Campaign Finance Report

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

Filer Identificati Number :	on	20230	0293				Repo Filed			CAI	NDII	DIDATE			1ITTEE	✓	LOBI	BYIST		
Name of Filing C	ommittee,	Candida	ite or Lo	bbyis	st:	F	RIEN	DS C	OF (CHAD	RE:	ICHAR	D							
Street Address:																				
City:	WAYNE	SBORO								State	e: PA				Zip Code: 17268-1801					
TYPE OF REPORT	6TH TUESDA PRE-PRIMAR		1.	2ND F PRIMA	RIDAY ARY	PRE-	2.		DA IMA		Р	POST- 3.			AMENDMENT REPORT?		Yes	N	0	\
(place X to the right of	6TH TUESDA PRE-ELECTI							DA ECT	Y TON	POST- 6.			TERMINA REPORT?		Yes	N	0	\		
report type)	ANNUAL R	EPORT	7. X	Year	2024					IG ME					PAPER		\checkmark	DISK	ETTE	
Name of Office S	ought by C	andidat	e:	-						DAT	E O	F ELE	CTIC	ON	District Number	Office Code	Par	ty Cod	Code	
REPRESENTATI	VE IN THE	GENER	AI ASS	FMRI \	Y					МО		DAY	Y	EAR	90	STH	REP)	28	
KEI KESENTATI	VE 114 111E	GENTERO	, NE 7133		•						11		5	2024		(SEE INS	TRUCTI	ONS FOR	CODES	5)
Summary of Receipts and							DAY	Y	EAR	FO	R OFFIC	E USE	ONLY	,						
	irom:		1	1	26	20	24	то			12	;	31	2024						
A. Amount Bro	ught Forwa	rd From	Last R	eport					\$				3,	840.84						
B. Total Moneta	ary Contrib	utions A	nd Rec	eipts ((From	Sched	lule I))	\$					0.00						
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)						_	\$				3,8	340.84								
F. Value Of In-	Kind Contri	butions	Receive	ed (Fr	om Sc	hedule	e II)	_	\$	\$ 0.00										
G. Unpaid Debt	s And Oblig	gations ((From S	chedu	ule IV))			\$				14,	196.26						
						AFFI	DAV	IT S	SE	CTIC	NC									
PART I - If this is		-	-		_									_						
I swear (or affirm) correct and comple		ort, inclu	iding the	attach	ned sch	edules	filed o	n pap	er o	or by e	electr	onic m	ediun	ı, are to t	he best o	f my knov	/ledge	and be	lief , tr	ue
Sworn to and subs	cribed before day of	me this		20									:	Signature	of Perso	n Submitt	ing Rep	ort		_
		Signatur	e	-				_							Prin	ted Name				
My Commission Ex	pires							_			•				Emai	il				
	мс	0	DA	λY		YR						Arc	ea Co	de	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of	f a cand	idate's	autho	rized (Commi	ittee,	Cano	dida	ate sh	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende		best of m	y knowle	dge ar	nd belie	f this p	politica	al cor	mmi	ittee h	as no	ot viola	ted aı	ny provisi	ions of the	e act of Ju	ne 3,1	937 (P	L. 133	з,
Sworn to and subsc	ribed before day of	me this		20										Si	ignature o	of Candida	te			_
				20 -				_							Printe	d Name				-
	Sig	nature						_												_
My Commission Exp	ires														Emai	II .				
MO DAY YR												Area	Code		Da	aytime Te	lephor	ne Num	ber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF CHAD REICHARD	From:	11/26/202	<u>4</u> To:	12/31/2024
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)	\$	0.00		
TOTAL for the Reporting	\$	0.00		
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)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	0.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00

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						
		F	rom:		То	:			
		·		DATE			AMOUNT		
Full Name of Contributing Com	mittee		МО	DAY	YEAR				
Mailing Address						\$	0.00		
City	State	Zip Code (Plus 4)							

PAGE TOTAL
0.00

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

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.

