

# Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

<b>Filer Identification Number :</b> 20230293		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>			
<b>Name of Filing Committee, Candidate or Lobbyist:</b> FRIENDS OF CHAD REICHARD											
<b>Street Address:</b>											
<b>City:</b> WAYNESBORO				<b>State:</b> PA		<b>Zip Code:</b> 17268-1801					
<b>TYPE OF REPORT</b>  (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	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>			
<b>Name of Office Sought by Candidate:</b>					<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
REPRESENTATIVE IN THE GENERAL ASSEMBLY					<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	90	STH	REP	28
					11	5	2024	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>		
		10	22	2024		11	25	2024			
<b>A. Amount Brought Forward From Last Report</b>					\$		(1,959.16)				
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>					\$		5,800.00				
<b>C. Total Funds Available (Sum Of Lines A and B)</b>					\$		3,840.84				
<b>D. Total Expenditures (From Schedule III)</b>					\$		0.00				
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>					\$		3,840.84				
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>					\$		3,400.00				
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>					\$		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**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF CHAD REICHARD	From: <u>10/22/2024</u> To: <u>11/25/2024</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 0.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 250.00
<b>All Other Contributions (Part B)</b>	\$ 350.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 600.00

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

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

<b>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.)</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.**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF CHAD REICHARD	<b>Reporting Period</b>  <b>From:</b> <u>10/22/2024</u> <b>To:</b> <u>11/25/2024</u>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%;"><b>DATE</b></td> <td style="width: 40%;"><b>AMOUNT</b></td> </tr> </table>		<b>DATE</b>	<b>AMOUNT</b>
<b>DATE</b>	<b>AMOUNT</b>		

<b>Full Name of Contributing Committee</b> PA ASSN OF NURSE ANESTHETISTS PAC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b>			10	28	2024	
<b>City</b> WORTHINGTON	<b>State</b> OH	<b>Zip Code (Plus 4)</b> 43085-2259				

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

<b>PAGE TOTAL</b>
\$ 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)**

<b>Name of Filing Committee or Candidate</b> FRIENDS OF CHAD REICHARD	<b>Reporting Period</b> 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	\$ 100.00
Teresa Papoutsis							
Mailing Address				10	30	2024	
City	Waynesboro	State	Zip Code (Plus 4)				
		PA	17268				
Full Name of Contributor				MO	DAY	YEAR	\$ 250.00
Stephen Patterson							
Mailing Address				10	28	2024	
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.**

<b>PAGE TOTAL</b>
\$ 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.

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF CHAD REICHARD	<b>From:</b> <u>10/22/2024</u> <b>To:</b> <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		
City	LEWISBURG		State	PA				Zip Code (Plus 4)	17837

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

<b>PAGE TOTAL</b>
\$ 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.)**

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

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

<b>PAGE TOTAL</b>
\$ 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.**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF CHAD REICHARD	<b>Reporting Period</b>  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									
Mailing Address									
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.

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
FRIENDS OF CHAD REICHARD		From: <u>10/22/2024</u> To: <u>11/25/2024</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period		(1)	\$ 0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period		(2)	\$ 0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
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: <span style="float: right;">To:</span>
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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.						<b>PAGE TOTAL</b>  \$ 0.00

**SCHEDULE II  
PART G  
IN-KIND CONTRIBUTIONS RECEIVED  
VALUE OVER \$250.00**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF CHAD REICHARD	<b>Reporting Period</b>  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	\$ 3,400.00
ECKER, TORREN TAXPAYERS FOR				10	31	2024	
Mailing Address							
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			City	State	Zip Code(Plus 4)	Description of Contribution	
			Harrisburg	PA	17120	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

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**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

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