### **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	20160	0003				port ed B		CA	NDII	DATE		COMN	4ITTEE	<b>✓</b>	LOE	BYI	ST	
Name of Filing C	ommitte	e, Candida	ate or Lo	obbyist:		FRII	END	S OF	DAWI	V W	ETZEL	KEE	FER CO	MMITTE	E				
Street Address:	150	ORE BANK	< ROAD																
City:	DILL:	SBURG							State	e:	PA			Zip Cod	ie: 17	7019	_		
TYPE OF REPORT	6TH TUES PRE-PRIM		1.	2ND FRIC PRIMARY	AY PRE	-	2.	30 DA		Р	OST-	3.		AMENDM REPORT		Yes		No	<b>\</b>
(place X to the right of	6TH TUES		4.	2ND FRIC		E-	5.	30 DA		Р	OST-	6.		TERMINA REPORT		Yes	1	No	<b>\</b>
report type)	ANNUAL	REPORT	7. <b>X</b>	<b>Year</b> 201	.9				NG ME CHEC					PAPER		<b>\</b>	DI	SKETTI	
Name of Office S	ought by	Candidat	e:	-					DAT	ΕO	F ELE	СТІС	N	District Number	Office Code	Pa	rty C	ode Co	
									МО		DAY	ΥI	EAR			RE	:P		
										11		5	2019		(SEE IN	STRUCT	IONS	FOR CODI	ES)
Summary of		and	МО	DAY	YEAF	₹			МО		DAY	Y	EAR	FO	R OFFI	CE US	E ON	LY	
Expenditures	from:		1	11 2	26 2	019	Т	0		12		31	2019						
A. Amount Bro	ught Forv	ward From	ı Last R	eport				\$				54,3	345.17						
B. Total Moneta	ary Contr	ibutions A	and Rec	eipts (Fro	m Sche	edule	ı)	\$					0.00						
C. Total Funds	Available	(Sum Of	Lines A	and B)				\$				54,3	345.17						
D. Total Expend	ditures (I	rom Sche	dule II	[)				\$				2,1	173.23						
E. Ending Cash	Balance	(Subtract	Line D	From Lin	e C)			\$				52,1	71.94						
F. Value Of In-	Kind Con	tributions	Receive	ed (From	Schedu	le II	i)	\$					0.00						
G. Unpaid Debt	s And Ob	ligations	(From S	chedule	IV)			\$					0.00						
					AFF	FIDA	۱۷۶	ΓSE	CTIC	NC									
PART I - If this is	a Comm	ittee repo	ort, trea	surer sig	n here.	If th	is is	a Car	ndidat	te re	port, c	andi	date sig	ın here.					
I swear (or affirm) correct and comple		report, inclu	uding the	attached	schedule	s file	d on	paper	or by e	electr	onic m	edium	, are to t	he best o	f my kno	wledge	and	belief ,	true
Sworn to and subs	cribed befo	ore me this		20								5	Signature	of Perso	n Submit	ting Re	port		_
	_	Signatur	'A					-						Prin	ted Name	•			-
My Commission Ex	pires	oigilatai	-							•				Ema	il				_
		мо	D/	λY	YR						Are	ea Coo	ie	Daytim	e Teleph	one N	umbe	r	
Part II- If this is	a report	of a cand	idate's	authorize	d Comr	nitte	e, C	andid	ate sl	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende		e best of m	y knowle	edge and b	elief this	s poli	tical	comm	ittee h	as no	ot viola	ted ar	ıy provisi	ions of th	e act of J	une 3,	1937	(P.L. 13	33,
Sworn to and subsc		re me this											Si	ignature o	of Candid	ate			— <b> </b>
	day of —							-						Printa	d Name				
		Signature						-											
My Commission Exp		-												Ema	il				
	_	мо	D	ΑY	YF	₹		•			Area	Code		Da	aytime T	elepho	ne N	umber	_

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF DAWN WETZEL KEEFER COMMITTEE	From:	11/26/201	9 To:	12/31/2019
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)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	) Period	(3)	\$	0.00
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			\$	0.00

#### **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 Candida	e	R	Reporting Period							
		F	rom:		То	:				
		,		DATE			AMOUNT			
Full Name of Contributing Committee			МО	DAY	YEAR					
Mailing Address						\$	0.00			
City	State	Zip Code (Plus 4)								

PAGE TOTAL
0.00

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

### 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.

Name of Filing Comn	nittee or Candidate		Repo	orting P	eriod			
			Fron	1:		To	o:	
		I			DATE			AMOUNT
Full Name of Contribut	or			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						
	·	•				•		PAGE TOTAL
								PAGE IOTAL

#### **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	e of Filing Committee or Candidate		Reporting Period							
			From:			То:				
				DA	TE		A	MOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR		0.00		
Mailing Address							<b>-</b>   \$	0.00		
City	State	Zip Cod	e (Plus 4)							
								PAGE TOTAL		
Enter Grand Total of Part C on Scheo	lule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00		

