### **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 :	<b>on</b> 20	10054				Report CANDIDATE COMMITTEE  LOBBYIST  Filed By:							BYIST		
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF MARCIA HAHN															
Street Address: 136 E. NORTHAMPTON STREET															
City:	BATH						State:	PA			<b>Zip Code:</b> 18014				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE- PRIMARY 2.X 30 DAY PRIMARY					POST-				1ENT ?	Yes	No	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- 5.	30 D ELEC	AY TION	POST-	POST- 6.			ATION ?	Yes	No	<b>\</b>
report type)	ANNUAL REPO	<b>RT</b> 7.	<b>Year</b> 2018			FILING METHOD ( ) CHECK ONE					PAPER		<b>/</b>	DISKE	ГТЕ
Name of Office S	Sought by Candi	date:	•				DATE (	OF ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code
							МО	DAY	YE	AR	138	STH	REP		48
REPRESENTATI	VE IN THE GEN	ERAL ASS	EMBLY				1:	1	6	2018		(SEE IN	STRUCTIO	ONS FOR C	ODES)
Summary of Expenditures	Receipts and	МО	DAY Y	'EAR			МО	DAY	YI	AR	FC	R OFFI	CE USE	ONLY	
Expenditures			3 27	20	018	ТО	,	4	30	2018					
A. Amount Bro	ught Forward F	om Last R	eport			\$	;		35,1	132.62					
B. Total Moneta	ary Contribution	s And Rec	eipts (From S	Sche	dule I)	4	5		9,8	300.00					
C. Total Funds	Available (Sum	Of Lines A	and B)			4	5		44,9	32.62					
D. Total Expend	ditures (From S	chedule II	I)			4	5		8,5	12.81					
E. Ending Cash	Balance (Subtr	act Line D	From Line C)			9	5		36,4	19.81	]				
F. Value Of In-	Kind Contribution	ns Receiv	ed (From Sch	edul	e II)	4	5			0.00					
G. Unpaid Debt	s And Obligatio	ns (From S	Schedule IV)			4	5			0.00					
			ŀ	4FF	IDAV	IT SE	CTION								
PART I - If this is	s a Committee r	eport, trea	surer sign he	ere. I	f this	is a Ca	ndidate ı	report,	candi	date sig	jn here.				
I swear (or affirm) correct and comple		ncluding the	e attached sche	dules	filed o	n paper	or by elec	tronic m	edium	, are to t	the best o	f my kno	wledge a	and belie	f , true
Sworn to and subs	cribed before me	his	20						S	ignature	of Perso	n Submit	ting Rep	ort	
	Signa	iture				_					Prin	ted Name	e		
My Commission Ex	cpires										Ema	il			
	мо	D	AY	YR				Ar	ea Cod	le	Daytin	e Teleph	one Nu	mber	
Part II- If this is	a report of a ca	ındidate's	authorized Co	omm	ittee,	Candio	date shal	l sign h	ere.						
I swear (or affirm) No 320) as amende		f my knowl	edge and belief	this	politica	l comn	nittee has	not viola	ted an	y provis	ions of th	e act of J	une 3,19	937 (P.L.	1333,
Sworn to and subsc		nis								s	ignature o	of Candid	ate		
-	day of					_					Drints	ed Name			
	Signatu	re .				_					FIIICE	u Haille			
My Commission Exp	_	~									Ema	il			
	МО	D	AY	YR				Area	Code		D	aytime T	elephon	e Numbe	er

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF MARCIA HAHN	<u>3/27/201</u>	<u>8</u> To:	4/30/2018	
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)	\$	300.00		
TOTAL for the Reporting	\$	300.00		
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	2,500.00
All Other Contributions (Part D)			\$	7,000.00
TOTAL for the Reporting	g Period	(3)	\$	9,500.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	0.00
			1	
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	9,800.00

