#### **Campaign Finance Report**

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

Filer Identification	on	2016	C0490				port		CAND	NDIDATE COMMITTEE LOBBYIST								
Name of Filing C	ommittee	, Candida	ate or L	obbyist:		KEE	FER	, DAW	/N WETZ	ZEL .								
Street Address:																		
City:									State:				<b>Zip Code:</b> 17019					
TYPE OF REPORT	6TH TUES		1.	2ND FRIDAY PRIMARY	Y PRE	-	2.	30 DA PRIMA		POST- 3. <b>X</b>			AMENDME REPORT?	Yes	<b>√</b> No			
(place X to the right of	6TH TUES		4.	2ND FRIDAY ELECTION	Y PRE	≣-	5.	30 DA		POST-	6.	TERMINAT REPORT?	ION	Yes	No		<b>\</b>	
report type)	ANNUAL	REPORT	7.	<b>Year</b> 2016					IG METH			PAPER		<b>√</b>	DISKE	TTE		
Name of Office S	ought by	Candidat	:e:			-			DATE C	F ELE	CTION		District Number	Office Code	Par	ty Code	Coun	
									МО	DAY	YEAR	ł	92	STH	REP	,	67	
REPRESENTATI	VE IN THI	E GENER	AL ASS	EMBLY					11		8 2	016		(SEE INS	TRUCTI	ONS FOR	CODES	)
Summary of I		and	МО	DAY	YEAR	ł			МО	DAY	YEAR	ł	FOR	OFFIC	E USE	ONLY		
Expenditures	from:			4 12	2	016	<b>T</b>	0	5	5	16 2	016						
A. Amount Bro	ught Forw	ard Fron	ı Last R	eport				\$			(7,500.	00)						
B. Total Moneta	ary Contri	butions A	And Rec	eipts (From	Sche	dule	e I)	\$			0	0.00						
C. Total Funds Available (Sum Of Lines A and B)								(7,500.	00)									
D. Total Expenditures (From Schedule III)						\$			662	.83								
E. Ending Cash Balance (Subtract Line D From Line C)					\$			(8,162.	83)									
F. Value Of In-l	Kind Cont	ributions	Receiv	ed (From So	chedu	le I	I)	\$			0	.00						
G. Unpaid Debt	s And Obl	igations	(From S	Schedule IV	)			\$			8,162	.83		'				
					AFF	ID	AVI	T SE	CTION									
PART I - If this is	a Commi	ttee repo	ort, trea	surer sign l	nere.	If th	nis is	a Can	didate r	eport, o	candidat	e sig	ın here.					
I swear (or affirm) correct and comple		eport, incl	uding the	attached sch	nedule	s file	ed on	paper (	or by elect	tronic m	edium, ar	e to t	he best of r	ny know	/ledge	and beli	ef , tr	ue,
Sworn to and subs	cribed befo day of	re me this		20							Sign	ature	of Person	Submitt	ing Rep	oort		
		Signatur	·e					_					Printe	d Name				_
My Commission Ex	pires	<b>-</b>											Email					-
	<u> </u>	МО	D	AY	YR					Ar	ea Code		Daytime	Teleph	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		e best of m	y knowle	edge and belie	ef this	poli	itical	comm	ittee has r	not viola	ted any p	rovis	ions of the a	act of Ju	ne 3,1	937 (P.L	. 1333	3,
Sworn to and subsc		e me this										s	ignature of	Candida	te			-
	day of — -							_					Printed	Name				-
	s	ignature						-										_
My Commission Exp	ires												Email					
	_	мо	D	AY	YR	l		_		Area	Code		Day	time Te	lephor	e Numb	er	-

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

	_			
Name of Filing Committee or Candidate	Reporting	g Period		
KEEFER, DAWN WETZEL	From:	<u>4/12/201</u>	<u>6</u> То:	<u>5/16/2016</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	(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			\$	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 Ca	Name of Filing Committee or Candidate			Reporting Period						
		F	rom:		То	:				
		·		DATE			AMOUNT			
Full Name of Contributing Commi	ttee		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 Filling Committee	an Contidate	1	Ren	orting P	eriod			
Name of Fining Committee of Candidate			From: To:					
					DATE			AMOUNT
Full Name of Contributor				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.

9/14/2025 12:05:12 AM

#### **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	ame of Filing Committee or Candidate		Reporting Period					
			From:			То:		
				DA	TE		P	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.0
Mailing Address							<b>-</b>   \$	0.0
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule 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	ame of Filing Committee or Candidate		Reporting Period					
From				rom:				
				D	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac	e of Business	City		•	State		Zip	Code (Plus 4)
Enter Grand Total of Part C on Schee	dule I, Detailed Su	ımmary Page,	Section	on 3.			\$	PAGE TOTAL 0.00
							т	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				
			From:			То:		
		•		D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	ıs 4)					
Receipt Description	<b>'</b>	<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 Perio	d						
KEEFER, DAWN WETZEL	From:	4/12/2016 <b>To:</b>	<u>5/16/2016</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 Cand	nme of Filing Committee or Candidate		Reportin				
			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 Details 2			led Sum	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	ame of Filing Committee or Candidate			Reporting Period							
				Fro	From: T				То:		
						DATE			AMOUN	т	
Full Name of Contributor					мо	DAY	YEAR				
Mailing Address								1	\$	0.00	
City	State		Zip Code(Plus 4)								
Employer of Contributor					Occup	oation					
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion	
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL	
Summary Page, Section 3.										0.00	

662.83

### STATEMENT OF EXPENDITURES

Name of Filing Committee o	r Candidate		Reporti	ng Period			
KEEFER, DAWN WETZEL			From <u>4/12/2016</u> To:				5/16/2016
				AMOUNT			
To Whom Paid			МО	DAY	YEAR		
Friends of Keefer Committee							
Mailing Address			4	18	2016	\$	500.00
City Dillsburg State Zip Code (Plus 4)				tion of Exp	enditure		
	PA	17019	Loan				
To Whom Paid			мо	DAY	YEAR		
Friends of Keefer Committee	e		МО	DAT	ILAK		
Mailing Address			5	13	2016	\$	162.83
<b>City</b> Dillsburg	State Zip Code (Plus 4) Description of Expenditure				enditure		
PA 17019 Credit/Loan to Campaig				mpaign			
							PAGE TOTAL
Enter Grand Total of Expe	enditures on Page 1, Re	port Cover Page, Item D	).			١.	

## 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 Repo			Reporti					
KEEFER, DAWN WETZEL			From:	<u>4/12/2016</u> <b>To:</b>			<u>5/16/2016</u>	
					DATE			tstanding lance of Debt
Name of Creditor				мо	DAY	YEAR		
Dawn Keefer								
Mailing Address				5	16	2016	\$	8,162.83
City Dillsburg	State	Zip Code (I	Plus 4)	Descrip	tion of Deb	t		
	PA	17019		Loan fo	r signs &ar	mp; sup	plies	
								PAGE TOTAL
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item				ı G.			\$	8,162.83