Campaign Finance Report

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

-					-			CAND							BYIST		
Filer Identificati Number :	ion	20100	054			Repo Filed		CAND.	IDATE		СОМІ	MITTEE	✓	LOBI	51151		
Name of Filing C	Committee,	Candida	ate or Lo	obbyist:		FRIEN	DS OF	MARCIA	HAHN								
Street Address:	136 E.	NORTH	AMPTO	N STREET													
City:	BATH							State: PA				Zip Code: 18014					
TYPE OF REPORT	6TH TUESD PRE-PRIMA		1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 D PRIM		POST-	POST- 3.		AMENDMENT REPORT?		Yes	No	\checkmark	
(place X to the right of	6TH TUESD PRE-ELECT		4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 D ELEC	AY TION	POST-	POST- 6.		TERMINATION REPORT?		Yes	No	\checkmark	
report type)	ANNUAL R	EPORT	7. X	Year 2019				NG METH CHECK C				PAPER		\checkmark	DISKE	TTE	
Name of Office S	Name of Office Sought by Candidate:							DATE (OF ELE	CTIC	DN	District Number	Office	Par	ty Code	County Code	
										REP		48					
REPRESENTATI	IVE IN THE	GENER	AL ASSI	EMBLY				11		5	2019		(SEE IN	STRUCTI	ONS FOR	CODES)	
Summary of		and	мо	DAY	YEAR	2		мо	DAY	Y	EAR	FC	OR OFFIC	CE USE	ONLY		
Expenditures	s from:		1	1 26	2	019	ГО	12	2	31	2019						
A. Amount Bro	ught Forwa	ard From	1 Last Ro	eport			\$			34,8	828.73						
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 500.00																	
C. Total Funds Available (Sum Of Lines A and B) \$ 35,328.73																	
D. Total Expen	ditures (Fro	om Sche	dule II	[)			\$	5		2,1	168.08						
E. Ending Cash	Balance (S	Subtract	Line D	From Line	C)		4	5		33,1	60.65						
F. Value Of In-	Kind Contri	ibutions	Receive	ed (From S	chedu	le II)	4	5			0.00	1					
G. Unpaid Deb	ts And Oblig	gations	(From S	chedule IV)		4	5			0.00						
					AFF	IDAV	IT SE	CTION									
PART I - If this is	s a Commit	tee repo	ort, trea	surer sign	here. I	If this i	s a Ca	ndidate r	eport, o	candi	date sig	gn here.					
I swear (or affirm) correct and comple		port, inclu	uding the	attached scl	hedules	s filed or	n paper	or by elec	tronic m	edium	, are to	the best o	of my know	wledge	and beli	ef , true	
Sworn to and subs	scribed befor day of	e me this		20						5	Signatur	e of Perso	on Submitt	ting Rep	ort		
							_					Prir	ited Name	•			
My Commission Ex	xpires	Signatur	e									Ema	nil				
	м	0	DA	AY	YR		_		Ar	ea Coo	le		ne Teleph	one Nu	mber		
Part II- If this is	a report o	f a cand	idate's a	authorized	Comn	nittee, (Candio	late shall	sign h	ere.							
I swear (or affirm) No 320) as amende		best of m	y knowle	dge and beli	ef this	politica	l comn	nittee has i	10t viola	ted ar	ıy provis	ions of th	e act of Ju	une 3,19	937 (P.L	. 1333,	
Sworn to and subsc		me this									s	ignature	of Candida	ate			
day of 20							_					Print	ed Name				
	Sig	gnature					_										
My Commission Exp	pires											Ema	11				
		мо	D/	AY .	YR		_		Area	Code		D	aytime To	elephon	e Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** FRIENDS OF MARCIA HAHN From: <u>11/26/2019</u> **To:** 12/31/2019 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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)** 500.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 500.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 500.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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 Candidate				porting l	Period			
				om:		То	:	
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
							Γ	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 Candidat	e			orting P	eriod			
	From: To:							
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						
								PAGE TOTAL
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2. \$ 0.00								

PAGE 5

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					
FRIENDS OF MARCIA HAHN	From:	From: <u>11/26/2019</u> To: <u>12/31/20</u>						
				DA	TE		Α	MOUNT
Full Name of Contributing Committee NORFOLK SOUTHER CORPORATION G	OOD GOVERNMENT F	UND		мо	DAY	YEAR		
Mailing Address 1 CONSTITUTION A	VENUE, N.E. STE 30	0		12			\$	500.00
City WASHINGTON State Zip Code (Plus 4) DC 20002					25	2019		
						ſ		PAGE TOTAL
Enter Grand Total of Part C on Sche	edule I, Detailed Su	mmary Pa	age, Sectio	n 3.			\$	500.00

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	Reporting Period	
	From:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

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	Name of Filing Committee or Candidate			ing Perio	od				
Fr			From:	From: To:					
				D	ATE			AMOUNT	Г
Full Name				мо	DAY	YEAR			
Mailing Address							\$	5	0.00
City	State	Zip Code (Plus 4)						
Receipt Description	·						•		
Enter Grand Total of Part E on Sched	ule I. Detailed Sum	mary Page	Section	4				PAGE TO	TAL
	are 1, Detailed Sum	iniai y Faye,	Section				\$		0.00

SCHEDULE II IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS

E THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THING DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Perio	od	
FRIENDS OF MARCIA HAHN	From:	<u>11/26/2019</u> то:	<u>12/31/2019</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate R			Reporting	g Period				
F						То:		
				DATE		АМО	UNT	
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 Schedule II, In-Kind Contributions Detail Section 2.			iled Sum	mary Pag	je,	PAGE	TOTAL	
					4	6	0.00	

0.00

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

Name of Filing Committee or Candidate				Rep	oorting P	Period				
						From: To:				
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(P	Plus 4)						
Employer of Contributor						Occupat	tion			
Employer Mailing Address/Principal Place of City State Business						Zip 4)	Code(Plus	Descri	otion o	of Contribution
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Det				taile	d				PAGE TOTAL	

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate			ng Period			
FRIENDS OF MARCIA HAHN				<u>11/20</u>	То:	<u>12/31/2019</u>	
		AMOUNT					
To Whom Paid MARCIA HAHN			мо	DAY	YEAR		
Mailing Address 136 E. NORTHAMPTON STREET				12	2019	\$	577.59
City BATH State Zip Code (Plus 4)				otion of Exp	penditure		
	РА	18014	REIMBU	JRSEMENT	-RALLY S	SUPPLIES	,
To Whom Paid BECK'S LAND & SEA HOUSE			мо	DAY	YEAR		
Mailing Address 997 BUSHKILL CEN	TER RD		12	12	2019	\$	1,590.49
City NAZARETH	State	Zip Code (Plus 4)	Descrip	otion of Exp	Denditure		
	PA	18064	CAMPA	IGN EXPEN	ISE		
							PAGE TOTAL
Enter Grand Total of Expenditures	on Page 1, Report C	Cover Page, Item I) .			\$	2,168.08

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