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 2012	0363			Report Filed E		CA	NDI	DATE		COM	AITTEE	Y	LOBE	1131	
Name of Filing C	Committee, Candida	ate or L	obbyist:	İ	FRIEND	S OF	CRIS	DUS	SH							
Street Address:																
City:	BROOKVILLE						State	e:	PA			Zip Co	de: 15	825		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2.	30 DA		P	POST-	3.		AMENDN REPORT		Yes	No	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 DA		P	POST-	6. X		TERMIN/ REPORT		Yes	No	✓
report type)	ANNUAL REPORT	7.	Year 2023				NG ME					PAPER		\checkmark	DISKE	ΓΤΕ
Name of Office S	Sought by Candidat	te:			•		DAT	ΈΟ	F ELEC	CTIO	N	District Number	Office Code	Par	ty Code	County Code
							МО		DAY	YE	AR			REP		
								11		7	2023		(SEE IN	STRUCTIO	NS FOR C	ODES)
Summary of Expenditures	Receipts and	МО	DAY	YEAR			МО		DAY	YE	AR	FC	R OFFI	CE USE	ONLY	
			10 24	20)23 T	0		11	2	.7	2023					
A. Amount Bro	ught Forward Fron	n Last R	eport			\$					370.00					
B. Total Monet	ary Contributions A	And Rec	eipts (Fron	n Sched	dule I)	\$					500.00					
C. Total Funds	Available (Sum Of	Lines A	and B)			\$				13,8	370.00					
D. Total Expend	ditures (From Sch	edule II	I)			\$				ϵ	34.49					
E. Ending Cash	Balance (Subtract	Line D	From Line	C)		\$				13,2	35.51					
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedul	le II)	\$					0.00					
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV	/)		\$					0.00			'		
				AFF:	IDAVI	T SE	CTI	NC								
	s a Committee repo that this report, incl		_						-		_		f my kno	wledge a	and belie	ef , true
correct and comple	ete.	_														
Sworn to and subs	day of	•	20			_				S	ignature	of Perso	n Submit	ting Rep	ort	
	Signatu	re				_						Prin	ted Name	9		
My Commission Ex	cpires					_		•				Ema	il			
	МО	D	AY	YR					Are	a Cod	le	Daytin	ne Teleph	one Nu	nber	_
	a report of a cand				•											
No 320) as amende		ny knowle	edge and beli	ief this	political	comm	ittee h	nas n	ot violat	ed an	y provis	ions of th	e act of J	une 3,19	937 (P.L.	1333,
Sworn to and subsc	ribed before me this day of		20								S	ignature (of Candid	ate		
· <u> </u>						_						Printe	ed Name			
My Commission Exp	Signature pires					_						Ema	il			-
	мо	D	AY	YR		-			Area	Code		D	aytime T	elephon	e Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

	_			
Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF CRIS DUSH	From:	10/24/202	<u>:3</u> To:	11/27/2023
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)			\$	500.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	500.00

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 Candid	late	F	Reporting	Period			
		F	From:		То	:	
		·		DATE			AMOUNT
Full Name of Contributing Committee			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL\$ 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 Committe	ee or Candidate		Reporting	Period			
			From:		To	o :	
		•		DATE			AMOUNT
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
City							

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 P	Period		
FRIENDS OF CRIS DUSH	From:	10/24/2023	То:	11/27/2023

DATE AMOUNT

Full N	ame of Contributing Committee			мо	DAY	YEAR	
BERKSHIRE HATHAWAY ENERGY PAC					27(1	1 2711	\$ 500.00
Mailin	Mailing Address				24	2023	
City	DES MOINES	State	Zip Code (Plus 4)	11	24	2023	
		IA	50306				

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

PAGE TOTAL \$ 500.00

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.)

Name of Filing Committee or Candidate			Rep	orting Pe	riod			
			Fror	n:		To):	
				D	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupa	tion			
Employer Mailing Address/Principal Pla	ce of Business	City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Scho	dule I, Detailed S	Summary Page,	, Sectio	on 3.		:	\$	PAGE TOTAL 0.00

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	ing Peri	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plus 4)					
Receipt Description	•	•			•			
Forten Commit Tatal of Boot	F an Cabadala I Batallad	I C B	C					PAGE TOTAL
Enter Grand Total of Part	e on Schedule I, Detalled	summary Page,	Section	4.			\$	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 Per	iod	
FRIENDS OF CRIS DUSH	From:	<u>10/24/2023</u> To:	11/27/2023
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	R	
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
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,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	Name 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				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

\$

9.49

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period			
FRIENDS OF CRIS DUSH	FRIENDS OF CRIS DUSH			10/24	<u>1/2023</u>	То:	11/27/2023
				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
BROOKVILLE TRAIL HUB							
Mailing Address				25	2023	\$	100.00
City BROOKVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	15825	DONATI	ON			
To Whom Paid			мо	DAY	YEAR		
ССАТО			MO		ILAK		
Mailing Address			10	25	2023	\$	275.00
City SPRING MILLS	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
PA 16875			ADVERT	ISING			
To Whom Paid			мо	DAY	YEAR		

City	BROOKVILLE	State	Zip Code (Plus 4)	Description of Expenditure					
		PA	15825	POSTAGE					
To Whom Paid					DAY	YEAR			
BROOKVILLE QUARTERBACK CLUB				МО		ILAK			
Mailing Address				11	18	2023	\$	250.0	
City	BROOKVILLE	State	Zip Code (Plus 4)	Description of Expenditure					
		PA	15825	DONATION					

10

26

2023

USPS

Mailing Address

	PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.	\$ 634.49