Campaign Finance Report

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

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Filer Identificati Number :	ion 2	010004			Repor Filed		CANDI	DATE	CON	IMITTEE	\checkmark	LOBE	BYIST	
Name of Filing C	Committee, Cai	ndidate or	Lobbyist:	:	FRIEN	DS OF	MARCY T	OEPEL						
Street Address:	923 KULP	ROAD												
City:	PERKIOME	ENVILLE					State:	PA		Zip Co	de: 18	3074		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FR PRIMAF	RIDAY PRE	- 2.	30 DA PRIMA		POST-	3.	AMEND REPORT		Yes	No	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FR ELECTI	LIDAY PRI ON	E- 5.	30 DA		POST-	6. X	TERMIN REPORT		Yes	No	\checkmark
report type)	ANNUAL REPO	DRT 7.	Year 2	018			NG METHO			PAPER		\checkmark	DISKE	TTE
Name of Office S	Sought by Can	didate:					DATE O	F ELEC	TION	District Numbe		Par	ty Code	County Code
REPRESENTATI	IVE IN THE GE	NERAL AS	SEMBLY				мо	DAY	YEAR	147	STH	REP		46
							11		6 201	8	(SEE IN	STRUCTIO	ONS FOR (CODES)
Summary of Expenditures		d ^{MO}	DAY			50	мо	DAY	YEAR		OR OFFIC	CE USE	ONLY	
			10	23 2	018	го	11		-	-				
A. Amount Bro	-			rom Sche		\$			94,263.0					
C. Total Funds Available (Sum Of Lines A and B)\$ 101,475.80D. Total Expenditures (From Schedule III)\$ 49,356.35														
E. Ending Cash	•		-	ine C)		\$			52,119.4	-				
F. Value Of In-					le II)	<u>⇒</u> \$			616.8					
G. Unpaid Deb	ts And Obligati	ions (Fron	n Schedule	e IV)		\$			0.0	5				
				AFF	IDAV	IT SE	CTION							
PART I - If this is	s a Committee	report, tr	easurer si	ign here.	If this i	s a Cai	ndidate re	eport, ca	andidate s	ign here.				
I swear (or affirm correct and compl		, including (the attache	d schedule	s filed or	ı paper	or by elect	ronic me	dium, are t	o the best	of my knov	wledge	and belie	ef , true
Sworn to and subs	scribed before me day of	e this	20						Signatu	re of Perso	on Submit	ting Rep	ort	
		nature				_				Pri	nted Name	9		
My Commission E	-									Ema	ail			
	мо		DAY	YR				Area	a Code	Daytiı	me Teleph	none Nu	mber	
Part II- If this is	a report of a	candidate	's authori	zed Comr	nittee, (Candid	ate shall	sign hei	r e.					
I swear (or affirm) No 320) as amend		t of my know	wledge and	belief this	s politica	l comm	ittee has n	ot violate	ed any prov	isions of tl	he act of J	une 3,19	937 (P.L	. 1333,
Sworn to and subso	cribed before me day of	this	20							Signature	of Candida	ate		
						_				Print	ed Name			
My Commission Exp	Signat	ure								Em	ail			
						_								
	мо)	DAY	YR	Ł			Area C	ode	[Daytime T	elephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF MARCY TOEPEL	From:	<u>10/23/20</u>) <u>18</u> To:	<u>11/26/2018</u>
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)	\$	250.00		
TOTAL for the Reporting	\$	250.00		
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	6,462.71
All Other Contributions (Part D)			\$	500.00
TOTAL for the Reporting	g Period	(3)	\$	6,962.71
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 ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	7,212.71

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 Candid	Name of Filing Committee or Candidate			orting F	Period			
			Fror	From: To:			:	
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City State Zip Code (Plus 4)								
							ſ	PAGE TOTAL

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

\$

0.00

PART B 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 Reporting Period										
FRIENDS OF MARCY TOEPEL Fre					<u>10/23</u>):	<u>11/26/2018</u>			
					DATE			AMOUNT		
Full Name of Contributor MR & MRS J.O. DONOGHUE			r	мо	DAY	YEAR				
Mailing Address 20 RIDINGS WAY							\$	250.00		
City BROAD AXE	State	Zip Code (Plus 4)		11	5	2018				
PA 19002										
PAC										
Enter Grand Total of Part A on S	Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2. \$ 250.00									

