

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 : 20230293		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF CHAD REICHARD											
Street Address: 305 ANTIETAM DRIVE											
City: WAYNESBORO					State: PA		Zip Code: 17268-1801				
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	<input checked="" type="checkbox"/> No		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6. X	TERMINATION REPORT?	Yes	<input type="checkbox"/> 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
REPRESENTATIVE IN THE GENERAL ASSEMBLY					MO	DAY	YEAR	90	STH	REP	28
					11	5	2024	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		10	22	2024		11	25	2024			
A. Amount Brought Forward From Last Report					\$		(1,959.16)				
B. Total Monetary Contributions And Receipts (From Schedule I)					\$		5,800.00				
C. Total Funds Available (Sum Of Lines A and B)					\$		3,840.84				
D. Total Expenditures (From Schedule III)					\$		0.00				
E. Ending Cash Balance (Subtract Line D From Line C)					\$		3,840.84				
F. Value Of In-Kind Contributions Received (From Schedule II)					\$		3,400.00				
G. Unpaid Debts And Obligations (From Schedule IV)					\$		14,196.26				

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 CHAD REICHARD	From: <u>10/22/2024</u> To: <u>11/25/2024</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)	\$ 250.00
All Other Contributions (Part B)	\$ 350.00
TOTAL for the Reporting Period (2)	\$ 600.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 1,500.00
All Other Contributions (Part D)	\$ 300.00
TOTAL for the Reporting Period (3)	\$ 1,800.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 3,400.00

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.)	\$ 5,800.00
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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 FRIENDS OF CHAD REICHARD	Reporting Period From: <u>10/22/2024</u> To: <u>11/25/2024</u>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;">DATE</td> <td style="width: 40%; border: none;">AMOUNT</td> </tr> </table>		DATE	AMOUNT
DATE	AMOUNT		

Full Name of Contributing Committee PA ASSN OF NURSE ANESTHETISTS PAC	MO	DAY	YEAR	\$ 250.00		
Mailing Address 400 W. WILSON BRIDGE ROAD SUITE 120	10	28	2024			
<table style="width: 100%; border: none;"> <tr> <td style="width: 30%;">City WORTHINGTON</td> <td style="width: 20%;">State OH</td> <td style="width: 50%;">Zip Code (Plus 4) 43085-2259</td> </tr> </table>	City WORTHINGTON	State OH	Zip Code (Plus 4) 43085-2259			
City WORTHINGTON	State OH	Zip Code (Plus 4) 43085-2259				

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

PAGE TOTAL
\$ 250.00

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	Reporting Period
FRIENDS OF CHAD REICHARD	From: <u>10/22/2024</u> To: <u>11/25/2024</u>

DATE	AMOUNT
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Full Name of Contributor				MO	DAY	YEAR	\$100.00
Teresa Papoutsis				10	30	2024	
Mailing Address							
9342 Meadowbrook Drive							
City	Waynesboro	State	Zip Code (Plus 4)				
		PA	17268				

Full Name of Contributor				MO	DAY	YEAR	\$ 250.00
Stephen Patterson				10	28	2024	
Mailing Address 15452 Norwood Avenue							
City	Blue Ridge Summit	State	Zip Code (Plus 4)				
		PA	17214				

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

PAGE TOTAL
\$ 350.00

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
FRIENDS OF CHAD REICHARD	From: <u>10/22/2024</u> To: <u>11/25/2024</u>

				DATE			AMOUNT		
Full Name of Contributing Committee					MO	DAY	YEAR	\$	1,500.00
ROWE, DAVID FRIENDS OF									
Mailing Address					11	10	2024		
270 HAWTHORNE DR									
City	LEWISBURG		State	PA		Zip Code (Plus 4)	17837		

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

PAGE TOTAL
\$ 1,500.00

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 CHAD REICHARD	Reporting Period From: <u>10/22/2024</u> To: <u>11/25/2024</u>
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			DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
Nancy Baer	10	28	2024	\$ 300.00
Mailing Address 10358 Foxleigh Circle City Waynesboro State PA Zip Code (Plus 4) 17268				
Employer Name none			Occupation Retired	
Employer Mailing Address/Principal Place of Business none	City None		State PA	Zip Code (Plus 4) 17268

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

PAGE TOTAL
\$ 300.00

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 FRIENDS OF CHAD REICHARD	Reporting Period From: <u>10/22/2024</u> To: <u>11/25/2024</u>
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				DATE		AMOUNT	
Full Name				MO	DAY	YEAR	\$ 3,400.00
Taxpayers for Torren Ecker				10	31	2024	
Mailing Address 80 Stonybrook Lane							
City	New Oxford	State	PA	Zip Code (Plus 4)	17350		
Receipt Description Mailer Expense							

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 3,400.00

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 CHAD REICHARD		From: <u>10/22/2024</u> To: <u>11/25/2024</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)	\$ 3,400.00
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.)			\$ 3,400.00

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 FRIENDS OF CHAD REICHARD	Reporting Period From: <u>10/22/2024</u> To: <u>11/25/2024</u>
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				DATE		AMOUNT	
Full Name of Contributor ECKER, TORREN TAXPAYERS FOR				MO	DAY	YEAR	\$ 3,400.00
Mailing Address 80 STONYBROOK LN				10	31	2024	
City NEW OXFORD	State PA	Zip Code(Plus 4) 17350					
Employer of Contributor House of Representatives				Occupation State Rep			
Employer Mailing Address/Principal Place of Business PA Capitol		City Harrisburg	State PA	Zip Code(Plus 4) 17120		Description of Contribution mail piece payment	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 3,400.00	

SCHEDULE III

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period From _____ To: _____
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				DATE	AMOUNT	
To Whom Paid			MO	DAY	YEAR	
Mailing Address						\$ 0.00
City	State	Zip Code (Plus 4)	Description of Expenditure			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 0.00

SCHEDULE IV
STATEMENT OF UNPAID DEBTS
 Use this Section to itemize all unpaid debts and obligations
 which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate FRIENDS OF CHAD REICHARD	Reporting Period From: <u>10/22/2024</u> To: <u>11/25/2024</u>
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				DATE		Outstanding Balance of Debt	
Name of Creditor Gerald J. Reichard				MO	DAY	YEAR	\$ 11,607.10
Mailing Address 12886 Spring Aire Circle				11	25	2024	
City Waynesboro	State PA	Zip Code (Plus 4) 17268		Description of Debt Previous			
Name of Creditor Caitlin Reichard				MO	DAY	YEAR	\$ 90.27
Mailing Address 10895 Mentzer Gap Road				11	25	2024	
City Waynesboro	State PA	Zip Code (Plus 4) 17268		Description of Debt Previous Cycle Loans Forward			
Name of Creditor Chad Reichard				MO	DAY	YEAR	\$ 2,498.89
Mailing Address 305 Antietam Drive				11	25	2024	
City Waynesboro	State PA	Zip Code (Plus 4) 17268		Description of Debt Previous Cycle Loans Forward			
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL \$ 14,196.26