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate valu	-			-			
Name of Filing Committee or Candidate				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 Filing Committee or Candidate				eporting Period						
FRIENDS OF MARCIA HAHN From				m:	3/27/2	9: <u>4/30/2018</u>				
					DATE		AMOUNT			
Full Name of Contributor MARGE DALLY				МО	DAY	YEAR				
Mailing Address 21 S. SCHANCK AVENUE				,		2010	\$ 100.00			
City PEN ARGYL	State	Zip Code (Plus 4)		3	22	2018				
	PA	18072								
Full Name of Contributor CYNTHIA A. LAMBERT				мо	DAY	YEAR				
Mailing Address 2653 TERRWOOD DRIVE							\$ 200.00			
City MACUNGIE	State	Zip Code (Plus 4)		4	19	2018				
	PA	18062								

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

**PAGE TOTAL**\$ 300.00

#### **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	j Period					
FRIENDS OF MARCIA HAHN			From:	3/2	7/2018	То:	4	4/30/2018	
				DA	TE		Α	MOUNT	
Full Name of Contributing Committee CHARLIE DENT FOR CONGRESS				мо	DAY	YEAR			
Mailing Address P.O. BOX 442				_		201	<b>\$</b>	500.00	
<b>City</b> ALLENTOWN	<b>State</b> PA	<b>Zip Code</b> 18105	e (Plus 4)	4	19	2018	3		
Full Name of Contributing Committee  COMM ELECT MARIO SCAVELLO				МО	DAY	YEAR			
Mailing Address PO BOX 550							\$	1,000.00	
City TANNERSVILLE	State PA	<b>Zip Code</b> 18372	e (Plus 4)	4	24	2018	3		
Full Name of Contributing Committee COMMITTEE TO ELECT JULIE HARHART	-			МО	DAY	YEAR			
Mailing Address 640 WILLOW DRIVE							\$	1,000.00	
City CATASAUQUA	State PA	<b>Zip Code</b> 18032	e (Plus 4)	4	19	2018	3		
				-	-		-	PAGE TOTAL	
Enter Grand Total of Part C on Schee	dule I, Detailed Sum	nmary Pa	ige, Sectio	n 3.			\$	2,500.00	

## 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				
FRIENDS OF MARCIA HAHN				Fron	n:	<u>3/27/2</u>	<u>018</u> To	<b>o</b> :	4/30/2018	
					DA	ATE		AM	AMOUNT	
Full Name of Contributor JEFFREY A. BASKIN					мо	DAY	YEAR			
Mailing 3375 GLOUCESTER D	R.							\$	1,000.00	
City BETHLEHEM	State	tate Zip Code (Plus 4)			4	19	2018	3		
	PA	PA 18020								
Employer Name WIND GAP CHEVROLET BUICK					Occupat	tion (	SENERA	L MANAG	ER/OWNER	
Employer Mailing Address/Principal Place of City Business						State		Zip Code	e (Plus 4)	
1043 S BROADWAY WINDGAP						PA		18091		
Full Name of Contributor BRYAN M. GAULT						DAY	YEAR			
Mailing 1422 PRINCETON CO	JRT							\$	1,000.00	
City ALLENTOWN	State	Zip	Code (Plus	4)	4	19	2018	3		
	PA	18	104							
Employer Name BROWN DAUB BUICK	CHEVROLET WIND (	GAP			Occupation AUTO DEALER					
Employer Mailing Address/Principal Plac Business	e of		City			State		Zip Code	e (Plus 4)	
1043 S BROADWAY			WINDGA	Р		PA		18091		
Full Name of Contributor						DAY	VEAD			
JANE M GEORGE					МО	DAY	YEAR			
Mailing 2772 SUNCREST DR								\$	500.00	
City ALLENTOWN	State	Zip	Code (Plus	4)	4	19	2018	3		
	PA	18	104							
Employer Name ARTSQUEST FOUNDATION				Occupation EXECUTIVE DIRECTOR				CTOR		
Employer Mailing Address/Principal Plac Business	e of		City		•	State		Zip Code	e (Plus 4)	
25 WEST THIRD STREETSUITE 300			BETHLEH	EM	PA 18015			18015		