### 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	2			Rep	orting Pe	riod			
				Fron	n:		To	<b>)</b> :	
					D	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR	\$	0.00
Mailing Address									
City	State	Zi	p Code (Plus	<b>(4)</b>					
Employer Name	•				Occupa	tion	-	-	
Employer Mailing Address/Principal Pl	ace of Business		City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detaile	ed Sumr	mary 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	ing Peri	od			
			From:			То:		
					ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (P	lus 4)					
Receipt Description	'	<b>,</b>		<u> </u>	-I	_ <b>!</b>	•	
			· ··	_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule 1, Detailed	i Summary Page, S	Section	4.			\$	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 Peri	od	
FRIENDS OF DAWN WETZEL KEEFER COMMITTEE	From:	<u>11/26/2019</u> <b>To:</b>	12/31/2019
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTOR	t	
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 Can	didate		Reporting Period					
			From:			То:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						<b>7</b> \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•	•	•	•		·		
					-			
Enter Grand Total of Part F or	n Schedule II, In-Ki	nd Contributions Detai	led Sun	ımary Pa	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	Period				
				Fro	m:		To:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								\$		0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zij	p Code(Plus 4)	Descr	iptio	n of Contribution	on
Enter Grand Total of Part G on Sch	edule II. In-K	ind	Contributions D	etaile	ed				PAGE TOT	ΓAL
Summary Page, Section 3.					-					0.00

# STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting I	Period		
FRIENDS OF DAWN WETZEL KEEFER COMMITTEE	From	11/26/2019	То:	12/31/2019

				DATE			AMOUNT	
To Whom Paid			мо	DAY	YEAR			
BIG BOTTOM BREWERY								
Mailing Address 6 TRISTAN DRIVE			10	15	2019	\$	294.23	
City DILLSBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	17019	NORTH	ERN FOOTE	BALL			
To Whom Paid			МО	DAY	YEAR			
BOOMERANG'S			110		. Z/ut			
Mailing Address 110 LIMEKLIN ROAD	)		11	14	2019	\$	83.05	
City NEW CUMBERLAND	State	Zip Code (Plus 4)	Description of Expenditure					
PA 17070			LUNCHE	ON 92ND	CAPT DR	EL		
To Whom Paid			мо	DAY	YEAR			
DAWN W. KEEFER								
Mailing Address 430 FRANKLIN CHUR	RCH ROAD		12	9	2019	\$	971.14	
City DILLSBURG State Zip Code (Plus 4)			Descrip	tion of Exp	enditure			
	PA	17019	PA SOC	IETY TRIP				
To Whom Paid			мо	DAY	YEAR			
AMTRACK								
Mailing Address 1 CHESTNUT ST.			12	9	2019	\$	126.00	
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	17101	PA SOC	IETY TRIP				
To Whom Paid			мо	DAY	YEAR			
UMBER-NYC								
Mailing Address HG 1455 MARKET S	Г. # 400		12	9	2019	\$	7.33	
City SAN FRANCISCO	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•		
	CA	94103	PA SOC	IETY TRIP				
To Whom Paid			мо	DAY	YEAR			
UMBER-NYC								
Mailing Address HG 1455 MARKET S	Г. # 400		12	9	2019	\$	32.40	
City SAN FRANCISCO	City SAN FRANCISCO State Zip Code (Plus 4)			Description of Expenditure				
	CA	94103	PA SOC	IETY TRIP				

							OL 12	
To Whom Paid			МО	DAY	YEAR			
NYC TAXI								
Mailing Address 11-11 34TH ST			12	9	2019	\$	21.35	
City NY	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
NY			PA SOCIETY TRIP					
To Whom Paid			мо	DAY	YEAR			
KABOOZ KABOOZ								
Mailing Address 234 W. 31ST ST.			12	9	2019	\$	22.45	
City NY	State	Zip Code (Plus 4)	Description of Expenditure					
	NY		PA SOC	IETY TRIP				
To Whom Paid			МО	DAY	YEAR			
AMTRAK								
Mailing Address 1 CHESTNUT ST.			12	9	2019	\$	123.00	
City HARRISBURG	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	1710	PA SOCIETY TRIP					
To Whom Paid			МО	DAY	YEAR			
AMTRAK								
Mailing Address 1 CHESTNUT ST.			12	9	2019	\$	63.00	
City HARRISBURG	Zip Code (Plus 4)	Description of Expenditure						
	PA	17101	PA SOCIETY TRIP					
To Whom Paid			МО	DAY	YEAR			
UBER								
Mailing Address HG-1455 MARKET ST			12	9	2019	\$	5.44	
City SAN FRANCISCO	State	Zip Code (Plus 4)	Description of Expenditure					
	CA	94103	PA SOCIETY TRIP					
To Whom Paid			мо	DAY	YEAR			
GRAND HYATT REGENCY								
Mailing Address 333 108 AVE			12	9	2019	\$	398.24	
City BELLEVUE	State	Zip Code (Plus 4)	Description of Expenditure					
	WA	98004	PA SOCIETY TRIP					
To Whom Paid			мо	DAY	YEAR			
UBER								
Mailing Address HG-1455 MARKET ST		12	9	2019	\$	5.44		
City SAN FRANCISCO	State	Zip Code (Plus 4)	Descript	scription of Expenditure				
	CA	98004	PA SOCIETY TRIP					
To Whom Paid			мо	DAY	YEAR			
NYC TAXI								
Mailing Address 1-11 34TH ST.		12	9	2019	\$	20.15		
City NY	State	Zip Code (Plus 4)	Descript	Description of Expenditure				
	NY		PA SOC	PA SOCIETY TRIP				

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Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.		PAGE TOTAL	
		2,173.22	