

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 :		20120363		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF CRIS DUSH												
Street Address:												
City: BROOKVILLE						State: PA		Zip Code: 15825				
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.X	30 DAY POST-ELECTION	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	REP			
						11	5	2024	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		9	17	2024		10	21	2024				
A. Amount Brought Forward From Last Report						\$ 8,231.77						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 26,925.00						
C. Total Funds Available (Sum Of Lines A and B)						\$ 35,156.77						
D. Total Expenditures (From Schedule III)						\$ 28,344.38						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 6,812.39						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 0.00						
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 CRIS DUSH	From: <u>9/17/2024</u> To: <u>10/21/2024</u>

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)	\$ 425.00
TOTAL for the Reporting Period (2)	\$ 425.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 12,500.00
All Other Contributions (Part D)	\$ 14,000.00
TOTAL for the Reporting Period (3)	\$ 26,500.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 26,925.00
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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	Reporting Period
FRIENDS OF CRIS DUSH	From: <u>9/17/2024</u> To: <u>10/21/2024</u>

				DATE		AMOUNT	
Full Name of Contributor MELODY & KURT SMITH				MO 9	DAY 7	YEAR 2024	\$ 150.00
Mailing Address							
City	LOCK HAVEN	State PA	Zip Code (Plus 4) 17745				
Full Name of Contributor ANGELA & DAVID SNYDER				MO 10	DAY 17	YEAR 2024	\$ 75.00
Mailing Address							
City	BROOKVILLE	State PA	Zip Code (Plus 4) 15825				
Full Name of Contributor LOUIS ANASTOS				MO 10	DAY 21	YEAR 2024	\$ 100.00
Mailing Address							
City	LOCK HAVEN	State PA	Zip Code (Plus 4) 17745				
Full Name of Contributor SHEILA & JAMES RUSSO				MO 10	DAY 21	YEAR 2024	\$ 100.00
Mailing Address							
City	MILL HALL	State PA	Zip Code (Plus 4) 17751				

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

PAGE TOTAL
\$ 425.00

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 FRIENDS OF CRIS DUSH	Reporting Period From: <u>9/17/2024</u> To: <u>10/21/2024</u>
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				DATE	AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR
PENN OSTEOPATHIC MED PAC						
Mailing Address						
City	HARRISBURG	State	PA	10	18	2024
	Zip Code (Plus 4)		17111			
						\$ 500.00
Full Name of Contributing Committee				MO	DAY	YEAR
PGCC PAC						
Mailing Address						
City	CLARENDON	State	PA	10	17	2024
	Zip Code (Plus 4)		16313			
						\$ 6,000.00
Full Name of Contributing Committee				MO	DAY	YEAR
CLINTON CO. REPUB. PARTY						
Mailing Address						
City	LOCK HAVEN	State	PA	9	20	2024
	Zip Code (Plus 4)		17745			
						\$ 1,000.00
Full Name of Contributing Committee				MO	DAY	YEAR
FRIENDS OF SCOTT MARTIN						
Mailing Address						
City	LANCASTER	State	PA	9	20	2024
	Zip Code (Plus 4)		17602			
						\$ 5,000.00

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

PAGE TOTAL
\$ 12,500.00

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 CRIS DUSH	Reporting Period From: <u>9/17/2024</u> To: <u>10/21/2024</u>
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				DATE	AMOUNT
Full Name of Contributor JENNIFER & JOHN WILLIAMS				MO	\$ 1,000.00
Mailing Address				DAY	
City BROOKVILLE	State PA	Zip Code (Plus 4) 15825	YEAR 2024		
Employer Name SELF EMPLOYED				Occupation SEPTIC SERVICE	
Employer Mailing Address/Principal Place of Business			City REYNOLDSVILLE	State PA	Zip Code (Plus 4) 15851
Full Name of Contributor JUDSON KROH				MO	\$ 1,000.00
Mailing Address				DAY	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15222	YEAR 2024		
Employer Name ROBINDALE				Occupation PRESIDENT	
Employer Mailing Address/Principal Place of Business			City LATROBE	State PA	Zip Code (Plus 4) 15650
Full Name of Contributor DANIEL HAW BAKER				MO	\$ 10,000.00
Mailing Address				DAY	
City PORT MATILDA	State PA	Zip Code (Plus 4) 16870	YEAR 2024		
Employer Name GLENN O. HAWBAKER, INC				Occupation PRESIDENT & CEO	
Employer Mailing Address/Principal Place of Business			City STATE COLLEGE	State PA	Zip Code (Plus 4) 16803
Full Name of Contributor DAVID HARGER				MO	\$ 500.00
Mailing Address				DAY	
City LOCK HAVEN	State PA	Zip Code (Plus 4) 17745	YEAR 2024		
Employer Name HARGAR UTILITIES CONTRACTOR				Occupation PRESIDENT	
Employer Mailing Address/Principal Place of Business			City LOCK HAVEN	State PA	Zip Code (Plus 4) 17745

