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	20040	18				Repo			CAI	NDII	DATE		COMN	1ITTEE	✓	LOBI	BYIST		
Name of Filing C	ommittee, Ca	andida	te or Lo	bbyis	st:	i	KELL	ER,	MAR	K FRI	END	S OF								
Street Address:	6441 WA	AGGON	IERS G	AP RE)															
City:	LANDISB	BURG								State	e:	PA			Zip Code: 17040-0000					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		1.	2ND I PRIM	RIDAY ARY	PRE-	2.		30 DA PRIMA		Р	POST- 3.			AMENDMENT REPORT?		Yes	√ N	0	
(place X to the right of	6TH TUESDAY PRE-ELECTION		1.	2ND I	FRIDAY TION	PRE	- 5.		30 DA ELECT		Р	OST- 6.		TERMINATION REPORT?		Yes	N	O	\	
report type)	ANNUAL REP	PORT	7. X	Year	2016			FILING METHOD () CHECK ONE					PAPER		\	DISK	ETTE			
Name of Office S	ought by Can	ndidate	e:				_			DAT	E O	F ELE	CTIC	ON	District Number	Office Code	Par	ty Code	Code	
REPRESENTATI	VE IN THE G	ENER/	AL ASSI	EMBL'	Y				МО			DAY	Y	EAR	86	STH	REP		50	
											11	.1 8 2016 (SEE INS				TRUCTI	ONS FOR	CODES)	
Summary of Expenditures		nd	МО	DA		YEAR		T	_	МО		DAY		EAR	FO	R OFFIC	E USE	ONLY		
-				.1	29	20	016		ı		12		31	2016						
A. Amount Bro				•	(From	Sched	dule 1	I)	\$ \$				56,	75.00						
C. Total Funds													56	615.84						
D. Total Expend									\$ \$					379.37						
E. Ending Cash Balance (Subtract Line D From Line C)								\$					236.47							
F. Value Of In-	Kind Contribu	utions	Receive	ed (Fr	om Sc	hedul	e II)		\$					0.00						
G. Unpaid Debt	s And Obliga	tions (From S	ched	ıle IV))			\$					0.00						
						AFF:	IDA'	VI	ΓSE	CTIC	N									
PART I - If this is	a Committee	e repo	rt, trea	surer	sign h	ere. I	f this	s is	a Car	ndidat	e re	port, c	andi	idate sig	ın here.					
I swear (or affirm) correct and comple		rt, inclu	ding the	attacl	ned sch	edules	filed	on į	oaper (or by e	lectr	onic m	ediun	n, are to t	he best o	f my know	/ledge	and bel	ief , tr	ue
Sworn to and subs	cribed before m	ne this		20										Signature	of Perso	n Submitt	ing Rep	ort		_
	Si	gnature	<u> </u>	_					<u>-</u>						Prin	ted Name				
My Commission Ex	pires	_									•				Emai	il				-
	мо		DA	lΥ		YR						Are	ea Co	de	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a	candi	date's a	autho	rized (Comm	ittee	, Ca	andid	ate sl	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende		st of my	/ knowle	dge ar	nd belie	f this	politio	cal	comm	ittee h	as no	ot viola	ted a	ny provisi	ions of the	e act of Ju	ne 3,1	937 (P.	L. 133	з,
Sworn to and subsc		e this		20										Si	ignature o	of Candida	te			-
	day of			20 -					•						Printe	d Name				-
My Commission F	Signa	ature							•						Ema	il				_
My Commission Exp															2					_
	M	0	DA	λY		YR						Area	Code		Da	aytime Te	lephon	e Num	ber	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period							
KELLER, MARK FRIENDS OF	From:	11/29/201	<u>6</u> To:	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

	his Part to itemize onl with an aggregate val	-			•			
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			From: To:				:	
		1			DATE			AMOUNT
Full Name of Contribution	ng Committee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	•	•			•	•		PAGE TOTAL

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 Filling Committee of Camulate				oorting P m:				
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					

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	me of Filing Committee or Candidate		Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule 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	ne of Filing Committee or Candidate			orting Pe	riod			
			Fror	m:		То	:	
				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	s 4)					
Employer Name		•		Occupat	tion		•	
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	e (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary Page,	Section	on 3.			PA	GE TOTAL
		, .5.,				4	•	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 Perio	od				
			From:			To:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	1		
Mailing Address							\$		0.00
City	State	Zip Code (Plus 4)						
Receipt Description	·	·		•			•		
Enter Grand Total of Part E	on Schedule I. Detailer	l Summary Page.	Section	4.				PAGE TO	ΓAL
- Communication of the Ex	Januara 1/ Betained	. Jaai y 1 ago,	Section	••			\$		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 Pe	riod	
KELLER, MARK FRIENDS OF	From:	11/29/2016 To :	<u>12/31/2016</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUT	OR	
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 Candidat	:e		Reporting	g 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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candida	me of Filing Committee or Candidate				Re	porting	Period					
					Fro	m:		То	:			
							DATE				AMOUNT	
Full Name of Contributor						мо	DAY	YEAR	1			
Mailing Address										\$		0.00
City	State		Zip Code(F	Plus 4)								
Employer of Contributor	•		•			Occupa	ation					
Employer Mailing Address/Principal P Business	lace of	City		State		Zip 4)	Code(Plus	Desc	cripti	ion of (Contributio	on
Enter Grand Total of Part G on S	chedule II, I	In-Kind	Contributi	ons De	taile	ed					PAGE TOT	ΓAL
Summary Page, Section 3.												0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	andidate		Reportir	ng Period			
KELLER, MARK FRIENDS OF			From	11/29	9/2016	То:	12/31/2016
				DATE			AMOUNT
To Whom Paid Sarah Keller			МО	DAY	YEAR		
Mailing Address 1912 Honey	ysuckle Hollow Road		12	7	2016	\$	1,000.00
City Elliottsburg	State PA	Zip Code (Plus 4) 17024		ption of Exp			-
To Whom Paid Perdix Fire Company				DAY	YEAR		
Mailing Address 2 Firehouse Road			12	7	2016	\$	300.00
City Duncannon	State PA	Zip Code (Plus 4) 17020	Description of Expenditure Donation				
To Whom Paid Michele Parson	·		мо	DAY	YEAR		
Mailing Address 345 Polecat	Road		12	16	2016	\$	1,000.00
City Landisburg	State PA	Zip Code (Plus 4) 17040		ption of Exp			
To Whom Paid Perry Printing			мо	DAY	YEAR		
Mailing Address P.O. Box 85		12	16	2016	\$	79.37	
City New Bloomfield	State PA	Zip Code (Plus 4) 17068		ption of Exp			ions Club
							PAGE TOTAL

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

2,379.37