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 | 20160 | 0035 | | | Rep File | | | CANE | DID | ATE | | COMN | 1ITTEE | ✓ | LOB | BYIS | | |
|--|-----------------------|--------------|-----------|-----------------------|----------|-------------|------|----------|------------------|------|------------------------------------|-------------|------------|--------------------|----------------|----------|---------|------------|----------|
| Name of Filing C | ommittee | , Candida | ite or L | obbyist: | | FRIE | ND | S OF | JONATH | IAF | N FRI | ΓZ | | | | | | | - |
| Street Address: | 15 LC | NG MEA | DOW D | R | | | | | | | | | | | | | | | |
| City: | HONE | SDALE | | | | | | | State: | I | PA | | | Zip Cod | le: 18 | 431 | | | |
| TYPE OF REPORT | 6TH TUES PRE-PRIMA | | 1. | 2ND FRIDA PRIMARY | Y PRE- | - 2 | 2. | 30 DA | | PC | OST- | 3. X | | AMENDM REPORT? | | Yes |] [| No | \ |
| (place X to the right of | 6TH TUES PRE-ELEC | | 4. | 2ND FRIDA ELECTION | Y PRE | - 5 | 5. | 30 DA | | PC | OST- | 6. | | TERMINA REPORT? | | Yes |] [| No | \ |
| report type) | ANNUAL | REPORT | 7. | Year 2022 | | | | | NG METI CHECK | | | | | PAPER | | \ | DIS | KETTE | |
| Name of Office S | ought by | Candidat | e: | _ | | | | | DATE | OF | ELE | CTIO | N | District Number | Office Code | Pa | rty Co | de Cou | |
| | | | | | | | | | МО | | DAY | YE | AR | | | RE | P | | |
| | | | | | | | | | 1 | 1 | | 8 | 2022 | | (SEE INS | STRUCT | IONS FO | R CODES | 5) |
| Summary of | | and | МО | DAY | YEAR | | | | МО | ŀ | DAY | YI | EAR | FO | R OFFIC | E USI | ONL | Y | |
| Expenditures | from: | | | 5 3 | 3 2 | 022 | Т | 0 | | 6 | | 6 | 2022 | | | | | | |
| A. Amount Bro | ught Forw | ard From | Last R | eport | | | | \$ | | | | 25,9 | 935.00 | | | | | | |
| B. Total Monetary Contributions And Receipts (From Schedule I) \$ 200.00 | | | | | | | | | | | | | | | | | | | |
| C. Total Funds Available (Sum Of Lines A and B) \$ 26,135.00 | | | | | | | | | | | | | | | | | | | |
| D. Total Expenditures (From Schedule III) \$ 7,535.00 | | | | | | | | | | | | | | | | | | | |
| E. Ending Cash Balance (Subtract Line D From Line C) | | | | | | \$ | | | | 18,6 | 00.00 | | | | | | | | |
| F. Value Of In- | Kind Cont | ributions | Receive | ed (From S | chedu | le II |) | \$ | | | | | 0.00 | | | | | | |
| G. Unpaid Debt | s And Obl | igations | (From S | Schedule IV | /) | | | \$ | | | | | 0.00 | | | | | | |
| | | | | | AFF | IDA | VI | T SE | CTION | ١ | | | | | | | | | |
| PART I - If this is | | • | • | _ | | | | | | - | • | | | | | | | | |
| I swear (or affirm) correct and comple | | eport, incli | uding the | attached sc | hedules | filed | l on | paper | or by ele | ctro | onic me | edium | , are to t | he best o | f my knov | vledge | and b | elief , tı | rue |
| Sworn to and subs | cribed befo day of | re me this | | 20 | | | | | | - | | S | ignature | of Perso | n Submitt | ing Re | port | | |
| | | Signatur | | | | | | - | | - | | | | Prin | ted Name | | | | - |
| My Commission Ex | cpires | Signatui | e | | | | | | | - | | | | Emai | il | | | | _ |
| | Ī | мо | D | AY | YR | | | | | _ | Are | a Coc | le | Daytim | e Teleph | one Nı | ımber | | |
| Part II- If this is | a report | of a cand | idate's | authorized | Comn | nitte | e, C | andid | ate sha | II s | ign he | ere. | | | | | | | |
| I swear (or affirm) No 320) as amende | | best of m | y knowle | edge and beli | ief this | politi | ical | comm | ittee has | no | t violat | ed an | y provisi | ions of the | e act of Ju | ıne 3,1 | .937 (I | P.L. 133 | з, |
| Sworn to and subsc | | e me this | | | | | | | | • | | | Si | ignature o | f Candida | ate | | | - |
| - | day of —— | | | | | | | _ | | - | | | | Drinto | d Name | | | | _ |
| | s | ignature | | | | | | - | | _ | | | | Finite | - 1141116 | | | | _ |
| My Commission Exp | | | | | | | | | | | | | | Ema | il | | | | |
| | | МО | D | AY | YR | | | • | | - | Area Code Daytime Telephone Number | | | | | | nber | _ | |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| Name of Filing Committee or Candidate | Reporting | g Period | | |
|--|-----------|----------------|--------------|----------|
| FRIENDS OF JONATHAN FRITZ | 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 |) 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) | \$ | 200.00 | | |
| TOTAL for the Reporting | (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) | | | \$ | 0.00 |
| TOTAL for the Reporting | Period | (3) | \$ | 0.00 |
| 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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa | | | \$ | 200.00 |

