

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 :		20240009		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF RICK CHRISTIE												
Street Address: PO BOX 499												
City: CARLISLE						State: PA			Zip Code: 17013			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY PRIMARY	POST-	3.	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 2024	FILING METHOD () CHECK ONE			PAPER <input checked="" type="checkbox"/>		DISKETTE			
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code
						MO	DAY	YEAR				
						11	5	2024	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:				MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY	
				3	5	2024		4	8	2024		
A. Amount Brought Forward From Last Report						\$ 0.00						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 3,574.29						
C. Total Funds Available (Sum Of Lines A and B)						\$ 3,574.29						
D. Total Expenditures (From Schedule III)						\$ 2,074.70						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 1,499.59						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 73.00						
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 RICK CHRISTIE	From: <u>3/5/2024</u> To: <u>4/8/2024</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 474.29

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)	\$ 2,100.00
TOTAL for the Reporting Period (2)	\$ 2,100.00

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)	\$ 1,000.00
TOTAL for the Reporting Period (3)	\$ 1,000.00

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.)	\$ 3,574.29
---	-------------

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 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 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 FRIENDS OF RICK CHRISTIE				Reporting Period From: <u>3/5/2024</u> To: <u>4/8/2024</u>			
				DATE		AMOUNT	
Full Name of Contributor ENERGY RESOURCE AMERICAS				MO	DAY	YEAR	\$ 250.00
Mailing Address 2135 CITY GATE LANE				1	11	2024	
City NAPERVILLE	State IL	Zip Code (Plus 4) 60563					
Full Name of Contributor THOMAS BROWN				MO	DAY	YEAR	\$ 100.00
Mailing Address 438 BRADY LANE				1	23	2024	
City WEST LAKE HILLS	State TX	Zip Code (Plus 4) 78746					
Full Name of Contributor BETTY PETTY				MO	DAY	YEAR	\$ 100.00
Mailing Address 23 PORTLAND STREET				2	26	2024	
City BARNEGAT	State NJ	Zip Code (Plus 4) 08006					
Full Name of Contributor JERRY PHILPOTT				MO	DAY	YEAR	\$ 100.00
Mailing Address 1993 LINTON HILL ROAD				3	1	2024	
City DUNCANNON	State PA	Zip Code (Plus 4) 17020					
Full Name of Contributor MARGARET CHRISTIE				MO	DAY	YEAR	\$ 150.00
Mailing Address 424 EAST NORTH STREET				3	1	2024	
City CARLISLE	State PA	Zip Code (Plus 4) 17013					
Full Name of Contributor MICHAEL FERGUSON				MO	DAY	YEAR	\$ 100.00
Mailing Address 105				3	21	2024	
City GREENSBURG	State PA	Zip Code (Plus 4) 15601					

Full Name of Contributor JEFFREY VANDER HEIJDEN			MO	DAY	YEAR	\$ 100.00
Mailing Address 726 APPALACHAIN AVENUE			3	4	2024	
City CARLISLE	State PA	Zip Code (Plus 4) 17013				
Full Name of Contributor JEFFREY VANDER HEIJDEN			MO	DAY	YEAR	\$ 100.00
Mailing Address 726 APPALACHAIN AVENUE			4	4	2024	
City CARLISLE	State PA	Zip Code (Plus 4) 17013				
Full Name of Contributor LAWRENCE CHRISTIE			MO	DAY	YEAR	\$ 100.00
Mailing Address 1241 88TH AVENUE			1	23	2024	
City KENOSHA	State WI	Zip Code (Plus 4) 53144				
Full Name of Contributor TOM POTTS			MO	DAY	YEAR	\$ 250.00
Mailing Address 18 HAR-JOHN ROAD			1	23	2024	
City CARLISLE	State PA	Zip Code (Plus 4) 17013				
Full Name of Contributor TOM DEWALL			MO	DAY	YEAR	\$ 100.00
Mailing Address 330 ACRE DRIVE			3	31	2024	
City CARLISLE	State PA	Zip Code (Plus 4) 17013				
Full Name of Contributor TOM DEWALL			MO	DAY	YEAR	\$ 100.00
Mailing Address 330 ACRE DRIVE			1	25	2024	
City CARLISLE	State PA	Zip Code (Plus 4) 17013				
Full Name of Contributor TIMOTHY CHRISTIE			MO	DAY	YEAR	\$ 50.00
Mailing Address 72 JANE STREET HARTSDALE NY 100530			3	21	2024	
City	State	Zip Code (Plus 4)				
Full Name of Contributor TIMOTHY CHRISTIE			MO	DAY	YEAR	\$ 200.00
Mailing Address 72 JANE STREET HARTSDALE NY 100530			1	23	2024	
City	State	Zip Code (Plus 4)				
Full Name of Contributor DORATO ENTERPRISES			MO	DAY	YEAR	\$ 100.00
Mailing Address 50 NORTH SPRING GARDEN			1	16	2024	
City CARLISLE	State PA	Zip Code (Plus 4) 17013				