Full Name of Con	tributor				мо	DAY	YEAR			
Mailing Address	325 PAXINOSA RD. W	,						 	500.00	
		I Charles	7:	- Codo (Blue 4)	4	24	2018	•	300.00	
City EASTON		State PA		Code (Plus 4)						
		ra	16	3040						
Employer Name	FORKS CHESTNUT HI	LL CO.			Occupation PRESIDENT					
Employer Mailing Business	Address/Principal Place	e of		City		State		Zip Code (Plu	s 4)	
WILLIAM PENN H	HWY.			EASTON	PA 18040					
Full Name of Con					мо	DAY	YEAR			
Mailing	2299 YOST ROAD							4.		
Address		<b>,</b>			4	19	2018	<b>\$</b>	1,000.00	
City BATH		State	Zi <sub>l</sub>	Code (Plus 4)	4	19	2016			
		PA	18	8014						
Employer Name GROSS MCGINLEY LLP					Occupation PARTNER					
Employer Mailing Business	Address/Principal Plac	e of		City		State		Zip Code (Plu	s 4)	
33 S 7TH ST				ALLENTOWN		PA		18105		
Full Name of Con	tributor				МО	DAY	YEAR			
JOHN P. MOREY					МО	DAT	TEAR			
Mailing Address	3846 CHIPMAN ROAD						2018	\$	1,000.00	
City EASTON		State	Zij	Code (Plus 4)	4	19				
		PA	18	3045						
Employer Name	MOREY, NEE, BUCK &	amp; OSWALD, LLC			Occupat	ion A	CCOUN	TANT		
Employer Mailing Business	Address/Principal Plac	e of		City		State		Zip Code (Plu	s 4)	
	CIRCLESUITE B20			BETHLEHEM		PA		18020		
Full Name of Con	tributor				мо	DAY	YEAR			
Mailing	3051 GREEN POND RO	DAD.						4.		
Address	3331 SKELIVI OND K				4	19	2018	\$	1,000.00	
City EASTON		<b>State</b> PA		Code (Plus 4)	4	19	2018			
		I A	16	3045						
Employer Name NORTHAMPTON MEMORIAL SHRINE			Occupat	i <b>on</b> E	XECUTI	VE				
Employer Mailing Business	Address/Principal Plac	e of		City		State		Zip Code (Plu	s 4)	
3051 GREEN POI	ND RD			EASTON		PA		18045		
				•			<u>'</u>			

Full Name of Contributor GUY SAXTON	мо	DAY	YEAR				
Mailing Address 3051 GREEN POND ROAD						<b>\$</b> 1,000.00	
City EASTON	<b>State</b> PA	Zip Code (Plus 4) 18045	4	24	2018		
Employer Name NORTHAMPTON MEMO	DRIAL SHRINE		Occupation EXECUTIVE				
Employer Mailing Address/Principal Plac Business	City	State			Zip Code (Plus 4)		
3051 GREEN POND RD		EASTON	PA 18			18045	

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

PAGE TOTAL
\$ 7,000.00

## 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							<b>\$</b>	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	. Jammary rage,	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 Perio	d						
FRIENDS OF MARCIA HAHN	From:	3/27/2018 <b>To</b> :	<u>4/30/2018</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						<b>\$</b>	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 Sun	nmary Pag	je,		PAGE TOTAL	
Section 2.						\$	0.00	

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate			Reporting Period						
				Fro	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	ce of Cit	ty	State		Zip 4)	Code(Plus	Descri	ption o	f Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-K	Cind C	Contributions De	etaile	ed				PAGE TOTAL 0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting P			
FRIENDS OF MARCIA HAHN	From	3/27/2018	То:	4/30/2018