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	Period			
FRIENDS OF MARCY TOEPEL			From:	<u>10/2</u>	<u>3/2018</u>	То:	<u>11/26/2018</u>
				DA	TE		AMOUNT
Full Name of Contributing Committee KEYSTONE STATE AUCTIONEERS PAC				мо	DAY	YEAR	
Mailing Address 364 WISSLER WAY							\$ 400.00
City LANDISVILLE	State PA	Zip Code 17538	e (Plus 4)	10	25	2018	
Full Name of Contributing Committee TROOPERS ASSOCIATION PAC (TAP)					DAY	YEAR	
Mailing Address 3625 VARTAN WAY City HARRISBURG	State PA	Zip Code	e (Plus 4)	10	23	2018	\$ 1,000.00
Full Name of Contributing Committee CNA CITIZENS FOR GOOD GOVERNMEN	Full Name of Contributing Committee CNA CITIZENS FOR GOOD GOVERNMENT				DAY	YEAR	
Mailing Address 500 NORTH THIRD S	TREET 3RD FLOOR State PA	Zip Code	e (Plus 4)	10	26	2018	\$ 500.00
Full Name of Contributing Committee ERIE INSURANCE PAC				мо	DAY	YEAR	
Mailing Address P.O. BOX 1699 City ERIE	State PA	Zip Code 16530	e (Plus 4)	10	29	2018	\$ 2,000.00
Full Name of Contributing Committee AFFORDABLE EDUCATION POLITICAL ACTION/PAC					DAY	YEAR	
Mailing Address PO BOX 220	State PA	Zip Code	e (Plus 4)	11	5	2018	\$ 500.00

Full Name of Contributing Commi SHIRE PAC	ttee		мо	DAY	YEAR	
Mailing Address 901 15TH ST	NW STE 510					\$ 500.00
City WASHINGTON	State DC	Zip Code (Plus 4) 20005	11	9	2018	
Full Name of Contributing Commi NATIONWIDE MUTUAL INSURAN	мо	DAY	YEAR			
Mailing Address ONE NATIONWIDE PLAZA 1-32-06 City State Zip Code (Plus 4)			11	9	2018	\$ 1,000.00
City COLUMBUS	State OH	Zip Code (Plus 4) 432152220		5	2010	
Full Name of Contributing Commi MONTGOMERY COUNTY HOUSE			мо	DAY	YEAR	
Mailing Address 904 SWEDES	FORD ROAD					\$ 562.71
City LOWER GWYNED	State PA	Zip Code (Plus 4) 19002	11	15	2018	
		ſ	PAGE TOTAL			
Enter Grand Total of Part C on	n 3.			\$ 6,462.71		

PART D 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			Repo	orting Pe	riod			
FRIENDS OF MARCY TOEPEL			Fron	n:	<u>10/23/2</u>	<u>018</u> То	To: <u>11/26/2018</u>	
				DA	TE		ΑΜΟΙ	INT
Full Name of Contributor FRED SYLVESTER				мо	DAY	YEAR		
Mailing Address 95 MAPLE LEAF LANE							\$	500.00
City POTTSTOWN	State PA	Zip Code (Plus 19464	s 4)	10	29	2018	5	
Employer Name NEW HANOVER CHIR	OPRACTIC			Occupation CHIROPRACTOR				
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code (F	Plus 4)
1810 SWAMP PIKE GILBERTSVILL					PA		19525	
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Sect						Γ	PAGE	TOTAL
							\$	500.00

PART E **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	d			
			From:			То:		
				D	ATE		AMOUNT	ſ
Full Name				мо	DAY	YEAR		
Mailing Address							\$ 5	0.00
City	State	Zip Code (Plus 4)					
Receipt Description						•		
Enter Grand Total of Part F on Sched	ule T. Detailed Sum	mary Page	Section	4			PAGE TO	TAL
nter Grand Total of Part E on Schedule I, Detailed Summary Page, 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 Perio	bd	
FRIENDS OF MARCY TOEPEL	From:	<u>10/23/2018</u> To:	<u>11/26/2018</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
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)	\$	59.40
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	498.98
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, 1		\$	558.38

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporting Period						
FRIENDS OF MARCY TOEPEL	RIENDS OF MARCY TOEPEL			<u>10/</u>	<u>/23/2018</u>	3 To: <u>11/26/201</u>			
				DATE		AMOUNT			
Full Name of Contributor PRO LIFE FEDERATION STATE PAC	мо	DAY	YEAR						
Mailing Address 4800 JONESTOWN ROAD STE 102				23	2018	\$	59.40		
City HARRISBURG	State	Zip Code (Plus 4)	1						
	PA	171091741							
Description of Contribution: ONE TIME USE OF ADDRESSES FROM THE 147TH PA STATE HOUSE DISTRICT									
				_					
Enter Grand Total of Part F on Sched Section 2.	lule II, In-Kind (Contributions Deta	iled Sumi	mary Pag	je,		PAGE TOTAL		
						\$	59.40		

