

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.	30 DAY PRIMARY	POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-ELECTION	6. X	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			
		10	22	2024		11	25	2024				
A. Amount Brought Forward From Last Report						\$ 5,793.59						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 1,833.65						
C. Total Funds Available (Sum Of Lines A and B)						\$ 7,627.24						
D. Total Expenditures (From Schedule III)						\$ 7,298.45						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 328.79						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 7,956.24						
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>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)	\$ 233.65

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)	\$ 1,100.00
TOTAL for the Reporting Period (2)	\$ 1,100.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 1,833.65
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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 FRIENDS OF RICK CHRISTIE				Reporting Period From: <u>10/22/2024</u> To: <u>11/25/2024</u>			
				DATE		AMOUNT	

Full Name of Contributor JUDITH WHEATON				MO	DAY	YEAR	\$ 100.00
Mailing Address 272 S. WEST ST				10	30	2024	
City CARLISLE	State PA	Zip Code (Plus 4) 17013					

Full Name of Contributor ALEXANDRA SCHWARZKOPF				MO	DAY	YEAR	\$ 100.00
Mailing Address 1603 CHARLESTON DR				10	30	2024	
City BEAUFORT	State SC	Zip Code (Plus 4) 29906					

Full Name of Contributor MARGARET SHAWLEY				MO	DAY	YEAR	\$ 100.00
Mailing Address 375 WINDING RD				10	26	2024	
City KESWICK	State VA	Zip Code (Plus 4) 22947					

Full Name of Contributor NATHAN DAVIDSON				MO	DAY	YEAR	\$ 100.00
Mailing Address 2013 GREEN ST				10	24	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17102					

Full Name of Contributor DAVID MADSEN				MO	DAY	YEAR	\$ 100.00
Mailing Address 2304 CHESTNUT ST				10	24	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 17104					

Full Name of Contributor ANN ALLEN				MO	DAY	YEAR	\$ 100.00
Mailing Address 215 PINE CREEK DRIVE				10	24	2024	
City CARLISLE	State PA	Zip Code (Plus 4) 17013					

Full Name of Contributor MARJORIE RALEY			MO	DAY	YEAR	\$ 200.00
Mailing Address 7119 PLANTATION LANE			11	2	2024	
City ROCKVILLE	State MD	Zip Code (Plus 4) 20852				

Full Name of Contributor BRITTANY CRAMPSIE			MO	DAY	YEAR	\$ 200.00
Mailing Address 1115 STRATFORD DR			10	24	2024	
City CARLISLE	State PA	Zip Code (Plus 4) 17013				

Full Name of Contributor JEFFREY VANDERTTEIJDEN			MO	DAY	YEAR	\$ 100.00
Mailing Address 726 APPLACHIAN AVE			11	4	2024	
City CARLISLE	State PA	Zip Code (Plus 4) 17013				

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

PAGE TOTAL

\$ 1,100.00

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
FRIENDS OF RICK CHRISTIE	From: <u>10/22/2024</u> To: <u>11/25/2024</u>

			DATE			AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$500.00
PLUMBERS AND PIPEFITTER #520							
Mailing Address				10	24	2024	
7193 JONESTOWN ROAD							
City	HARRISBURG		State	Zip Code (Plus 4)			
			PA	17112			

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

PAGE TOTAL
\$ 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	Reporting Period
	From: To:

			DATE	AMOUNT
Full Name of Contributor			MO	DAY
Mailing Address			YEAR	\$ 0.00
City	State	Zip Code (Plus 4)		
Employer Name			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
\$ 0.00

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
	<div style="display: flex; justify-content: space-between;"> From: To: </div>

			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>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)	\$ 7,956.24
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.)			\$ 7,956.24

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 RICK CHRISTIE	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			
PA DEMOCRATIC PARTY				\$ 7,956.24		
Mailing Address 229 STATE STREET						
City HARRISBURG	State PA	Zip Code(Plus 4) 17101				
Employer of Contributor PA DEM PARTY			Occupation			
Employer Mailing Address/Principal Place of Business 229 STATE ST	City HARRISBURG	State PA	Zip Code(Plus 4)	Description of Contribution DESIGN / PRODUCTION		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.				PAGE TOTAL 7,956.24		