	•							
o Whom Paid						AMOUNT		
1ITTEE		мо	DAY	YEAR				
Mailing Address P.O. BOX 11787					\$	780.00		
ity HARRISBURG  State  PA  2ip Code (Plus 4)  17108				Description of Expenditure CONTRIBUTION				
		МО	DAY	YEAR				
Mailing Address 136 E. NORTHAMPTON STREET				2018	\$	50.00		
<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18014	Description of Expenditure REIMBURSEMENT-STAMPS						
		МО	DAY	YEAR				
TON STREET		2	5	2018	\$	230.02		
State         Zip Code (Plus 4)           PA         18014			Description of Expenditure REIMBURSEMENT-SUPPLIES					
		мо	DAY	YEAR				
TON STREET		2	5	2018	\$	155.32		
<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18014	1	-					
COMMITTEE		МО	DAY	YEAR				
SING		2	5	2018	\$	300.00		
<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18045	Description of Expenditure CONTRIBUTION						
	TON STREET  State PA  TON STREET  State PA  TON STREET  State PA  COMMITTEE  SSING  State	State	State	State   Zip Code (Plus 4)   Description of Exp CONTRIBUTION	MO DAY YEAR    State	NO		

								PAGE	14		
To Whom Paid COMMUNICATIONS CONCEPTS					DAY	YEAR					
Mailing Address	2906 WILLIAM PENN	N HWY		2	9	2018	\$		2,673.17		
City EASTON	EASTON State Zip Code (Plus 4) PA 18045					Description of Expenditure MAILINGS					
To Whom Paid COMMUNICATIONS CONCEPTS					DAY	YEAR					
Mailing Address 2906 WILLIAM PENN HWY				2	20	2018	\$		279.95		
City EASTON	EASTON State Zip Code (Plus 4) PA 18045				Description of Expenditure AUTO CALL						
To Whom Paid LAURA LEE STAU	JDT			МО	DAY	YEAR					
Mailing Address	g Address 644 CHERRY HILL ROAD					2018	\$		76.00		
City NAZARE	ТН	Description of Expenditure  NOTARY FEE									
To Whom Paid MARCIA HAHN				МО	DAY	YEAR					
	136 E. NORTHAMPT	ON STREET		мо 3	<b>DAY</b> 13	<b>YEAR</b> 2018	\$		625.22		
MARCIA HAHN	136 E. NORTHAMPT	ON STREET  State PA	<b>Zip Code (Plus 4)</b> 18014	3 Descrip		2018 penditure			625.22		
MARCIA HAHN  Mailing Address	136 E. NORTHAMPT	State		3 Descrip	13	2018 penditure			625.22		
MARCIA HAHN  Mailing Address  City BATH  To Whom Paid	136 E. NORTHAMPTO	State PA		3  Descrip	13 Ition of Exp JRSEMENT	2018 penditure -CAMPAI			625.22 101.20		
MARCIA HAHN  Mailing Address  City BATH  To Whom Paid MARCIA HAHN		State PA		3  Descrip REIMBU  MO  3  Descrip	13  tion of Exp JRSEMENT  DAY	2018  cenditure -CAMPAI  YEAR  2018  cenditure	GN \$				
MARCIA HAHN  Mailing Address  City BATH  To Whom Paid MARCIA HAHN  Mailing Address		State PA  ON STREET  State	2ip Code (Plus 4)	3  Descrip REIMBU  MO  3  Descrip	13  Ition of Exp  JRSEMENT  DAY  13	2018  cenditure -CAMPAI  YEAR  2018  cenditure	GN \$				
MARCIA HAHN  Mailing Address  City BATH  To Whom Paid MARCIA HAHN  Mailing Address  City BATH  To Whom Paid		State PA  ON STREET  State PA	2ip Code (Plus 4)	3  Descrip REIMBU  MO  3  Descrip REIMBU	13  Ition of Exp  JRSEMENT  DAY  13  Ition of Exp  JRSEMENT	2018  Penditure -CAMPAI  YEAR  2018  Penditure -FILING	GN \$				

