

# 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>		2010054		<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 MARCIA HAHN												
<b>Street Address:</b> 136 E. NORTHAMPTON STREET												
<b>City:</b> BATH						<b>State:</b> PA			<b>Zip Code:</b> 18014			
<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 PRIMARY	POST-	3. X	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2014	<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>	138	STH	REP	48
						11	4	2014	(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>			
		5	6	2014		6	9	2014				
<b>A. Amount Brought Forward From Last Report</b>						\$ 31,692.46						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 5,400.00						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 37,092.46						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 2,416.88						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 34,675.58						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$ 700.00						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$ 827.29						

## 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 MARCIA HAHN	From: <u>5/6/2014</u> To: <u>6/9/2014</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>	\$ 500.00
<b>All Other Contributions (Part B)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 500.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 4,600.00
<b>All Other Contributions (Part D)</b>	\$ 300.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 4,900.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<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>	\$ 5,400.00
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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>				<b>Reporting Period</b>			
FRIENDS OF MARCIA HAHN				From: <u>5/6/2014</u> To: <u>6/9/2014</u>			
				<b>DATE</b>		<b>AMOUNT</b>	

  

<b>Full Name of Contributing Committee</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
PA ASSN. OF DEER FARMERS PAC			6	8	2014	
<b>Mailing Address</b>	200 N. THIRD STREET STE. 1500					
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>				
HARRISBURG	PA	17101				

  

<b>Full Name of Contributing Committee</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
PA MEDICAL PAC (PAM PAC)			6	7	2014	
<b>Mailing Address</b>	P.O. BOX 8820					
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>				
HARRISBURG	PA	17105				

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

<b>PAGE TOTAL</b>
\$ 500.00



# 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>  FRIENDS OF MARCIA HAHN	<b>Reporting Period</b>  <b>From:</b> <u>5/6/2014</u> <b>To:</b> <u>6/9/2014</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee BIKEPAC				MO	DAY	YEAR	\$ 300.00
Mailing Address P.O. BOX 564				6	8	2014	
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17055					
Full Name of Contributing Committee BRAVO PAC				MO	DAY	YEAR	\$ 300.00
Mailing Address 20 N MARKET SQUARE SUITE 800				6	8	2014	
City HARRIBSURG	State PA	Zip Code (Plus 4) 17101					
Full Name of Contributing Committee CITIZENS FOR MACKENZIE				MO	DAY	YEAR	\$ 500.00
Mailing Address 3620 LINCOLN AVE.				6	8	2014	
City ALLENTOWN	State PA	Zip Code (Plus 4) 181035341					
Full Name of Contributing Committee COALITION FOR PENNSYLVANIA'S FUTURE				MO	DAY	YEAR	\$ 300.00
Mailing Address P.O. BOX 12090				6	8	2014	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108					
Full Name of Contributing Committee DISPAC				MO	DAY	YEAR	\$ 300.00
Mailing Address 230 SOUTH BROAD ST. SUITE 903				6	8	2014	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19102					

Full Name of Contributing Committee FRIENDS OF MARCY TOEPEL			MO	DAY	YEAR	\$ 500.00
Mailing Address 923 KULP ROAD			6	8	2014	
City PERKIOMENVILLE	State PA	Zip Code (Plus 4) 18074				
Full Name of Contributing Committee PA BANKERS PUBLIC AFFAIRS COMMITTEE			MO	DAY	YEAR	\$ 300.00
Mailing Address P.O. BOX 345			6	8	2014	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108				
Full Name of Contributing Committee PA FRATERNAL ORDER OF POLICE PAC			MO	DAY	YEAR	\$ 300.00
Mailing Address 2949 N. FRONT STREET			6	8	2014	
City HARRIBSURG	State PA	Zip Code (Plus 4) 171101250				
Full Name of Contributing Committee PHARMACY POLITICAL ACTION COMMITTEE			MO	DAY	YEAR	\$ 300.00
Mailing Address 508 N. THIRD STREET			6	9	2014	
City HARRIBSURG	State PA	Zip Code (Plus 4) 17101				
Full Name of Contributing Committee PPL PEOPLE FOR GOOD GOVERNMENT			MO	DAY	YEAR	\$ 300.00
Mailing Address 2 NORTH NINTH STREET			6	8	2014	
City ALLENTOWN	State PA	Zip Code (Plus 4) 181011179				
Full Name of Contributing Committee PSNA POLITICAL ACTION COMMITTEE			MO	DAY	YEAR	\$ 300.00
Mailing Address 2578 INTERSTATE DRIVE STE 101			6	9	2014	
City HARRIBSURG	State PA	Zip Code (Plus 4) 17110				