Full Name of Contributor				MO	DAY	YEAR	\$100.00
RICK CHRISTIE							
Mailing Address				1	10	2024	
424 EAST NORTH STREET							
City	CARLISLE	State	Zip Code (Plus 4)				
		PA	17013				

Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
RICK CHRISTIE							
Mailing Address				1	16	2024	
424 EAST NORTH STREET							
City	CARLISLE	State	PA	Zip Code (Plus 4)	17013		

PAGE TOTAL

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

\$ 2,100.00

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 RICK CHRISTIE	Reporting Period From: <u>3/5/2024</u> To: <u>4/8/2024</u>
--	--

				DATE	AMOUNT		
Full Name of Contributor DAVID CROWE AND MARY ANN DANIELS				MO	DAY	YEAR	\$ 500.00
Mailing Address 7320 VAN CAMP ROAD				1	26	2024	
City GIRARD	State PA	Zip Code (Plus 4) 16417					
Employer Name RETIRED				Occupation			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	

Full Name of Contributor DAVID CROWE AND MARY ANN DANIELS				MO	DAY	YEAR	\$ 500.00
Mailing Address 7320 VAN CAMP ROAD				3	8	2024	
City GIRARD	State PA	Zip Code (Plus 4) 16417					
Employer Name RETIRED				Occupation			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	

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

PAGE TOTAL \$ 1,000.00

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 From: To:
---------------------------------------	--

			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 RICK CHRISTIE		From: <u>3/5/2024</u> To: <u>4/8/2024</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)		\$	73.00
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.)		\$	73.00

SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate FRIENDS OF RICK CHRISTIE	Reporting Period From: <u>3/5/2024</u> To: <u>4/8/2024</u>
--	--

				DATE	AMOUNT		
Full Name of Contributor CARLISLE AREA DEMOCRATIC COMMITTEE				MO	DAY	YEAR	\$ 73.00
Mailing Address PO BOX 993				3	31	2024	
City CARLISLE	State PA	Zip Code (Plus 4) 17013					
Description of Contribution:							
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.							PAGE TOTAL \$ 73.00

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

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF RICK CHRISTIE	From <u>3/5/2024</u> To: <u>4/8/2024</u>

DATE				AMOUNT
To Whom Paid				
TRUIST BANK				
Mailing Address 330 YORK ROAD				
City CARLISLE	State PA	Zip Code (Plus 4) 17013		
Description of Expenditure				
BUSINESS CHECKS				
To Whom Paid				
STAPLES				
Mailing Address 100 NOBLE BLVD				
City CARLISLE	State PA	Zip Code (Plus 4) 17013		
Description of Expenditure				
MAILING SUPPLIES				
To Whom Paid				
INFINITY PRINT				
Mailing Address 121 NORTH PITT STREET				
City CARLISLE	State PA	Zip Code (Plus 4) 17013		
Description of Expenditure				
CAMPAIGN MATERIALS				
To Whom Paid				
STAPLES				
Mailing Address 100 NOBLE BLVD				
City CARLISLE	State PA	Zip Code (Plus 4) 17013		
Description of Expenditure				
OFFICE SUPPLIES				
To Whom Paid				
INFINITY PRINT				
Mailing Address 121 NORTH PITT ST				
City CARLISLE	State PA	Zip Code (Plus 4) 17013		
Description of Expenditure				
CAMPAIGN MATERIALS				
To Whom Paid				
PARK HARRISBURG				
Mailing Address				
City HARRISBURG	State PA	Zip Code (Plus 4)		
Description of Expenditure				
ON STREET PARKING FOR MEETING				

