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	20100	04				Repo Filed		:	CAI	IIDI	DIDATE COMMITTEE LOBBYIST								
Name of Filing C	Committee, Ca	andida	te or Lo	bbyis	t:	F	RIEN	DS	OF I	MARC	Y TO	OEPEL								
Street Address:	923 KUL	P ROAI	D																	
City:	PERKIOM	1ENVIL	LE							State	:	PA			Zip Code: 18074					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		1.	2ND F PRIMA		/ PRE-	2.		0 DA RIMA		Р	OST-	3.		AMENDM REPORT?		Yes		No	\
(place X to the right of	6TH TUESDAY PRE-ELECTION		4.	2ND F		/ PRE-	- 5.		0 DA LECT		Р	OST-	6.		TERMINA REPORT?		Yes	֓֟֟֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֓֓֓֓֟֓֓֓֡	No	\
report type)	ANNUAL REF	PORT	7. X	Year	2017						METHOD I					PAPER		DIS	ETTE	
Name of Office S	ought by Car	ndidate	e:				•			DAT	E O	F ELE	CTIC	N	District Number	Office Code	Par	ty Co	le Cou	
										МО		DAY	ΥI	EAR	147	STH	REF)	46	
REPRESENTATI	VE IN THE G	ENERA	AL ASSI	EMBL'	Y						11		7	2017		(SEE IN:	STRUCTI	ONS FO	R CODES	5)
Summary of		nd	МО	DA	Υ	YEAR				МО		DAY	Y	EAR	FO	R OFFI	E USE	ONL	Y	
Expenditures	from:		1	11	28	20)17	то)		12		31	2017						
A. Amount Bro	ught Forward	l From	Last Re	eport					\$				65,8	328.38						
B. Total Moneta	ary Contribut	ions A	nd Rece	eipts (From	Sched	lule I)	\$				2,0	00.00						
C. Total Funds Available (Sum Of Lines A and B) \$ 67,828.00																				
D. Total Expenditures (From Schedule III) \$ 0.00																				
E. Ending Cash Balance (Subtract Line D From Line C)								\$				67,8	328.00							
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	chedu	ıle IV)			\$					0.00						
						AFF]	[DAV	ΊΤ	SE	CTIC	N									
PART I - If this is	s a Committee	e repoi	rt, trea	surer	sign h	nere. I	f this	is a	Can	didat	e re	port, o	andi	date sig	ın here.					
I swear (or affirm) correct and comple		rt, inclu	ding the	attach	ed sch	edules	filed o	n pa	per c	or by e	lectr	onic m	edium	, are to t	he best of	f my knov	wledge	and b	elief , t	rue
Sworn to and subs	cribed before n	ne this		20							•		S	Signature	of Persoi	n Submitt	ing Re	ort		
		ignature	•	-				_			•				Print	ted Name				_
My Commission Ex	cpires										-				Emai	i				_
	мо		DA	lΥ		YR						Are	ea Cod	de	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a	candi	date's a	autho	rized	Comm	ittee,	Can	ndida	ate sh	all s	sign he	ere.							
I swear (or affirm) No 320) as amende		st of my	/ knowle	dge an	d belie	ef this	politica	al co	ommi	ittee h	as no	ot viola	ted ar	ıy provisi	ions of the	e act of J	une 3,1	937 (F	.L. 133	з,
Sworn to and subsc		e this												Si	ignature o	f Candida	ate			-
	day of —— ——							_							Printe	d Name				-
	Signa	ature						_			_									_
My Commission Exp	ires														Emai	il				
	M	10	DA	ΑY		YR						Area	Code		Da	ytime T	elephor	ne Nun	ıber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	Period		
FRIENDS OF MARCY TOEPEL	From:	11/28/201	<u>.7</u> To:	12/31/2017
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)			\$	2,000.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	2,000.00
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			\$	2,000.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate valu	-			-			
Name of Filing Comm	nittee or Candidate		Re	porting				
			Fro	om:		То	:	
		L			DATE			AMOUNT
Full Name of Contribut	ing Committee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	•	•				-		DAGE 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 Fining Committee of Candidate			Reporting Period From: To:					
					DATE			AMOUNT
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	ame of Filing Committee or Candidate Re				ng Period					
FRIENDS OF MARCY TOEPEL			From:	11/2	8/2017	То:	12/31/2017			
				DA	TE		AMOUNT			
Full Name of Contributing Committee AETNA INC. PAC Mailing Address 205 CTREET N.W. CHITE 250					DAY	YEAR				
Mailing Address 20F STREET N.W. SUITE 350				10		2017	\$ 500.00			
City WASHINGTON	State DC	Zip Code 20001	e (Plus 4)	12	2	2017				
Full Name of Contributing Committee TROOPERS ASSOCIATION PAC (TAP)				МО	DAY	YEAR				
Mailing Address 3625 VARTAN WAY							\$ 1,500.00			
City HARRISBURG	State PA	Zip Code 17110	e (Plus 4)	12	21	2017				

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

PAGE TOTAL 2,000.00

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	me of Filing Committee or Candidate			orting Pe	riod			
			Fror	n:		To		
				D	ATE		А	MOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address State Zin Code (Plus 4)							\$	0.00
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupa	tion		•	
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Coo	de (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary 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	ting Perio	bd			
			From:			To:		
				D	ATE		AM	OUNT
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. Detaile	d Summary Page	Section	4			PAG	E TOTAL
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	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						
FRIENDS OF MARCY TOEPEL	From:	11/28/2017 To:	12/31/2017					
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 Candid	ate		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 S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	ле Г		PAGE TOTAL	
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	,		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:	То:		

				<u> </u>		DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus 4)		-				
Employer of Contributor					Occupa	<u>l</u> tion	<u> </u>	<u> </u>	
Employer Mailing Address/Pring Business	cipal Place of	City	State		Zip 4)	Code(Plus	Descri	ption of C	ontribution
Enter Grand Total of Part G Summary Page, Section 3.	on Schedule II	, In-Kind	Contributions De	etaile	ed				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	ame of Filing Committee or Candidate					Reporting Period					
			From			То:					
				DATE			AMOUNT				
To Whom Paid				DAY	YEAR						
Mailing Address						\$	0.00				
City	State	Zip Code (Plus 4)) Description of Expenditure								
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item							PAGE TOTAL				
Enter Grand Total of Expenditures (ni rage 1, Report C	over rage, Item D	'-			\$	0.00				