<b>Full Name of Contributing Committee</b> UGI STATE PAC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 300.00
<b>Mailing Address</b> 2525 N 11TH ST. P.O. BOX 12677			6	8	2014	
<b>City</b> READING	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 196122677				
<b>Full Name of Contributing Committee</b> VERIZON COMMUNICATIONS INC.			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 300.00
<b>Mailing Address</b> GOOD GOV'T CLUB-PA 303 WALNUT ST., 12TH FLOOR			6	8	2014	
<b>City</b> HARRIBSURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101				
<b>Full Name of Contributing Committee</b> WASTE MANAGEMENT PAC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 300.00
<b>Mailing Address</b> 701 PENNSYLVANIA AVENUE NW STE. 590			6	8	2014	
<b>City</b> WASHINGTON	<b>State</b> DC	<b>Zip Code (Plus 4)</b> 20004				

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

**PAGE TOTAL**

\$ 4,600.00

**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 MARCIA HAHN	<b>Reporting Period</b>  <b>From:</b> <u>5/6/2014</u> <b>To:</b> <u>6/9/2014</u>
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
JOHN MALADY							
<b>Mailing Address</b> 604 N. THIRD STREET				6	8	2014	\$      300.00
<b>City</b> HARRIBSURG	<b>State</b>  PA	<b>Zip Code (Plus 4)</b>  17101					
<b>Employer Name</b> MALADY & WOOTEN, LLP				<b>Occupation</b> LOBBYIST			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b>		<b>State</b>	<b>Zip Code (Plus 4)</b>	

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.**

Name of Filing Committee or Candidate	Reporting Period
	<div style="display: flex; justify-content: space-between;"> <span>From:</span> <span>To:</span> </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.

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

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
FRIENDS OF MARCIA HAHN		From: <u>5/6/2014</u> To: <u>6/9/2014</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)		\$	700.00
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.)		\$	700.00

**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 MARCIA HAHN				<b>Reporting Period</b>  From: <u>5/6/2014</u> To: <u>6/9/2014</u>			
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				DATE	AMOUNT		
<b>Full Name of Contributor</b> HOUSE REPUBLICAN CAMPAIGN COMMITTEE				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 700.00
<b>Mailing Address</b> P.O. BOX 11787				5	23	2014	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code(Plus 4)</b> 171081787					
<b>Employer of Contributor</b>				<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b>	<b>State</b>	<b>Zip Code(Plus 4)</b>	<b>Description of Contribution</b>  CAMPAIGN EXPENSES	
<b>Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.</b>						<b>PAGE TOTAL</b> 700.00	

# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF MARCIA HAHN	From <u>5/6/2014</u> To: <u>6/9/2014</u>

DATE				AMOUNT
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
HOUSE REPUBLICAN CAMPAIGN COMMITTEE				
<b>Mailing Address</b>				
P.O. BOX 11787	5	8	2014	\$ 700.00
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>	
HARRISBURG	PA	17108	MAILING	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
HOUSE REPUBLICAN CAMPAIGN COMMITTEE				
<b>Mailing Address</b>				
P.O. BOX 11787	5	8	2014	\$ 450.00
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>	
HARRISBURG	PA	17108	MAILING	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
DWK CONSULTING, INC.				
<b>Mailing Address</b>				
430 FRANKLIN CHURCH ROAD	6	8	2014	\$ 166.88
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>	
DILLSBURG	PA	17019	EXPENSES	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
DWK CONSULTING, INC.				
<b>Mailing Address</b>				
430 FRANKLIN CHURCH ROAD	6	8	2014	\$ 1,000.00
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>	
DILLSBURG	PA	17019	CONSULTING	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
NORTHAMPTON COUNTY REPUBLICAN COMMITTEE				
<b>Mailing Address</b>				
PO BOX 377	6	8	2014	\$ 100.00
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>	
NAZARETH	PA	18064	CONTRIBUTION	
<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>				<b>PAGE TOTAL</b>
				\$ 2,416.88

**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 MARCIA HAHN				<b>Reporting Period</b> From: <u>5/6/2014</u> To: <u>6/9/2014</u>			
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DATE				Outstanding Balance of Debt		
<b>Name of Creditor</b> MARCIA HAHN			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 242.40
<b>Mailing Address</b> 136 E. NORTHAMPTON ST.			5	10	2010	
<b>City</b> BATH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18014	<b>Description of Debt</b> REIMBURSEMENTS			
DATE				Outstanding Balance of Debt		
<b>Name of Creditor</b> MARCIA HAHN			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 135.39
<b>Mailing Address</b> 136 E. NORTHAMPTON ST.			3	5	2014	
<b>City</b> BATH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18014	<b>Description of Debt</b> REIMBURSEMENTS			
DATE				Outstanding Balance of Debt		
<b>Name of Creditor</b> MARCIA HAHN			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 449.50
<b>Mailing Address</b> 136 E. NORTHAMPTON ST.			6	8	2014	
<b>City</b> BATH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18014	<b>Description of Debt</b> REIMBURSEMENTS			
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.						<b>PAGE TOTAL</b> \$ 827.29