Full Name of Contributor LORI & JOHN WAGNER			MO 6	DAY 21	YEAR 2024	\$ 1,000.00
Mailing Address						
City BROOKVILLE	State PA	Zip Code (Plus 4) 15825				
Employer Name SELF EMPLOYED			Occupation PODIATRIST			
Employer Mailing Address/Principal Place of Business		City BROOKVILLE	State PA		Zip Code (Plus 4) 15825	

Full Name of Contributor JON CASSEL			MO 9	DAY 7	YEAR 2024	\$ 500.00
Mailing Address						
City LOCK HAVEN	State PA	Zip Code (Plus 4) 17745				
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
\$ 14,000.00

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:
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			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 CRIS DUSH		From: <u>9/17/2024</u> To: <u>10/21/2024</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)	\$ 0.00
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.)			\$ 0.00

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

Name of Filing Committee or Candidate	Reporting Period From: To:
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			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.						PAGE TOTAL \$ 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

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF CRIS DUSH	From <u>9/17/2024</u> To: <u>10/21/2024</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
POTTER COUNTY FAIR				
Mailing Address	5	15	2024	\$ 200.00
City ULYSSES	State PA	Zip Code (Plus 4) 16948	Description of Expenditure DONATION	
To Whom Paid	MO	DAY	YEAR	
DIAKON COMMUNITY SERVICES				
Mailing Address	5	21	2024	\$ 200.00
City WILLIAMSPORT	State PA	Zip Code (Plus 4) 17701	Description of Expenditure DONATION	
To Whom Paid	MO	DAY	YEAR	
THE BROOKVILLE MINISTERIUM				
Mailing Address	5	23	2024	\$ 200.00
City BROOKVILLE	State PA	Zip Code (Plus 4) 15825	Description of Expenditure DONATION	
To Whom Paid	MO	DAY	YEAR	
COURIER EXPRESS				
Mailing Address	6	5	2024	\$ 139.00
City WEST FRANKFORT	State IL	Zip Code (Plus 4) 62896	Description of Expenditure ADVERTISING	
To Whom Paid	MO	DAY	YEAR	
BOYS & GIRLS CLUB OF ST. MARYS				
Mailing Address	6	18	2024	\$ 250.00
City ST. MARYS	State PA	Zip Code (Plus 4) 15857	Description of Expenditure DONATION	
To Whom Paid	MO	DAY	YEAR	
ELK CO. ASSN OF TWP OFFICIALS				
Mailing Address	6	20	2024	\$ 250.00
City WILCOX	State PA	Zip Code (Plus 4) 15870	Description of Expenditure ADVERTISING	

To Whom Paid BUCKTAIL MEDICAL CENTER			MO	DAY	YEAR	\$ 100.00
Mailing Address			6	23	2024	
City RENOVO	State PA	Zip Code (Plus 4) 17764	Description of Expenditure DONATION			
To Whom Paid USPS			MO	DAY	YEAR	\$ 8.73
Mailing Address			7	12	2024	
City BROOKVILLE	State PA	Zip Code (Plus 4) 15825	Description of Expenditure POSTAGE			
To Whom Paid CRIS DUSH			MO	DAY	YEAR	\$ 850.00
Mailing Address			7	14	2024	
City BROOKVILLE	State PA	Zip Code (Plus 4) 15825	Description of Expenditure REIMBURSE - TENT & LIGHTS			
To Whom Paid S & T BANK			MO	DAY	YEAR	\$ 36.00
Mailing Address			7	12	2024	
City BROOKVILLE	State PA	Zip Code (Plus 4) 15825	Description of Expenditure BANK FEE			
To Whom Paid CLINTON CO. ECONOMIC PARTNERSHIP			MO	DAY	YEAR	\$ 320.00
Mailing Address			7	15	2023	
City LOCK HAVEN	State PA	Zip Code (Plus 4) 17745	Description of Expenditure DONATION			
To Whom Paid JEFF. CO. TWP. OFFICERS ASSN.			MO	DAY	YEAR	\$ 125.00
Mailing Address			7	15	2023	
City BROOKVILLE	State PA	Zip Code (Plus 4) 15825	Description of Expenditure ADVERTISING			
To Whom Paid MCKEAN CO. ASSN. OF TWP. OFFICIALS			MO	DAY	YEAR	\$ 110.00
Mailing Address			7	15	2024	
City LEWIS RUN	State PA	Zip Code (Plus 4) 16738	Description of Expenditure ADVERTISING			
To Whom Paid EVERGREEN ELM			MO	DAY	YEAR	\$ 100.00
Mailing Address			7	15	2024	
City BRADFORD	State PA	Zip Code (Plus 4) 16701	Description of Expenditure DONATION			

