#### **Campaign Finance Report**

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

Filer Identification 2016C0490						Report Filed By :			CAND	CANDIDATE		CO	DMMITTEE		LOBBYIST			
Name of Filing C	Committe	e, Candida	ate or Lo	obbyist:					I VN WETZ	ZEL	<u> </u>							—
		·						,										
Street Address:													I		010			
City:	_								State:				Zip Code	e: 1/	019			
TYPE OF REPORT	6TH TUES	_	1.	2ND FRIDA PRIMARY	Y PRE	-	2. <b>X</b>	30 DA PRIMA		POST-	3.		AMENDME REPORT?	NT	Yes	No	•	
(place X to the right of	6TH TUES		4.	2ND FRIDATELECTION	Y PRE	≣-	5. 30 DAY POST- 6. ELECTION						TERMINAT REPORT?	TION	Yes	No	•	<b>/</b>
report type)	ANNUAL	. REPORT	7.	<b>Year</b> 2016				FILING METHOD ( ) CHECK ONE					PAPER		✓	DISKE	TTE	
Name of Office C	\					!		. ,	DATE (	OF ELE	СТІ	ON	District	Office	Par	ty Code		
Name of Office S	ougnt by	/ Candidat	te:						МО	DAY		YEAR	Number 92	Code STH	REP		Code 67	
REPRESENTATI	VE IN TH	HE GENER	AL ASS	EMBLY					11		8	2016		(SEE THE	TPUCTI	ONS FOR	CODES)	
Summary of Receipts and MO DAY YEAR MO DAY YEAR										OFFIC								
Expenditures				3 8	2	016	Т	0		1	11	2016						
A. Amount Bro	ught For	ward Fron	n Last R	eport				\$				0.00	1					
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 0.00																		
C. Total Funds	Available	e (Sum Of	Lines A	and B)				\$				0.00						
D. Total Expend	ditures (	From Sche	edule II	I)				\$				0.00						
E. Ending Cash	Balance	(Subtract	Line D	From Line (	C)			\$				0.00						
F. Value Of In-	Kind Con	tributions	Receiv	ed (From S	chedu	le I	I)	\$				0.00						
G. Unpaid Debt	ts And Ob	oligations	(From S	Schedule IV	)			\$			7	,500.00		,				
					AFF	ID	AVI	T SE	CTION									
PART I - If this is	s a Comn	nittee repo	ort, trea	surer sign	here.	If th	nis is	a Can	ndidate r	eport,	can	didate sig	ın here.					
I swear (or affirm) correct and comple		report, incl	uding the	attached scl	hedule	s file	d on	paper (	or by elec	tronic m	ediu	ım, are to t	he best of	my know	/ledge	and beli	ef , tru	ıe,
Sworn to and subs	cribed bef day of	ore me this		20								Signature	of Person	Submitt	ing Rep	ort		-
	<u>-</u>	Signatur	re					- -					Printe	d Name				-
My Commission Ex	cpires		_										Email					-
		мо	D	AY	YR			_		Ar	ea C	ode	Daytime	Telepho	one Nu	mber		
Part II- If this is	a report	of a cand	lidate's	authorized	Comn	nitte	ee, C	andida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende		ne best of m	ny knowle	edge and beli	ef this	poli	tical	commi	ittee has i	not viola	ited	any provis	ions of the	act of Ju	ine 3,1	937 (P.L	. 1333	3,
Sworn to and subsc	ribed befo	re me this										s	ignature of	Candida	te			-
	day of							_					<b>.</b>	N-				_
		Cianat						-					Printed	Name				
My Commission Exp		Signature											Email					-
	-	мо	D	AY	YR	l.		•		Area	Cod	e	Day	rtime Te	lephon	e Numb	er	·

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
KEEFER, DAWN WETZEL	From:	3/8/201	<u>б</u> То:	4/11/2016
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 ar 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						
		1	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 or Candidate			Rep					
			From: To			<b>)</b> :		
					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			Reporting Period					
			From:			То:		
				DA	TE		A	MOUNT
Full Name of Contributing Com	mittee			МО	DAY	YEAR		0.00
Mailing Address							<b>*</b>	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C	on Schedule I, Detaile	d Summary 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				Reporting Period						
Fro				Fror	From:			То:		
					D	ATE		AMOUNT		
Full Name of Contributor					МО	DAY	YEAR	\$	0.00	
Mailing Address								7		
City	State	Zi	ip Code (Plus	s 4)						
Employer Name					Occupation					
Employer Mailing Address/Principal F	lace of Business		City		•	State		Zip Cod	de (Plus 4)	
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 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 or Candidate			Report	ing Peri	od			
			From:			То:		
		•		D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	ıs 4)					
Receipt Description	<u>'</u>	<u>'</u>			•			
Futor Curred Total of Bout	For Cabadula I Batailad	I Comment Page Co		4				PAGE TOTAL
Enter Grand Total of Part	E on Schedule 1, Detailed	Summary Page, Se	ection	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 Period								
KEEFER, DAWN WETZEL	From:	3/8/2016 <b>To:</b>	<u>4/11/2016</u>						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS 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	T 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				
			From:			To:	
				DATE			AMOUNT
Full Name of Contributor			МО	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 Det				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	Name of Filing Committee or Candidate			Reporting Period						
				Fro	From:			То:		
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address									\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	ation				
Employer Mailing Address/Principal Place of Business City State Zip Code(P						Code(Plus 4)	Desci	ript	ion of Contribution	on
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	ontributions De	etaile	ed				PAGE TO	ΓAL
Summary Page, Section 3.					0.00					

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti						
				From			То:		
		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 D.							PAGE TOTAL		
nter Grand Total of Expenditures on Page 1, Report Cover Page, Item i			<b>,</b> .			\$	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 of Filing Committee or Candidate				Reporting Period						
KEEFER, DAWN WETZEL	KEEFER, DAWN WETZEL From:					<u>3/8/2016</u>	То:		<u>4/11/2016</u>	
						DATE			utstanding alance of Debt	
Name of Creditor					мо	DAY	YEAR			
Dawn Keefer										
Mailing Address					4	11	2016	5 <b>\$</b>	7,500.00	
City Dillsburg	State		Zip Code (P	lus 4)	Description of Debt					
	PA		17019		Loan Fri	iends of Ke	efer C	ommit	ttee	
									PAGE TOTAL	
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							\$	7,500.00		