SCHEDULE III STATEMENT OF EXPENDITURES

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

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
INFINITY PRINT				
Mailing Address 121 N. PITT ST.	10	22	2024	\$ 159.00
City CARLISLE	State PA	Zip Code (Plus 4) 17013	Description of Expenditure DOOR HANGARS	
To Whom Paid	MO	DAY	YEAR	
SOLLENGBERGER'S				
Mailing Address 29 WESTMINSTE DR	10	25	2024	\$ 5.19
City CARLISLE	State PA	Zip Code (Plus 4) 17013	Description of Expenditure NOTARY FEES	
To Whom Paid	MO	DAY	YEAR	
PARK HARRISBURG				
Mailing Address 223 WALNUT ST. SUITE 1	10	28	2024	\$ 6.30
City HARRISBURG	State PA	Zip Code (Plus 4) 17101	Description of Expenditure PARKING FOR MEETING	
To Whom Paid	MO	DAY	YEAR	
INFINITY PRINT				
Mailing Address 121 N. PITT ST	10	29	2024	\$ 79.50
City CARLISLE	State PA	Zip Code (Plus 4) 17013	Description of Expenditure RACK CARDS	
To Whom Paid	MO	DAY	YEAR	
FACEBOOK - META HEADQUARTERS				
Mailing Address 1 HACKER WAY				\$ 1,861.00
City MENLO PARK	State CA	Zip Code (Plus 4) 94025	Description of Expenditure ADS	
To Whom Paid	MO	DAY	YEAR	
ACT BLUE				
Mailing Address 366 SUMMER STREET				\$ 27.04
City SOMERVILLE	State MA	Zip Code (Plus 4) 02144	Description of Expenditure ONLINE FEES	

To Whom Paid			MO	DAY	YEAR	\$ 17.47
STAPLES			11	4	2024	
Mailing Address 100 NOBLE BLVD			11	4	2024	
City CARLISLE	State PA	Zip Code (Plus 4) 17013	Description of Expenditure OFFICE SUPPLIES			

To Whom Paid			MO	DAY	YEAR	\$ 1,000.00
ANTONIO MEGNA			11	1	2024	
Mailing Address 29 EDGEWOOD DRIVE			11	1	2024	
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17055	Description of Expenditure CAMPAIGN MANAGER			

To Whom Paid			MO	DAY	YEAR	\$ 800.00
JENNIFER MCDUFFIE			11	4	2024	
Mailing Address 701 N. PITT STREET			11	4	2024	
City CARLISLE	State PA	Zip Code (Plus 4) 17013	Description of Expenditure CANVASSING			

To Whom Paid			MO	DAY	YEAR	\$ 1,309.38
BACK PORCH BREWING			11	7	2024	
Mailing Address 133 W. HANOVER			11	7	2024	
City CARLISLE	State PA	Zip Code (Plus 4) 17013	Description of Expenditure WATCH PARTY			

To Whom Paid			MO	DAY	YEAR	\$ 26.48
FACEBOOK			11	8	2024	
Mailing Address			11	8	2024	
City	State	Zip Code (Plus 4)	Description of Expenditure ADS			

To Whom Paid			MO	DAY	YEAR	\$ 26.53
APPALCHIAN BREWERY			11	8	2024	
Mailing Address 920 JIM THORPE BLVD			11	8	2024	
City CARLISLE	State PA	Zip Code (Plus 4) 17013	Description of Expenditure MEETING			

To Whom Paid			MO	DAY	YEAR	\$ 75.57
GIANT			11	13	2024	
Mailing Address 255 S. SPRING GARDEN			11	13	2024	
City CARLISLE	State PA	Zip Code (Plus 4) 17013	Description of Expenditure CARDS/STAMPS			

To Whom Paid			MO	DAY	YEAR	\$ 58.29
INSTA INK			11	20	2024	
Mailing Address 1501 PAGE MILL ROAD			11	20	2024	
City PALO ALTO	State CA	Zip Code (Plus 4) 94304	Description of Expenditure PRINTER SUPPLIES			

To Whom Paid MOLLY PITCHER			MO	DAY	YEAR	\$ 46.70
Mailing Address 139 WEST HIGH ST			11	21	2024	
City CARLISLE	State PA	Zip Code (Plus 4) 17013	Description of Expenditure MEETING			

To Whom Paid ANTONIO MEGNA			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 29 EDGEWOOD DRIVE			11	8	2024	
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17055	Description of Expenditure CAMPAIGN MANAGER			

To Whom Paid JENNIFER MCDUFFIE			MO	DAY	YEAR	\$ 800.00
Mailing Address 701 N. PITT ST			11	8	2024	
City CARLISLE	State PA	Zip Code (Plus 4) 17013	Description of Expenditure CANVASSING			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 7,298.45