(Exclud	le contributions fron	n political comm	itte	es rep	oorted	in Part	A)			
Name of Filing Committee or Candidate Reporting Period										
				From: To						
					DATE			AMOUNT		
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address							\$	0	.00	
City	State	Zip Code (Plus 4))							
								PAGE TOTAL	-	

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

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:			То:			
				DA	TE		A	MOUNT	
Full Name of Contributing Committee				МО	DAY	YEAR	\$	0.00	
Mailing Address							7 *	0.00	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on Scheo	nter Grand Total of Part C on Schedule I, Detailed Summary Page, Sec						\$	0.00	

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			Rep	Reporting Period					
			Fror	n:		To):		
				D	ATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR	\$	0.00	
Mailing Address							7		
City	State	Zip Code (Plu	s 4)						
Employer Name		•		Occupation					
Employer Mailing Address/Principal Pla	ce of Business	City		•	State		Zip Co	ode (Plus 4)	
Enter Grand Total of Part C on Scho	dule I, Detailed S	Summary Page,	, Sectio	on 3.		:	\$	PAGE TOTAL 0.00	

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 of	or Candidate		Report	ing Peri	od		
			From:			To:	
				D	ATE		AMOUNT
Full Name				мо	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
cincer Granu Total Of Part I	on Schedule 1, Detalled	Summary Page,	Section	4.			\$ 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 Peri	od							
FRIENDS OF CHAD REICHARD	From:	<u>11/26/2024</u> To:	<u>12/31/2024</u>						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	र							
TOTAL for the Reporting Pe	eriod (1)	\$	0.00						
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)									
TOTAL for the Reporting Pe	eriod (2)	\$	0.00						
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)									
TOTAL for the Reporting Pe	eriod (3)	\$	0.00						
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,	•	\$	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					
F						То:		
				DATE			AMOUNT	
Full Name of Contributor				DAY	YEAR			
Mailing Address						7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•	•	•	•		·		
					-			
Enter Grand Total of Part F or	n Schedule II, In-Ki	nd Contributions Detai	led Sun	ımary Pa	ge,		PAGE TOTAL	-
Section 2.						\$		0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate			Reporting Period							
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti				
			From			То:	
				DATE			AMOUNT
To Whom Paid				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							PAGE TOTAL
nter Grand Total of Expenditures on Page 1, Report Cover Page, Item D			, .			\$	0.00

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	ame of Filing Committee or Candidate			Reporti	Reporting Period					
FRIEN	IDS OF CHAD REICHARD			From:	<u>11</u>	./26/2024	То:	12/31/2024		
						DATE			Outstanding Balance of Debt	
Name	e of Creditor				мо	DAY	YEAR			
Geral	d J. Reichard				1-10					
Mailir	ng Address				1	31	2025	5] •	\$ 11,607.10	
City	Waynesboro	State	Zip Code (P	lus 4)	Descrip	tion of Deb	t			
PA 17268				Previous Cycle Loans Forward						
Name	e of Creditor				МО	DAY	YEAR			
Caitli	n Reichard									
Mailir	ng Address				1	31	2025	5] •	\$ 90.27	
City	Waynesboro	State	Zip Code (P	lus 4)	Descrip	tion of Deb	t			
		PA	17268		Previous Cycle Loans Forward					
	e of Creditor Reichard				МО	DAY	YEAR			
								Η.	± 2.409.90	
Mailir	ng Address				1	31	2025	·	\$ 2,498.89	
City	Waynesboro	State	Zip Code (P	lus 4)	Descrip	tion of Deb	t			
		PA	17268		Previou	s Cycle Lo	ans For	ward	1	
									PAGE TOTAL	
En	ter Grand Total of Unpaid Deb	ts on Page 1, Repo	ort Cover Pa	ge, Item	ı G.			\$	14,196.26	