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 20	10054				port ed B		CANDI	DATE		СОМ	4ITTEE	✓	LOBE	SYIST		
Name of Filing C	ommittee, Can	didate or L	obbyist:	•	HAH	IN, N	MARC:	IA FRIEN	DS OF								
Street Address:	136 E. NOI	RTHAMPTO	N STREET														
City:	BATH							State:	PA			Zip Cod	de: 18	014			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	- 2	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No	•	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- !	5.	30 DA ELECT		POST-	6.		TERMINA REPORT		Yes	No	`	
report type)	ANNUAL REPO	RT 7. X	Year 2016					IG METHO				PAPER		/	DISKE	ГТЕ	
Name of Office S	ought by Cand	date:			_			DATE 0	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Count Code	у
								МО	DAY	YE	AR	138	STH	REP		48	
REPRESENTATI	ve in the gen	IERAL ASS	SEMBLY					11		8	2016		(SEE IN	STRUCTIO	ONS FOR C	ODES)	
Summary of	•	МО	DAY	YEAR	ł		'	МО	DAY	YE	AR	FC	R OFFIC	E USE	ONLY		
Expenditures	from:		11 29	20	016	T	0	12		31	2016						
A. Amount Bro	ught Forward F	rom Last R	eport				\$	-		27,6	03.54						
B. Total Moneta	ary Contributio	ns And Rec	eipts (From	Sche	dule	eI)	\$			3	350.00						
C. Total Funds	Available (Sum	Of Lines A	and B)				\$			27,9	53.54						
D. Total Expend	ditures (From S	chedule II	I)				\$			4,0	92.00						
E. Ending Cash	Balance (Subt	act Line D	From Line C)			\$			23,8	61.54						
F. Value Of In-	Kind Contributi	ons Receiv	ed (From Sc	hedu	le II	[)	\$				0.00						
G. Unpaid Debt	s And Obligation	ns (From	Schedule IV))			\$				0.00			'			
				AFF	IDA	٩VI	T SE	CTION									
PART I - If this is	a Committee I	eport, trea	surer sign h	ere. 1	[f thi	is is	a Can	ididate re	eport, o	candi	date sig	ın here.					
I swear (or affirm) correct and comple		including th	e attached sch	edules	filed	d on	paper o	or by elect	ronic m	edium	, are to t	he best o	f my knov	wledge a	and belie	ef , true	e,
Sworn to and subs	cribed before me day of	this	20							S	ignature	of Perso	n Submitt	ing Rep	ort		
	Sign	ature					-					Prin	ted Name				-
My Commission Ex	rpires						_					Ema	il				-
	МО	D	AY	YR					Arc	ea Cod	e	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a c	andidate's	authorized (Comn	nitte	e, C	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende		of my knowl	edge and belie	f this	polit	tical	commi	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,19	937 (P.L.	1333,	.
Sworn to and subsc	ribed before me t day of	his	20								s	ignature o	of Candida	ate			-
							-					Printe	d Name				-
My Commission F	Signatu	re					-					Ema	il				-
My Commission Exp							_										
	МО	D	AY	YR					Area	Code		Da	aytime T	elephon	e Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
HAHN, MARCIA 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	g 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)			\$	350.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	g Period	(3)	\$	350.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g 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			\$	350.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Name of Filing Comm	nittee or Candidate		Reporti	ng Period			
			From:		То	:	
		I		DATE			AMOUNT
Full Name of Contribut	ing Committee		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

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 Candid	ate		Rep Fro	oorting P m:	eriod	To	o:	
					DATE		AN	4OUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$ \$	0.00
City	State	Zip Code (Plus 4)	1					

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	Reporting P	eriod		
HAHN, MARCIA FRIENDS OF	From:	11/29/2016	То:	<u>12/31/2016</u>

DATE AMOUNT

Full Name of Contributing Committee CHARLIE DENT FOR CONGRESS			МО	DAY	YEAR	
Mailing Address P.O. BOX 442						\$ 350.00
City ALLENTOWN	State PA	Zip Code (Plus 4) 18105	12	30	2016	

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

PAGE TOTAL \$ 350.00

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	riod			
			Fron	n:		To) :	
				D	ATE		ı	AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupa	tion			
Employer Mailing Address/Principal Pla Business	ce of	City			State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Scho	edule I, Detailed Su	ımmary 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		Repor	ting Perio	od			
			From:			To:		
			•	D	ATE		AI	MOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	•	•		•		•	•	
Enter Grand Total of Part E o	on Schedule I. Detailed	d Summary Page	Section	4			PA	GE TOTAL
- Inc. Statia Total of Fall E	Jonedane 1, Betanet	. Jammar y r uge,	500.011				\$	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	
HAHN, MARCIA 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 P	PER CONTRIBUTO	R	
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 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 Candidate				Re	eporting F	Period			
				Fr	om:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus 4)					
Employer of Contributor					Occupa	tion			
Employer Mailing Address/Principal Plac Business	ee of Ci	ity	State	•	Zip 4)	Code(Plus	Descri	ption o	of Contribution
Enter Grand Total of Part G on Scho Summary Page, Section 3.	edule II, In-l	Kind (Contributions [etail	led				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