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SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate					Re	porting P	eriod			
FRIENDS OF MARCY TOEPEL					Fro	om:	<u>10/23/20</u> 2	<u>18</u> To:		<u>11/26/2018</u>
							DATE		AMOUNT	
Full Name of Contributor AREA 2 REPUBLICAN COMMITTEE						мо	DAY	YEAR		
Mailing Address 52 STONE HILL DRIVE									\$	498.98
City POTTSTOWN	State PA	Zip Code(Plus 4) 19464				10	25	2018		
Employer of Contributor N/A					Occupation N/A					
Employer Mailing Address/Principal Plac Business	e of	City		State		Zip Code(F 4)		Descri	iption of Contribution	
N/A							MAILING FOR CAMPAIGN			
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.					PAGE TOTAL 498.98					

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period					
FRIENDS OF MARCY TOEPEL			From	<u>10/2</u>	<u>3/2018</u>	То:	<u>11/26/2018</u>		
				DATE			AMOUNT		
To Whom Paid GAYLE BUCKMAN			мо	DAY	YEAR				
Mailing Address 150 EAST PARK AVE	INUE		10	22	2018	\$	365.00		
City SCHWENKSVILLE	State PA	Zip Code (Plus 4) 19473		Description of Expenditure CAMPAIGN SIGNS "MOMS FOR MARCY TOEPEL'					
To Whom Paid HOUSE REPUBLICAN CAMPAIGN COMM	мо	DAY	YEAR						
Mailing Address				23	2018	\$	31,700.00		
City State Zip Code (Plus 4)				tion of Exp ION	penditure	1			
To Whom Paid FRIENDS OF BECKY CORBIN				DAY	YEAR				
Mailing Address P.O. BOX 155			10	26	2018	\$	5,000.00		
City LYNDELL	State PA	Zip Code (Plus 4) 19354	Descrip DONAT	otion of Exp TON	penditure				
To Whom Paid KEN HANSELL			мо	DAY	YEAR				
Mailing Address 1024 LAURELDALE	СТ		10	27	2018	\$	204.10		
City LITITZ	State PA	Zip Code (Plus 4) 17543	-	stion of Exp					
To Whom Paid HALLOWELL & BRANSTETTER			мо	DAY	YEAR				
Mailing Address 3031 LOGAN STREE	Mailing Address 3031 LOGAN STREET			30	2018	\$	2,765.88		
City CAMP HILL	State PA	Zip Code (Plus 4) 17011		otion of Exp FE LETTER					

To Whom Paid HALLOWELL & amp; BRANSTETTER					мо	DAY	YEAR			
Mailing Address 3031 LOGAN STREET					10	30	2018	\$	521.52	
City CAMP HILL	CAMP HILL State Zip Code (Plus 4) PA 17011					Description of Expenditure				
To Whom Paid MUNRO PRINTING					мо	DAY	YEAR			
Mailing Address 815 MARKET STREET					10	31	2018	\$	68.90	
City MARCUS HOOK		State PA		Zip Code (Plus 4) 19061	Description of Expenditure ENVELOPES					
To Whom Paid HALLOWELL & BRANSTETTER					мо	DAY	YEAR			
Mailing Address 3031 LOGAN STREET					11	1	2018	\$	6,000.00	
City CAMP HILL		State PA		Zip Code (Plus 4) 17011	Description of Expenditure					
To Whom Paid HALLOWELL & amp; BRANSTETTER					мо	DAY	YEAR			
Mailing Address 3031 LOGANS STREET					11	3	2018	\$	556.50	
City CAMP HILL		State PA		Zip Code (Plus 4) 17011	Description of Expenditure LOWER SALFORD E-DAY CARDS					
To Whom Paid HALLOWELL & BRANSTETTER					мо	DAY	YEAR			
Mailing Address 3031 LOGAN STREET					11	6	2018	\$	1,250.00	
City CAMP HILL		State PA		Zip Code (Plus 4) 17011	Description of Expenditure FOP ROBO CALLS					
To Whom Paid MARCY TOEPEL					мо	DAY	YEAR			
Mailing Address 307 HAMPTON COURT					11	15	2018	\$	924.45	
City GILBERTSVILLE		State PA		Zip Code (Plus 4) 19525		I otion of Exp SE REIMBU				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.									PAGE TOTAL	
Liner Grand Total of Expenditures on Page 1, Report Cover Page, Itelli D.								\$	49,356.35	