jim Thorpe	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
	PA	18229	Gas							
To Whom Paid			мо	DAY	YEAR					
Sunoco			110							
Mailing Address 850 Franklin Rd				7	2022	\$	82.00			
City Jackson Center State Zip Code (Plus 4)			Description of Expenditure							
	PA	16137	Gas							
To Whom Paid			мо	DAY	YEAR					
Speedway			1-10							
Mailing Address 208 N. Jeffer	rson St.		5	7	2022	\$	62.00			
City New Castle State Zip Code (Plus 4)			Description of Expenditure							
PA 16101				Gas						
To Whom Paid			МО	DAY	YEAR					
Forward Trends, LLC			MO	DAT	TEAR					
Mailing Address 864 Rogers Road			5	7	2022	\$	30.00			
City New Castle	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
	PA	16105	Website Maintenance Fee							
To Whom Paid			МО	DAY	YEAR					
Dropbox			MO	DAT	TEAR					
Mailing Address 333 Brannar	St.		5	7	2022	\$	19.99			
City San Francisco	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	l				
	CA	94107	Campai	gn Media S	Storage					
To Whom Paid			Ma	DAY	VEAD					
Get Go			МО	DAY	YEAR					
Mailing Address 1700 B New Butler Road				13	2022	\$	85.00			
City New Castle State Zip Code (Plus 4) PA 16101			Descrip	tion of Exp	enditure	<u> </u>				
			Gas							
1										

To Wh	om Paid				МО	DAY	YEAR			
Corner Bar and Grillz LLC										
Mailing Address 32 E. Main St.					5	14	2022	\$	58.51	
City Corry State Zip Code (Plus 4)				Description of Expenditure						
PA 16407				Meal - Campaign Walk						
To Wh	om Paid				МО	DAY	YEAR			
Cobblestone Inn & Suites										
Mailin	g Address 86	64 E. Columbus Av	e.		5	14	2022	\$	92.25	
City Corry State Zip Code (Plus 4)				Descript	tion of Exp	enditure				
			PA	16407	Hotel					
To Wh	om Paid				МО	DAY	YEAR			
Get G	0				MO	DAI	ILAK			
Mailin	g Address 32	224 Wilmington Ro	ad		5	14	2022	\$	56.00	
City	New Castle		State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
			PA	16105	Gas					
To Wh	om Paid				МО	DAY	YEAR			
Camp	aign Sidekick				MO		ILAK			
Mailin	g Address 1	550 Old Annetta			5	19	2022	\$	8,548.22	
City	Aledo		State	Zip Code (Plus 4)	4) Description of Expenditure					
			TX	76008	Campaign Messages					
To Whom Paid				МО	DAY	YEAR				
WinRe	d Technical Se	rvices			140		TEAR			
Mailin	g Address 1	776 Wilson Blvd			5	13	2022	\$	14.36	
City	Arlington		State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
			VA	22209	Merchant Fee					
To Wh	om Paid				мо	DAY	YEAR			
WinRe	d Technical Se	rvices			140		TEAR			
Mailin	g Address 17	776 Wilson Blvd			5	5	2022	\$	0.11	
City	Arlington		State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
			VA	22209	Merchant Fee					
To Wh	om Paid					DAY	VEAD			
WinRed Technical Services					МО	DAY	YEAR			
Mailing Address 1776 Wilson Blvd				5	10	2022	\$	0.99		
City	Arlington		State	Zip Code (Plus 4)	Descript	l tion of Exp	enditure			
VA 22209				Merchant Fee						
To Whom Paid					DAY	VEAD				
WinRed Technical Services				МО	DAY	YEAR				
Mailing Address 1776 Wilson Blvd				5	16	2022	\$	0.99		
City	City Arlington State Zip Code (Plus 4)			Descript	l tion of Exp	ı enditure	<u> </u>			
VA 22209				Merchant Fee						
1										

To Whom Paid				DAY	YEAR			
Cooking 4 Autism			МО	DAI	ILAK			
Mailing Address 852 North 44th Street			6	6	2022	\$	200.00	
City Philadelphia State Zip Code (Plus 4)				Description of Expenditure				
	PA 19104 Donation - Reissue Lost Ch				e Lost Ch	ecks		
To Whom Paid				DAY	YEAR			
Brittany Frye Rice Bee's Tees					1 = Alix			
Mailing Address 220 Bellview Avenue			5	17	2022	\$	65.00	
City New Castle	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
	PA	16101	Campai	gn T-Shirts				
							PAGE TOTAL	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	9,389.42	