To Whom Paid P&CE JEFFERSON COUNTY			MO	DAY	YEAR	\$ 1,000.00
Mailing Address			7	18	2024	
City BROOKVILLE	State PA	Zip Code (Plus 4) 15825	Description of Expenditure 4H AUCTION			
To Whom Paid CORSICA VOL. FIRE CO.			MO	DAY	YEAR	\$ 100.00
Mailing Address			7	23	2024	
City CORSICA	State PA	Zip Code (Plus 4) 15829	Description of Expenditure DONATION			
To Whom Paid COURIER EXPRESS			MO	DAY	YEAR	\$ 165.00
Mailing Address			8	4	2024	
City WEST FRANKFORT	State IL	Zip Code (Plus 4) 62896	Description of Expenditure ADVERTISING			
To Whom Paid REYNOLDSVILLE DAY GOLF COMMITTEE			MO	DAY	YEAR	\$ 100.00
Mailing Address			8	20	2024	
City REYNOLDSVILLE	State PA	Zip Code (Plus 4) 15851	Description of Expenditure DONATION			
To Whom Paid CRIS DUSH			MO	DAY	YEAR	\$ 1,045.91
Mailing Address			8	24	2024	
City BROOKVILLE	State PA	Zip Code (Plus 4) 15825	Description of Expenditure REIMBURSE FOR CENTRE CO. JR. LIVESTOCK 4H AUCTION			
To Whom Paid CENTRE CO. TWP. OFFICIALS			MO	DAY	YEAR	\$ 175.00
Mailing Address			9	7	2024	
City SPRING MILLS	State PA	Zip Code (Plus 4) 16875	Description of Expenditure ADVERTISINGS			
To Whom Paid DISTRICT 9 PIAA			MO	DAY	YEAR	\$ 500.00
Mailing Address			9	7	2024	
City BROOKVILLE	State PA	Zip Code (Plus 4) 15825	Description of Expenditure ADVERTISING			
To Whom Paid COMMUNITY ACTION, INC			MO	DAY	YEAR	\$ 250.00
Mailing Address			9	7	2024	
City CLARION	State PA	Zip Code (Plus 4) 16214	Description of Expenditure ADVERTISING			

To Whom Paid JEFF CO. REPUB. PARTY			MO	DAY	YEAR	\$ 300.00
Mailing Address			9	16	2024	
City CLARINGTON	State PA	Zip Code (Plus 4) 15828	Description of Expenditure ADVERTISING			

To Whom Paid CRIS DUSH			MO	DAY	YEAR	\$ 507.74
Mailing Address			9	16	2024	
City BROOKVILLE	State PA	Zip Code (Plus 4) 15825	Description of Expenditure REIMBURSE FOR SIGN WIRES			

To Whom Paid THE PIPER AVIATION MUSEUM			MO	DAY	YEAR	\$ 75.00
Mailing Address			9	24	2024	
City LOCK HAVEN	State PA	Zip Code (Plus 4) 17745	Description of Expenditure CAMPAIGN			

To Whom Paid COURIER EXPRESS			MO	DAY	YEAR	\$ 139.00
Mailing Address			10	10	2024	
City WEST FRANKFORT	State IL	Zip Code (Plus 4) 62896	Description of Expenditure ADVERTISING			

To Whom Paid USPS			MO	DAY	YEAR	\$ 73.00
Mailing Address			10	11	2024	
City BROOKVILLE	State PA	Zip Code (Plus 4) 15825	Description of Expenditure			

To Whom Paid POLITEIA GROUP LLC			MO	DAY	YEAR	\$ 21,000.00
Mailing Address			10	19	2024	
City SHERIDAN	State WY	Zip Code (Plus 4) 82801	Description of Expenditure INVESTIGATE VOTER LIST			

To Whom Paid S&T BANK			MO	DAY	YEAR	\$ 25.00
Mailing Address			10	21	2024	
City BROOKVILLE	State PA	Zip Code (Plus 4) 15815	Description of Expenditure BANK FEE			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 28,344.38

