



## SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 03/2016)

Write or Type Committee Name

**FRIENDS OF JON THORP**

Report Covering the Period: From: M M / D D / Y Y Y Y 12 / 23 / 2025 To: M M / D D / Y Y Y Y 12 / 31 / 2025

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)) ....	0.00	18099.22
(b) Total Contribution Refunds (from Line 20(d)) .....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) .....	0.00	18099.22
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	0.00	22532.01
(b) Total Offsets to Operating Expenditures (from Line 14) .....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) .....	0.00	22532.01
<b>8. Cash on Hand at Close of Reporting Period (from Line 27) .....</b>	- 2432.79	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>	62522.04	

**For further information, contact the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov).**

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

**FRIENDS OF JON THORP**

Report Covering the Period: From:  /  /  To:  /  /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	15499.50
(ii) Unitemized.....	0.00	1512.77
(iii) TOTAL of contributions from individuals ▶	0.00	17012.27
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	1086.95
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	0.00	18099.22
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	2000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	2000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.) .....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	0.00	20099.22

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 05/2016)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	0.00	22532.01
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS .....	0.00	0.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ►	0.00	22532.01

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	- 2432.79
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	0.00
25. SUBTOTAL (add Line 23 and Line 24).....	- 2432.79
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	0.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	- 2432.79

# SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4271**  
**FRIENDS OF JON THORP**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2025
THORP, JONATHAN, , ,		<input type="checkbox"/> Primary
Mailing Address 6364 HOPEWELL RD		<input type="checkbox"/> General
City SPRINGFIELD		<input checked="" type="checkbox"/> Other (specify) ▼ Special-General
State TN	ZIP Code 37172	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 1000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 1000.00
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<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	M M / D D / Y Y Y Y 10 / 08 / 2025	M M / D D / Y Y Y Y 10/8/2035	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: [ ]

<b>SUBTOTALS</b> This Period This Page (optional).....▶	[ ] 1000.00
<b>TOTALS</b> This Period (last page in this line only).....▶	[ ]

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

# SCHEDULE C (FEC Form 3) LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4307**  
**FRIENDS OF JON THORP**

<b>LOAN SOURCE</b> Full Name (Last, First, Middle Initial) <input type="checkbox"/> Memo Item		Election: 2025
THORP, JONATHAN, , ,		<input type="checkbox"/> Primary
Mailing Address 6364 HOPEWELL RD		<input type="checkbox"/> General
City SPRINGFIELD		<input checked="" type="checkbox"/> Other (specify) ▼ Special-General
State TN	ZIP Code 37172	<input checked="" type="checkbox"/> Personal Funds of the Candidate

Original Amount of Loan 1000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 1000.00
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<b>TERMS</b>	Date Incurred	Date Due	Interest Rate (If none, enter 0)	Secured:
	11 / 19 / 2025	11/19/2035	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

<b>SUBTOTALS</b> This Period This Page (optional).....▶	1000.00
<b>TOTALS</b> This Period (last page in this line only).....▶	2000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)  9  10

NAME OF COMMITTEE (In Full)

**FRIENDS OF JON THORP**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Campbell, Austen, , ,</b>			Nature of Debt (Purpose): Administrative Services and Wages
Mailing Address 3 Heritage Farm Rd			
City Havermill	State ME	Zip Code 01832	

Outstanding Balance Beginning This Period		<b>Transaction ID : SD10.4312</b>	
13838.71			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	13838.71	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Campbell, Austen, , ,</b>			Nature of Debt (Purpose): Administrative Services and Wages
Mailing Address 3 Heritage Farm Rd			
City Havermill	State ME	Zip Code 01832	

Outstanding Balance Beginning This Period		<b>Transaction ID : SD10.4317</b>	
10183.33			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	10183.33	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>CES Creative</b>			Nature of Debt (Purpose): Communication Support
Mailing Address 400 S 2nd St			
City Brooklyn	State NY	Zip Code 11232	

Outstanding Balance Beginning This Period		<b>Transaction ID : SD10.4269</b>	
1500.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	1500.00	

1) <b>SUBTOTALS</b> This Period This Page (optional) .....	25522.04
2) <b>TOTALS</b> This Period (last page this line number only) .....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) .....	
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) .....	

**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)  9  10

NAME OF COMMITTEE (In Full)

**FRIENDS OF JON THORP**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Kleier Brothers Creative**

Nature of Debt (Purpose):

Multimedia Services

Mailing Address 1100 5th Ave

City  
Los Angeles

State  
CA

Zip Code  
90019

Outstanding Balance Beginning This Period

15000.00

Transaction ID : SD10.4203

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Kleier Brothers Creative**

Nature of Debt (Purpose):

Ad Production Service

Mailing Address 1100 5th Ave

City  
Los Angeles

State  
CA

Zip Code  
90019

Outstanding Balance Beginning This Period

15000.00

Transaction ID : SD10.4264

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Maefly Strategies**

Nature of Debt (Purpose):

Fundraising Consulting

Mailing Address PO Box 439

City  
Harrisburg

State  
PA

Zip Code  
17108

Outstanding Balance Beginning This Period

5000.00

Transaction ID : SD10.4205

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

1) **SUBTOTALS** This Period This Page (optional) .....

35000.00

2) **TOTALS** This Period (last page this line number only) .....

60522.04

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) .....

2000.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) .....

62522.04