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 :		Rep File			CANDI	DATE		СОМ	4ITTEE	✓	LOB	BYIST						
Name of Filing C	Committee, Can	dida	te or Lo	bbyist:		KELI	LER	, MAR	K FRIENI	DS OF								
Street Address:	6441 WAG	GON	IERS GA	AP RD														
City:	LANDISBU	RG							State:	PA			Zip Code: 17040-0000					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1	1.	2ND FRIDAY PRIMARY	/ PRE	- 2	2.	30 DA PRIMA		POST-	OST- 3.			IENT	Yes	No	~	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4	1.	2ND FRIDAY ELECTION	/ PRE	- [5.	30 DA		POST-				ATION ?	Yes	No	~	
report type)	ANNUAL REPO	ORT 7	7. X	Year 2018					NG METHO				PAPER		/	DISKE	TTE	
Name of Office S	ought by Cand	lidate	 e:						DATE O	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County	
	,								МО	DAY	YE	AR	rumber	Toode			couc	
									11		6	2018		(SEE IN	ISTRUCTI	ONS FOR (ODES)	
Summary of Expenditures		i	МО	DAY	YEAR		_	_	МО	DAY	YI	EAR	FO	R OFFI	CE USE	ONLY		
			1	.1 27	2	018	I	<u> </u>	12	:	31	2018						
A. Amount Bro	ught Forward F	rom	Last Re	eport				\$			49,2	233.45						
B. Total Monet	ary Contributio	ns Aı	nd Rece	eipts (From	Sche	dule	I)	\$			3,0	00.00						
C. Total Funds	Available (Sum	1 Of L	ines A	and B)				\$			52,2	233.45						
D. Total Expen	ditures (From S	Sched	dule III	:)				\$			5,6	558.20						
E. Ending Cash	Balance (Subt	ract	Line D I	From Line (:)			\$			46,5	75.25						
F. Value Of In-	Kind Contributi	ions	Receive	ed (From So	hedu	le II)	\$				0.00						
G. Unpaid Debt	s And Obligation	ons (From S	chedule IV)			\$				0.00			•			
					AFF	IDA	\VI	T SE	CTION									
PART I - If this is	s a Committee	repoi	rt, treas	surer sign l	nere. I	[f thi	is is	a Car	ndidate re	eport, o	candi	date sig	ın here.					
I swear (or affirm) correct and comple		inclu	ding the	attached sch	edules	filed	d on	paper	or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and beli	ef , true	
Sworn to and subs	cribed before me day of	this		20							S	ignature	of Perso	n Submit	ting Re	oort		
	Sign	nature		-				- -					Prin	ted Name	e			
My Commission Ex	-	.acui e	•										Ema	il				
	мо		DA	·Υ	YR					Are	ea Coc	le	Daytim	e Telepi	none Nu	mber		
Part II- If this is	a report of a c	andi	date's a	authorized	Comn	nitte	e, C	andid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende		of my	knowle	dge and beli	ef this	polit	ical	comm	ittee has n	ot viola	ted an	y provisi	ions of the	e act of J	une 3,1	937 (P.L	. 1333,	
Sworn to and subsc	ribed before me t	this										Si	ignature o	of Candid	ate			
	day of							-					Drinto	d Name				
	Signatu	ure						-					Finite	Hallie				
My Commission Exp	-												Ema	il	_			
	МО		DA	·Υ	YR			•		Area	Code		Da	aytime T	elephor	ne Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
KELLER, MARK FRIENDS OF	From:	11/27/201	<u>8</u> To:	12/31/2018
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)			\$	0.00
TOTAL for the Reporting	J Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	3,000.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	y Period	(3)	\$	3,000.00
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			\$	3,000.00

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	Period			
			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	e or Candidate		Rep	oorting P	eriod			
			Fro	m:		To	o :	
					DATE			AMOUNT
Full Name of Contributor				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

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				
KELLER, MARK FRIENDS OF			From:	11/2	7/2018	То:	12/	31/2018
				DA	TE		AM	OUNT
Full Name of Contributing Committee Pennsylvania Orthopedic Society PAC				мо	DAY	YEAR		
Mailing Address 415 Market Street,	Ste. 210						\$	2,500.00
City Harrisburg	State PA	Zip Code 17101	e (Plus 4)	11	27	2018		
Full Name of Contributing Committee MONSANTO CITIZENSHIP FUND				мо	DAY	YEAR		
Mailing Address 800 N LINDBERGH	BLVD						\$	500.00
City ST LOUIS	State MO	Zip Code 6316700	e (Plus 4)	11	27	2018		
								PAGE TOTAL

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

PAGE TOTAL \$ 3,000.00

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			Rep	orting Pe	riod			
			Fron	n:		То	:	
				D	ATE		АМО	DUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plu	s 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page,	Section	on 3.			PAC	GE 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	ing Perio	od				
			From:			To:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	1		
Mailing Address							\$		0.00
City	State	Zip Code (Plus 4)						
Receipt Description	·	·		•			•		
Enter Grand Total of Part E	on Schedule I. Detailer	l Summary Page.	Section	4.				PAGE TO	ΓAL
- Communication of the Ex	Januara 1/ Betained	. Jaai y 1 ago,	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 Pe	riod	
KELLER, MARK FRIENDS OF	From:	11/27/2018 To :	12/31/2018
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	OR .	
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)	\$	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		Reportin	g Period			
			From:			To:	
				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 Sun	nmary 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					Re	porting F	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor						Occupa	tion			
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descri	ption o	of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, I	n-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	indidate		Reportii	ng Period			
KELLER, MARK FRIENDS OF			From	11/2	7/2018	То:	12/31/2018
				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
Sarah Keller							
Mailing Address 1912 Honey	suckle Hollow Road		11	30	2018	\$	1,500.00
City Elliottsburg	State	Zip Code (Plus 4)	Descrip	tion of Exp	l penditure	<u> </u>	
	PA	17024		iser expen			
To Whom Paid PC.R.C.			мо	DAY	YEAR		
Mailing Address P.O. Box 30	3		12	3	2018	<u> </u>	3,500.00
City New Bloomfield	State	Zip Code (Plus 4)	Descrip	tion of Exp	l penditure	<u> </u> 	
	PA	17068	donatio	-			
To Whom Paid C.C.C.R.W.			МО	DAY	YEAR		
Mailing Address 15 Meadowo	ood Place		12	10	2018	\$	40.00
City Boiling Springs	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA	17007	sustain	ing memb	er		
To Whom Paid State Street Copy			МО	DAY	YEAR		
Mailing Address 500 North T	hird Street		12	10	2018	\$	233.20
City Harrisburg	State	Zip Code (Plus 4)	Descrip	tion of Exp	ı Denditure	•	
J	PA	17101	Postcar	ds			
To Whom Paid Card Member Services			МО	DAY	YEAR		
Mailing Address P.O. 790408	3		12	3	2018	\$	385.00
City St. Louis	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	<u> </u>	
	МО	63179	1	ge coins			
							PAGE TOTAL
Enter Grand Total of Expend	itures on Page 1, Re	port Cover Page, Item l).			1	