To Whom Paid MARCIA HAHN	МО	DAY	YEAR				
Mailing Address 136 E. NORTHAMPTON STREET	3	23	2018	\$		135.45	
City         BATH         State         Zip Code (Plus 4)           PA         18014	Descrip	Description of Expenditure REIMBURSEMENT-SUPPLIES					
To Whom Paid MILFRED HOYLE	МО	DAY	YEAR				
Mailing Address 107 N. GREEN ST.	3	23	2018	\$		35.80	
City NAZARETH State PA 18064	Descrip	Description of Expenditure POSTAGE ANNUAL REPORT					
To Whom Paid MILFRED HOYLE	МО	DAY	YEAR				
Mailing Address 107 N. GREEN ST.	3	23	2018	\$		14.00	
City NAZARETH State Zip Code (Plus 4)	) Descrip	Description of Expenditure NOTARY ANNUAL REPORT					
PA 18064	NOTAR	Y ANNUAL	REPORT				
To Whom Paid BATH VOLUNTEER FIREFIGHTERS & AMBULANCE CORP.	MO	DAY	YEAR				
To Whom Paid				\$		400.00	
To Whom Paid BATH VOLUNTEER FIREFIGHTERS & AMBULANCE CORP.	MO 4	DAY	YEAR 2018 penditure	\$		400.00	
To Whom Paid BATH VOLUNTEER FIREFIGHTERS & AMBULANCE CORP.  Mailing Address  121 CENTER ST. STE B  City BATH  State  Zip Code (Plus 4)	MO 4	DAY 8	YEAR 2018 penditure	\$		400.00	
To Whom Paid BATH VOLUNTEER FIREFIGHTERS & AMBULANCE CORP.  Mailing Address 121 CENTER ST. STE B  City BATH State PA 18014  To Whom Paid	MO  4  Description of the control of	Botion of Exp	YEAR  2018  Denditure Y DAYS	\$		400.00	
To Whom Paid BATH VOLUNTEER FIREFIGHTERS & AMBULANCE CORP.  Mailing Address  121 CENTER ST. STE B  City BATH  State PA  18014  To Whom Paid MINSI TRAILS COUNSIL, BOY SCOUTS OF AMERICA	MO  4  Descrip BATH (  MO  4  Descrip	DAY  8  otion of Exp COMMUNIT	YEAR  2018  Denditure Y DAYS  YEAR  2018				
To Whom Paid BATH VOLUNTEER FIREFIGHTERS & AMBULANCE CORP.  Mailing Address 121 CENTER ST. STE B  City BATH State PA 18014  To Whom Paid MINSI TRAILS COUNSIL, BOY SCOUTS OF AMERICA  Mailing Address 991 POSTAL ROAD  City ALLENTOWN State Zip Code (Plus 4)	MO  4  Descrip BATH (  MO  4  Descrip	DAY  8 Dition of Exp COMMUNIT  DAY  21 Dition of Exp	YEAR  2018  Denditure Y DAYS  YEAR  2018				
To Whom Paid BATH VOLUNTEER FIREFIGHTERS & AMBULANCE CORP.  Mailing Address 121 CENTER ST. STE B  City BATH State PA 18014  To Whom Paid MINSI TRAILS COUNSIL, BOY SCOUTS OF AMERICA  Mailing Address 991 POSTAL ROAD  City ALLENTOWN State PA 18109  To Whom Paid	MO  4  Description  MO  4  Description  A  Description  CONTR	DAY  8 DOTION OF EXP COMMUNIT  DAY  21 Detion of Exp IBUTIONS	YEAR  2018  Penditure Y DAYS  YEAR  2018  Penditure				

To Whom Paid MARCIA HAHN			мо	DAY	YEAR				
Mailing Address 136 E. NORTHAME	4	30	2018	\$	229.95				
City         BATH         State         Zip Code (Plus 4)           PA         18014				Description of Expenditure REIMBURSEMENT -RALLY					
To Whom Paid COMMUNICATIONS CONCEPTS			мо	DAY	YEAR				
Mailing Address 2906 WILLIAM PE	NN HWY		4	30	2018	\$	726.73		
City EASTON	Description of Expenditure MAILINGS								
Enter Grand Total of Expenditure	on Page 1 Pr	opert Cover Page Item D					PAGE TOTAL		
Enter Grand Total of Expenditures	oui rage 1, K	eport Cover Page, Item D.	•			\$	8,512.81		