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

| Full Name of Contributing Committee | | Fron | m: | DATE | То | : | AMOUNT |
|-------------------------------------|------------------|------|----|------|------|----|--------|
| Full Name of Contributing Committee | | | | DATE | | | AMOUNT |
| Full Name of Contributing Committee | | | | | | | |
| | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | \$ | 0.00 |
| City | Zip Code (Plus 4 | +) | | | | | |

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

0.00

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

FRIENDS OF JONATHAN FRITZ

From:

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

6/6/2022

AMOUNT

| Full Name of Contributor RONA HONIGFELD | мо | DAY | YEAR | | | |
|---|--------------------|-----------------------------------|------|---|------|-----------|
| Mailing Address 3170 WYNSUM AVE | | | | _ | | \$ 200.00 |
| MERRICK | State NY | Zip Code (Plus 4) 11565 | 6 | 6 | 2022 | |

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 Candi | ame of Filing Committee or Candidate | | Reporting Period | | | | | |
|-----------------------------------|--------------------------------------|---------------|------------------|------|-----|------|----|------------|
| | | | From: | | | То: | | |
| | | | | DA | TE | | Α | MOUNT |
| Full Name of Contributing Commit | tee | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Cod | e (Plus 4) | | | | | |
| | | | | | | | | PAGE TOTAL |
| Enter Grand Total of Part C on S | Schedule I, Detail | ed Summary Pa | age, Sectio | n 3. | | | \$ | 0.00 |

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.)

| ame of Filing Committee or Candidate | | | Reporting Period | | | | | | |
|--|---------------|-----------|------------------|---------|--------|-------|------|---------|-------------|
| | | | | Fror | n: | | То |): | |
| | | | | | D | ATE | | A | MOUNT |
| Full Name of Contributor | | | | | мо | DAY | YEAR | | |
| Mailing Address City State Zip Code (Plus 4) | | | | | | | \$ | 0.00 | |
| City | State | Zi | p Code (Plus | 4) | | | | | |
| Employer Name | • | • | | | Occupa | tion | | | |
| Employer Mailing Address/Principal Pla Business | ce of | | City | | | State | | Zip Cod | le (Plus 4) |
| Enter Grand Total of Part C on Sch | edule I, Deta | iled Sumr | mary Page, | Section | on 3. | | | P | O.00 |

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 | | Report | ting Perio | bd | | | |
|-------------------------------|--------------------------|------------------|---------|------------|-----|------|-----|----------|
| | | | From: | | | To: | | |
| | | | | D | ATE | | AM | OUNT |
| Full Name | | | | МО | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Code (| Plus 4) | | | | | |
| Receipt Description | • | • | | • | • | • | _ | |
| Enter Grand Total of Part E o | on Schedule I. Detaile | d Summary Page | Section | 4 | | | PAG | GE TOTAL |
| | m deficación 1, detailes | z Sammary r age, | occion | •• | | | \$ | 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>5/3/2022</u> To: | 6/6/2022 | | | | | |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR | | | | | | | | |
| TOTAL for the Reporting Pe | eriod (1) | \$ | 0.00 | | | | | |
| 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, 1 | | \$ | 0.00 | | | | | |

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

| Name of Filing Committee or Candid | ate | | Reporting Period | | | | | |
|------------------------------------|--------------------|-----------------------|------------------|----------|------|-----------|------------|--|
| | | | From: | | | То: | | |
| | | | | 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 S | chedule II, In-Kir | nd Contributions Deta | iled Sum | mary Pag | ge, | | PAGE TOTAL | |
| Section 2. | | | | | | \$ | 0.00 | |

