Campaign Finance Report

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

Filer Identificati Number :	on 2004	018			Repo Filed		CA	MDI	DATE		COM	AITTEE	 	LUB	51131	
Name of Filing C	ommittee, Candid	ate or L	obbyist:	,	KELLE	R, MA	RK FR	IENI	DS OF							
Street Address:																
City:	LANDISBURG						Stat	e:	PA			Zip Co	de: 17	7040-0	0000	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2.	30 D PRIM	AY 1ARY	F	POST-	3.		AMENDN REPORT		Yes	No	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	5.		AY CTION	F	POST-	6.		TERMIN. REPORT		Yes	No	√
report type)	ANNUAL REPORT	7. X	Year 2016				NG M					PAPER		/	DISKE	TTE
Name of Office S	ought by Candida	te:					DAT	ΓΕ Ο	F ELEC	стіо	N	District Number	Office Code	Pai	ty Code	County Code
REDRESENTATI	VE IN THE GENER	ρΔι Δςς	EMBLY				МО		DAY	YE	AR	86	STH	REF)	50
KEIKESENIAII	VE IIV THE GENE	VAL ASS	LINDLI					11		8	2016		(SEE IN	STRUCTI	ONS FOR O	CODES)
	Receipts and	МО	DAY	YEAR			МО		DAY	YE	AR	FC	OR OFFI	CE USE	ONLY	
Expenditures	from:		11 29	20	016	то		12	3	31	2016					
A. Amount Bro	ught Forward Froi	n Last R	eport			\$	5			56,5	540.84					
B. Total Monetary Contributions And Receipts (From Schedule I)											75.00					
C. Total Funds	Available (Sum O	f Lines A	and B)			9	\$			56,6	515.84					
D. Total Expenditures (From Schedule III)						9	\$			2,3	379.37					
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)			\$			54,2	36.47					
F. Value Of In-	Kind Contributions	s Receiv	ed (From S	chedu	le II)		\$				0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	/)		9	\$				0.00			'		
						/IT SI										
I swear (or affirm)	that this report, inc	-	_						-		_			wledge	and belie	ef , true
correct and comple	cribed before me this	s										of Davas	n Submit	tina Da		
-	day of		_ 20			_					ngnature	or Perso	iii Subiiiii	tilly Ke	Joit	
	Signatu	re										Prin	ited Name	В		
My Commission Ex	·											Ema	il			
	МО		AY	YR						a Cod	le	Daytin	ne Telepi	none Nu	mber	
	a report of a can								_						(5.	4000
No 320) as amende		ny knowi	eage and bei	ier tnis	politica	ai comr	nittee	nas n	ot violat	ea an	y provis	ions or th	e act or J	une 3,1	937 (P.L	. 1333,
Sworn to and subsc	ribed before me this day of		20								S	ignature	of Candid	ate		
												Printe	ed Name			
My Commission Exp	Signature ires					_						Ema	nil			
	мо	D	AY	YR		_			Area	Code		D	aytime T	elephor	ne Numb	 er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
KELLER, MARK FRIENDS OF	From:	11/29/201	<u>б</u> То:	12/31/2016
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	75.00
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
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 Pa			\$	75.00

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 Candida	Name of Filing Committee or Candidate				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.

PART B 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.

Name of Filing Commi	ttee or Candidate		Reporting Period					
			From: To:				:	
					DATE			AMOUNT
Full Name of Contributor	r			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))			İ		

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 Ca	ame of Filing Committee or Candidate		Reporting Period						
				DA	TE		A	MOUNT	
Full Name of Contributing Comn	nittee			мо	DAY	YEAR		0.00	
Mailing Address							*	0.00	
City	State	Zip Code	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C o	nter Grand Total of Part C on Schedule I, Detailed Summary Page, Se						\$	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				Rep	orting Pe	eriod				
				Fron	n:		Te	То:		
					D	ATE			AMOUNT	
Full Name of Contributor					МО	DAY	YEAR	\$	0.00	
Mailing Address										
City	State	Zip	Code (Plus	s 4)						
Employer Name					Occupation					
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip C	ode (Plus 4)	
Enter Grand Total of Part C on Schedule I, Detailed Summary Page,				Section	on 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 Per	iod							
KELLER, MARK FRIENDS OF	From:	<u>11/29/2016</u> To:	<u>12/31/2016</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:			То:		
				DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address		_				 		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:		•	•			•		
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Det Section 2.			iled Sum	mary Pag	je,		PAGE TOTAL	
						\$	(0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:	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 Plac	e of Business	City	′	Stat	e Zip	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 C	andidate		Reporti	ng Period				
KELLER, MARK FRIENDS OF			From	11/29	9/2016	То:	12/31/2016	
				DATE			AMOUNT	
To Whom Paid			мо	DAY	YEAR			
Sarah Keller			110					
Mailing Address			12	7	2016	\$	1,000.00	
City Elliottsburg	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	17024	Campa	ign work fo	r March f	fundraiser		
To Whom Paid			мо	DAY	YEAR			
Perdix Fire Company			140		ILAK			
Mailing Address			12	7	2016	\$	300.00	
City Duncannon	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•		
	PA	17020	Donation					

To Whom Paid			мо	DAY	YEAR				
Michele Parson			140		ILAK				
Mailing Address			12	16	2016	\$	1,000.00		
City Landisburg	State	Zip Code (Plus 4)	Description of Expenditure						
PA 17040				Campaign treasurer services					
To Whom Paid			мо	DAY	YEAR				
Perry Printing			1-10		ILAK				
Mailing Address			12	16	2016	\$	79.37		
City New Bloomfield State Zip Code (Plus 4)				tion of Exp	enditure				

Basket bingo tickets for Ickesburg Lions Club

	PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.	\$ 2,379.37

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