No							
To Whom Paid MILFRED HOYLE	Name of Filing Committee or Candidate		Reporti	ng Period			
Mo	HAHN, MARCIA FRIENDS OF		From	11/29	9/2016	То:	12/31/2016
Mailing Address 107 N. GREEN ST. 12 6 2016 \$ 98.				DATE			AMOUNT
State PA 18064 PA PA 18064 PA PA PA PA PA PA PA P			МО	DAY	YEAR		
PA	Mailing Address 107 N. GREEN ST.		12	6	2016	\$	98.00
MILFRED HOYLE Mo DAY YEAR Mailing Address 107 N. GREEN ST. 12 6 2016 \$ 155. City NAZARETH State PA Zip Code (Plus 4) 18064 Description of Expenditure POSTAGE To Whom Paid MILFRED HOYLE MO DAY YEAR Mailing Address 107 N. GREEN ST. 12 6 2016 \$ 408. City NAZARETH State PA Zip Code (Plus 4) 18064 Description of Expenditure ACCOUNTING To Whom Paid Gamp; R CREATIONS MO DAY YEAR Mailing Address 376 BANGOR ROAD State PA Zip Code (Plus 4) 18064 Description of Expenditure CAMPAIGN EXPENSE-RALLY To Whom Paid MO DAY YEAR YEAR	City NAZARETH				enditure		
State			мо	DAY	YEAR		
PA	Mailing Address 107 N. GREEN ST.		12 6 2016 \$				155.98
MILFRED HOYLE MO DAY YEAR Mailing Address 107 N. GREEN ST. 12 6 2016 \$ 408. City NAZARETH State PA Zip Code (Plus 4) 18064 Description of Expenditure ACCOUNTING To Whom Paid GRamp; R CREATIONS MO DAY YEAR Mailing Address 376 BANGOR ROAD 12 6 2016 \$ 308. City NAZARETH State PA Zip Code (Plus 4) 18064 Description of Expenditure CAMPAIGN EXPENSE-RALLY To Whom Paid MO DAY YEAR	City NAZARETH				enditure		
City NAZARETH State PA 18064 To Whom Paid G& R CREATIONS Mo DAY YEAR City NAZARETH State PA 2ip Code (Plus 4) 18064 MO DAY YEAR City NAZARETH State PA 2ip Code (Plus 4) 12 6 2016 \$ 308. City NAZARETH State PA 18064 Description of Expenditure CAMPAIGN EXPENSE-RALLY To Whom Paid			мо	DAY	YEAR		
To Whom Paid G& R CREATIONS MO DAY YEAR Mo Day YEAR City NAZARETH State PA State PA 18064 Zip Code (Plus 4) 18064 Description of Expenditure CAMPAIGN EXPENSE-RALLY MO DAY YEAR To Whom Paid	Mailing Address 107 N. GREEN ST.		12	6	2016	\$	408.00
G&R CREATIONS Mo DAY YEAR Mailing Address 376 BANGOR ROAD 12 6 2016 \$ 308. City NAZARETH State PA 18064 To Whom Paid MO DAY YEAR MO DAY YEAR MO DAY YEAR	City NAZARETH				enditure		
City NAZARETH State PA 18064 To Whom Paid PA Description of Expenditure CAMPAIGN EXPENSE-RALLY MO DAY YEAR			МО	DAY	YEAR		
To Whom Paid PA 18064 CAMPAIGN EXPENSE-RALLY MO DAY YEAR	Mailing Address 376 BANGOR ROAD		12	6	2016	\$	308.00
MO DAY YEAR	City NAZARETH						
FOINT FILLERS HOTEL αdilip, RESTAURANT	To Whom Paid POINT PHILLIPS HOTEL & RESTAU		МО	DAY	YEAR		
Mailing Address 943 POINT PHILLIPS ROAD 12 6 2016 \$ 1,110.	Mailing Address 943 POINT PHILLIPS	S ROAD	12	6	2016	\$	1,110.46

Zip Code (Plus 4)

18014

Description of Expenditure

CAMPAIGN EXPENSE

State

PΑ

City

BATH

						PA	GE 12
To Whom Paid BLUE VALLEY TIMES			МО	DAY	YEAR		
Mailing Address 900 NORTH MAIN STREET			12	11	2016	\$ \$	150.00
City BANGOR	State PA	Zip Code (Plus 4) 18013	Description of Expenditure CAMPAIGN AD				
To Whom Paid THE KEY			МО	DAY	YEAR		
Mailing Address PO BOX 419			12	11	2016	\$	442.30
City NAZARETH	State PA	Zip Code (Plus 4) 18064	Description of Expenditure CAMPAIGN AD				
To Whom Paid MARCIA HAHN			мо	DAY	YEAR		
Mailing Address 136 E. NORTHAMPTON STREET			12	19	2016	\$	818.26
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure REIMBURSEMENT-PA SOCIETY EVEN-R&B				
To Whom Paid MARCIA HAHN			МО	DAY	YEAR		
Mailing Address 136 E. NORTHAMPTON STREET			12	19	2016	\$	371.00
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure REIMBURSEMENT-PA SOCIETY EVENT-TRAVEL				
To Whom Paid THE PRESS, INC.			мо	DAY	YEAR		
Mailing Address 1 BROADWAY			12	29	2016	\$ \$	230.00
City BANGOR	State PA	Zip Code (Plus 4) 18013	Description of Expenditure CAMPAIGN AD				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						F	PAGE TOTAL
Enter Grand Total of Expe	multures on Page 1, Rep	port Cover Page, Item D	•			\$	4,092.00