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

| Name of Filing Committee or Candidat | me of Filing Committee or Candidate | | | | Reporting Period | | | | | |
|---|-------------------------------------|---------|------------|---------|------------------|-----------|-----------|-----------|-------|--------------------|
| | | | | | Fro | om: | | To: | | |
| | | | | | | | DATE | | | AMOUNT |
| Full Name of Contributor | | | | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | | \$ | 0.00 | |
| City | State | | Zip Code(F | Plus 4) | | | | | | |
| Employer of Contributor | • | | • | | | Occupa | tion | | • | |
| Employer Mailing Address/Principal Pla Business | ace of | City | | State | | Zip 4) | Code(Plus | Descri | ption | of Contribution |
| Enter Grand Total of Part G on Sc Summary Page, Section 3. | hedule II, I | In-Kind | Contributi | ons De | taile | ed | | | | PAGE TOTAL 0.00 |

STATEMENT OF EXPENDITURES

| Name of Filing Committee or Car | ndidate | | Reporti | ng Period | | | |
|---|--------------------|--------------------------------|-------------------------|---------------------------|---------------|-----|----------|
| FRIENDS OF JONATHAN FRITZ | | | From | | <u>3/2022</u> | То: | 6/6/2022 |
| | | | | DATE | | | AMOUNT |
| To Whom Paid WELLS FARGO CARD SVCS | | | мо | DAY | YEAR | | |
| Mailing Address PO BOX 7706 | 53 | | 5 | 20 | 2022 | \$ | 2,100.00 |
| City MENIAPOLIS | State MN | Zip Code (Plus 4) 55480 | Descrip PETITIO | NIGHT EVENTS | | | |
| To Whom Paid HRCC | мо | DAY | YEAR | | | | |
| Mailing Address 500 N 3RD ST | | | 5 | 5 | 2022 | \$ | 1,500.00 |
| City HARRISBURG | State PA | Zip Code (Plus 4) | Descrip ROUND | | | | |
| To Whom Paid NORTHEAST PA LEADERSHIP FU | IND | | мо | DAY | YEAR | | |
| Mailing Address 1140 RT 315 | | | 5 | 5 | 2022 | \$ | 1,205.00 |
| City WILKES BARRE State PA | | | | otion of Exp | | | |
| To Whom Paid UNION DALE FIRE CO | | | МО | DAY | YEAR | | |
| Mailing Address PO BOX 191 | | | 6 | 5 | 2022 | \$ | 500.00 |
| City UNION DALE State Zip Code (Plus 4) PA 15470 | | | | otion of Exp AL PICNIC | | | |

| | 154/0 | MINERA | | | | | | |
|--------------------------------|-------|-------------------|------------------------------------|-----|------|----|--------|--|
| To Whom Paid CAROL HUNT | | | мо | DAY | YEAR | | | |
| Mailing Address 95 ELK LAKE DR | | | 6 | 5 | 2022 | \$ | 150.00 | |
| City WAYMART | State | Zip Code (Plus 4) | Description of Expenditure | | | | | |
| | PA | 18472 | ORDER OF THE EASTERN SHORE SPONSOR | | | | | |

| To Whom Paid MAY FOR PA Mailing Address 2137 NEWTON RANSOM RD | | | мо | DAY | YEAR | | |
|--|-----------------------|-------------------------|----------|----------------------------|------|----|----------------------------|
| | | | 6 | 5 | 2022 | \$ | 2,000.00 |
| City CLARKS SUMMIT | State | Zip Code (Plus 4) | Descrip | Description of Expenditure | | | |
| | PA | 18411 | DONATION | | | | |
| | L | | <u> </u> | | | | |
| | | | | | | | PAGE TOTAL |
| nter Grand Total of Expend | ditures on Page 1, Re | port Cover Page, Item D | | | | \$ | |
| inter Grand Total of Expend | ditures on Page 1, Re | port Cover Page, Item D | | | | \$ | |
| Enter Grand Total of Expend | ditures on Page 1, Re | port Cover Page, Item D | | | | \$ | |
| Enter Grand Total of Expend | ditures on Page 1, Re | port Cover Page, Item D | | | | \$ | |
| Enter Grand Total of Expend | ditures on Page 1, Re | port Cover Page, Item D | | | | \$ | PAGE TOTAL 7,455.00 |
| Enter Grand Total of Expend | ditures on Page 1, Re | port Cover Page, Item D | | | | \$ | |