

Campaign Finance Report

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

Filer Identification Number :		2010054		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF MARCIA HAHN												
Street Address: 136 E. NORTHAMPTON STREET												
City: BATH						State: PA			Zip Code: 18014			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY PRIMARY	POST-	3.	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 2016	FILING METHOD () CHECK ONE			PAPER <input checked="" type="checkbox"/>		DISKETTE			
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code
REPRESENTATIVE IN THE GENERAL ASSEMBLY						MO	DAY	YEAR	138	STH	REP	48
						11	8	2016	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO		MO	DAY	YEAR	FOR OFFICE USE ONLY		
		3	8	2016			4	11	2016			
A. Amount Brought Forward From Last Report						\$ 30,270.70						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 900.00						
C. Total Funds Available (Sum Of Lines A and B)						\$ 31,170.70						
D. Total Expenditures (From Schedule III)						\$ 2,768.76						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 28,401.94						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 0.00						

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

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF MARCIA HAHN	From: <u>3/8/2016</u> To: <u>4/11/2016</u>

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)	\$ 900.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 900.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 900.00
---	-----------

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

PAGE TOTAL	
\$	0.00

<div>PART B</div> <div>ALL OTHER CONTRIBUTIONS</div> <div>\$50.01 TO \$250.00</div> <div>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)</div>						
Name of Filing Committee or Candidate				Reporting Period		
				From:		To:
				DATE		AMOUNT
Full Name of Contributor				MO	DAY	YEAR
Mailing Address						
City	State	Zip Code (Plus 4)				
						\$ 0.00

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

PAGE TOTAL

\$ 0.00

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.

Name of Filing Committee or Candidate FRIENDS OF MARCIA HAHN	Reporting Period From: <u>3/8/2016</u> To: <u>4/11/2016</u>
--	---

				DATE	AMOUNT		
Full Name of Contributing Committee BIKEPAC				MO	DAY	YEAR	\$ 300.00
Mailing Address P.O. BOX 564				4	11	2016	
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17055					
Full Name of Contributing Committee BUCHANAN INGERSOLL & ROONEY				MO	DAY	YEAR	\$ 300.00
Mailing Address COMMITTEE FOR EFFECTIVE STATE GOVERNMENT 301 GRANT ST., 20TH FL				4	11	2016	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15219					
Full Name of Contributing Committee PPL PEOPLE FOR GOOD GOVERNMENT				MO	DAY	YEAR	\$ 300.00
Mailing Address 2 NORTH NINTH STREET				4	11	2016	
City ALLENTOWN	State PA	Zip Code (Plus 4) 181011179					

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

PAGE TOTAL
\$ 900.00

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.)

Name of Filing Committee or Candidate	Reporting Period	
	From:	To:

			DATE	AMOUNT		
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 0.00

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
	From: To:

			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.

PAGE TOTAL
\$ 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	
FRIENDS OF MARCIA HAHN		From: <u>3/8/2016</u> To: <u>4/11/2016</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period (1)		\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period (2)		\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period (3)		\$	0.00
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.)		\$	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			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.						PAGE TOTAL \$ 0.00

SCHEDULE II
PART G
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OVER \$250.00

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF MARCIA HAHN	From <u>3/8/2016</u> To: <u>4/11/2016</u>

DATE				AMOUNT
To Whom Paid NORTHAMPTON COUNTY REPUBLICAN WOMEN	MO	DAY	YEAR	
Mailing Address PO BOX 342	1	5	2016	\$ 30.00
City NAZARETH	State PA	Zip Code (Plus 4) 18064	Description of Expenditure CONTRIBUTIONS	
To Whom Paid COMMUNICATIONS CONCEPTS	MO	DAY	YEAR	
Mailing Address 2906 WILLIAM PENN HWY	1	11	2016	\$ 275.81
City EASTON	State PA	Zip Code (Plus 4) 18045	Description of Expenditure MAILINGS	
To Whom Paid NORTHAMPTON COUNTY REPUBLICAN COMMITTEE	MO	DAY	YEAR	
Mailing Address 601 STONES CROSSING	1	20	2016	\$ 300.00
City EASTON	State PA	Zip Code (Plus 4) 18045	Description of Expenditure CONTRIBUTION	
To Whom Paid TUSCANA PIZZA & PASTA	MO	DAY	YEAR	
Mailing Address 4062 EASTON NAZARETH HIGHWAY	2	11	2016	\$ 141.31
City NAZARETH	State PA	Zip Code (Plus 4) 18064	Description of Expenditure CAMPAIGN EXPENSE-PETITION EVENT	
To Whom Paid MARCIA HAHN	MO	DAY	YEAR	
Mailing Address 136 E. NORTHAMPTON STREET	2	13	2016	\$ 224.01
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure REIMBURSEMENT-CAMPAIGN	

To Whom Paid DOUGHBOYS RESTAURANT			MO	DAY	YEAR	\$ 197.63
Mailing Address 230 W MOORESTOWN ROAD			2	16	2016	
City WIND GAP	State PA	Zip Code (Plus 4) 18091	Description of Expenditure CAMPAIGN EXPENSE-PETITION EVENT			

To Whom Paid HANOVER ELEMENTARY SCHOOL			MO	DAY	YEAR	\$ 100.00
Mailing Address 3890 JACKSONVILLE ROAD			3	2	2016	
City BETHLEHEM	State PA	Zip Code (Plus 4) 18017	Description of Expenditure HANOVER ELEM. SCHOOL GOLF TOURNAMENT AND DINNER			

To Whom Paid MINSI TRAILS COUNCIL, BOY SCOUTS OF AMERICA			MO	DAY	YEAR	\$ 500.00
Mailing Address 991 POSTAL ROAD			3	2	2016	
City ALLENTOWN	State PA	Zip Code (Plus 4) 18109	Description of Expenditure CONTRIBUTIONS			

To Whom Paid FRIENDS OF MARK MUSTIO			MO	DAY	YEAR	\$ 1,000.00
Mailing Address P.O. BOX 1021			4	4	2016	
City MOON TOWNSHIP	State PA	Zip Code (Plus 4) 15108	Description of Expenditure CONTRIBUTIONS			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 2,768.76