To Whom Paid			MO	DAY	YEAR	\$	10.38
SOLLENBERGERS			2	10	2024		
Mailing Address 29 WEST MINISTER			2	10	2024		
City CARLISLE	State PA	Zip Code (Plus 4) 17013	Description of Expenditure NOTARY PUBLIC FEES				
To Whom Paid			MO	DAY	YEAR	\$	9.85
USPS			2	13	2024		
Mailing Address 66 WEST LOUTHER			2	13	2024		
City CARLISLE	State PA	Zip Code (Plus 4) 17013	Description of Expenditure MAILING				
To Whom Paid			MO	DAY	YEAR	\$	2.20
TRUIST BANK			2	21	2024		
Mailing Address 330 YORK ROAD			2	21	2024		
City CARLISLE	State PA	Zip Code (Plus 4) 17013	Description of Expenditure BANK SERVICE CHARGES				
To Whom Paid			MO	DAY	YEAR	\$	96.81
STAPLES			3	4	2024		
Mailing Address 100 NOBLE BLVD			3	4	2024		
City CARLISLE	State PA	Zip Code (Plus 4) 17013	Description of Expenditure OFFICE SUPPLIES				
To Whom Paid			MO	DAY	YEAR	\$	298.18
INFINITY PRINT			3	15	2024		
Mailing Address 121 NORTH PITT STREET			3	15	2024		
City CARLISLE	State PA	Zip Code (Plus 4) 17013	Description of Expenditure CAMPAIGN MATERIALS				
To Whom Paid			MO	DAY	YEAR	\$	37.17
GIANT FOOD STORE			2	29	2024		
Mailing Address 255 SOUTH SPRING GARDEN ST			2	29	2024		
City CARLISLE	State PA	Zip Code (Plus 4) 17013	Description of Expenditure MEETING REFRESHMENTS				
To Whom Paid			MO	DAY	YEAR	\$	21.18
GIANT FOOD STORE			3	25	2024		
Mailing Address 121 NORTH PITT ST			3	25	2024		
City CARLISLE	State PA	Zip Code (Plus 4) 17013	Description of Expenditure MEETING REFRESHMENTS				
To Whom Paid			MO	DAY	YEAR	\$	58.29
INSTANK INK			3	20	2024		
Mailing Address 1501 PAGE MILL ROAD			3	20	2024		
City PALO ALTO	State CA	Zip Code (Plus 4) 94304	Description of Expenditure PRINTER CARTRIDGES				

To Whom Paid FIVERR			MO	DAY	YEAR	\$ 369.25
Mailing Address PO BOX 50500			3	5	2024	
City LOUISVILLE	State KY	Zip Code (Plus 4)	Description of Expenditure CAMPAIGN TRAINING CLASS			

To Whom Paid USPS			MO	DAY	YEAR	\$ 27.20
Mailing Address 66 WEST LOUTHER			3	1	2024	
City CARLISLE	State PA	Zip Code (Plus 4) 17013	Description of Expenditure MAILING			

To Whom Paid PARK HARRISBURG			MO	DAY	YEAR	\$ 12.00
Mailing Address			4	8	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17013	Description of Expenditure PARKING			

To Whom Paid ACT BLUE			MO	DAY	YEAR	\$ 16.40
Mailing Address PO BOX 441146			4	1	2024	
City SOMERVILLE	State MA	Zip Code (Plus 4) 02144	Description of Expenditure SERVICE FEES			

To Whom Paid			MO	DAY	YEAR	\$ 493.66
Mailing Address 121 NORTH PITT STREET			4	1	2024	
City CARLISLE	State PA	Zip Code (Plus 4) 17013	Description of Expenditure DOOR HANGERS			

To Whom Paid GIANT FOOD STORE			MO	DAY	YEAR	\$ 41.95
Mailing Address 255 SOUTH SPRING GARDEN ST			2	29	2024	
City CARLISLE	State PA	Zip Code (Plus 4) 17013	Description of Expenditure GAS			

To Whom Paid USPS			MO	DAY	YEAR	\$ 40.80
Mailing Address 66 WEST LOUTHER			4	2	2024	
City CARLISLE	State PA	Zip Code (Plus 4) 17013	Description of Expenditure MAILING			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 2,074.40

