### **Campaign Finance Report**

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

							port ed B		CAND	IDATE	<b>✓</b>	cc	MMITTEE		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: KELLER, MARK H									KK								•	
Street Address:																		
City:				,					State:				Zip Code	: 170	040			
TYPE OF REPORT	6TH TUESDA PRE-PRIMAR		1.	2ND FRIDAY PRIMARY	/ PRE	-	2. <b>X</b>	30 DA PRIMA		POST-	3.		AMENDME REPORT?	NT	Yes	No		<b>/</b>
(place X to the right of	6TH TUESDA PRE-ELECTION		4.					30 DA ELECT		POST- 6.			TERMINAT REPORT?	ION	Yes	No		<b>/</b>
report type)	ANNUAL RE	EPORT	7.	<b>Year</b> 2012					IG METH CHECK C				PAPER		<b>√</b>	DISKE	TTE	
Name of Office S	ought by C	andidat	:e:						DATE (	OF ELE	CTION		District Number	Office Code	Par	ty Code	Coun	
				,					мо	DAY	YEAR	₹	86	STH	REP		50	
REPRESENTATI	VE IN THE	GENERA	AL ASS	EMBLY					11	L	6 2	012		(SEE INS	TRUCTI	ONS FOR (	CODES	)
Summary of Receipts and								МО	DAY	YEAI	₹	FOR	OFFIC	E USE	ONLY			
Expenditures	from:			1 1	20	012	<u> T</u>	0	4	1	9 2	012						
A. Amount Bro	ught Forwa	rd From	ı Last R	eport				\$			(	0.00						
B. Total Moneta	ary Contribu	utions A	ınd Rec	eipts (From	Sche	dule	e I)	\$			(	0.00						
C. Total Funds	Available (S	Sum Of	Lines A	and B)				\$			(	0.00						
D. Total Expend	litures (Fro	m Sche	dule II	(1)				\$			(	0.00						
E. Ending Cash	Balance (S	ubtract	Line D	From Line C	:)			\$			C	.00						
F. Value Of In-	Kind Contrib	butions	Receive	ed (From Sc	:hedu	le I	I)	\$			C	.00						
G. Unpaid Debt	s And Oblig	jations (	(From S	ichedule IV)	)			\$			C	0.00		1				
					AFF	·ID	AVI	T SE	CTION									
PART I - If this is		•	•	_								-						
I swear (or affirm) correct and comple		ort, inclu	ıding the	attached sch	edules	s file	ed on	paper o	or by elec	tronic m	edium, aı	e to t	he best of ı	my know	/ledge	and beli	ef , tr	ıe.
Sworn to and subs	cribed before day of	me this		20							Sigr	ature	e of Person	Submitti	ing Rep	ort		-
		Signatur				_		<u>-</u>					Printe	d Name				-
My Commission Ex		Signatur	-										Email					-
	мо	)	D#	AY	YR					Ar	ea Code		Daytime	Telepho	one Nu	mber		
Part II- If this is	a report of	f a cand	idate's	authorized	Comn	nitte	ee, C	andida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende		est of m	y knowle	dge and belie	af this	poli	itical	commi	ittee has	not viola	ted any p	rovis	ions of the	act of Ju	ne 3,1	937 (P.L	. 1333	3,
Sworn to and subsc		me this										s	ignature of	Candida	te			-
	day of ——							_					Printed	Name				-
	Sig	nature				—		-					Timeca	· · · · · · · · · · · · · · · · · · ·				_
My Commission Exp	_												Email					
		мо	Di	AY	YR	L		-		Area	Code		Day	time Te	lephon	e Numb	er	-

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

#### **Detailed Summary Page**

Name of Filing Committee or Candidate	Reporting	g Period		
KELLER, MARK K	From:	1/1/20	<u>12</u> To:	4/9/2012
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	Period	(2)	\$	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
			1	
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 Page 1			\$	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 Candidat	'	Reporting	Period				
		'	From:		То	:	
		·		DATE			AMOUNT
Full Name of Contributing Committee			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

### 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	Name of Filing Committee or Candidate							
			Fro	m:		To	):	
		•			DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						
			•					PAGE TOTAL

#### **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	me of Filing Committee or Candidate								
			From:			То:			
				DA	TE		A	MOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			0.00
Mailing Address							<b>-</b>   \$		0.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TOT	AL
Enter Grand Total of Part C on School	dule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	(	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	ame of Filing Committee or Candidate				Reporting Period				
	Fro	m:		To	То:				
				D	ATE		AI	MOUNT	
Full Name of Contributor				МО	DAY	YEAR	\$	0.00	
Mailing Address							7		
City	State	Zip Code (Pl	ıs 4)						
Employer Name		•		Occupa	tion				
Employer Mailing Address/Principal Pla	ice of Business	City		•	State		Zip Cod	le (Plus 4)	
Enter Grand Total of Part C on Sch	edule I, Detailed S	ummary Pag	e, Secti	on 3.			P.	O.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	or Candidate		Report	ing Peri	od			
			From:			To:		
		<b>'</b>			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	<b>'</b>						<u> </u>	
	- C		<b>.</b> .:	_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	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 Perio	od	
KELLER, MARK K	From:	<u>1/1/2012</u> <b>To:</b>	4/9/2012
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
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 Cand	lame of Filing Committee or Candidate					Reporting Period					
						То:					
				DATE			AMOUNT				
Full Name of Contributor				DAY	YEAR						
Mailing Address						<b>7</b> \$	0.00				
City	State	Zip Code (Plus 4)									
Description of Contribution:	•		•	•	•						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Deta			led Sum	mary Pag	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	me of Filing Committee or Candidate				porting	Period					
						From:			То:		
						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 <sub>l</sub>	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	ame of Filing Committee or Candidate				Reporting Period				
	From			То:					
				DATE			AMOU	NT	
To Whom Paid			мо	DAY	YEAR				
Mailing Address						\$		0.00	
City	State	Zip Code (Plus 4)	Descrip	otion of Exp	penditure				
Futor Count Tatal of French diturns	n Dana 1 Danast C	laway Dawa Itana F					PAGE TOTA	AL	
enter Grand Total of Expenditures o	nter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.					\$		0.00	