Campaign Finance Report

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

Filer Identification 2010054 Number :					Rep File			CANI	DIC	DATE		СОМ	4ITTEE	√	LOBBYIST			
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		FRIE	ND:	S OF	MARCI	ΑH	IAHN								
Street Address:	136 E NORTH	AMPTON	N STREET															
City:	BATH							State:		PA			Zip Cod	ie: 18	3014			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2	2.	30 DA		P	OST-	3.		AMENDM REPORT		Yes	No		\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	y pri	≣- 5	5.	30 DA		P	OST-	6. X		TERMINA REPORT		Yes	No		\
report type)	ANNUAL REPORT	7.	Year 2020					NG MET CHECK					PAPER		/	DISKE	TTE	
Name of Office S	Sought by Candida	te:	_					DATE	OF	ELEC	CTIC	N	District Number	Office Code	Par	ty Code	Cour	
								МО		DAY	ΥI	AR	138	STH	REP		48	·
REPRESENTATI	VE IN THE GENER	RAL ASS	EMBLY					1	11		3	2020		(SEE IN	STRUCTIO	ONS FOR	ODES)
	Receipts and	МО	DAY	YEAR	ł			МО		DAY	YI	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	from:	:	10 20	2	020	T	0	1	11	2	23	2020						
A. Amount Bro	ught Forward Fror	n Last R	eport				\$				16,	153.79						
B. Total Monet	B. Total Monetary Contributions And Receipts (From Schedule I) \$ 500.00																	
C. Total Funds Available (Sum Of Lines A and B)							\$				16,6	553.79						
D. Total Expenditures (From Schedule III)							\$				2	100.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)			\$				16,2	53.79]					
F. Value Of In-	Kind Contributions	Receive	ed (From S	chedu	le II)	\$					0.00						
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV)			\$					0.00			•			
				AFF	IDA	VI	ΓSE	CTIO	V									
PART I - If this is	s a Committee rep	ort, trea	surer sign	here.	If thi	is is	a Car	ndidate	re	port, c	andi	date sig	ın here.					
I swear (or affirm) correct and complete) that this report, incl ete.	uding the	attached sc	hedule	s filed	l on p	paper	or by ele	ectro	onic me	dium	, are to t	he best o	f my kno	wledge a	and beli	ef , tr	ue.
Sworn to and subs	cribed before me this	i	20						-		5	ignature	of Perso	n Submit	ting Rep	ort		-
	_						.		-				Prin	ted Name				_
My Commission Ex	Signatu opires	re							-				Ema	il				_
	мо	D	AY	YR			-		-	Are	a Cod	le		e Teleph	none Nu	mber		-
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nitte	e, Ca	andid	ate sha	II s	ign he	re.							
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and beli	ef this	politi	ical	comm	ittee has	s no	t violat	ed an	y provisi	ions of th	e act of J	une 3,19	937 (P.L	. 133:	3,
Sworn to and subso	ribed before me this											Si	ignature o	of Candid	ate			-
	day of						_											_
	<u> </u>						-						Printe	d Name				
My Commission Exp	Signature pires								-				Ema	il				-
	МО	D	AY	YR	1		-			Area	Code		Da	aytime T	elephon	e Numb	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF MARCIA HAHN	From:	10/20/202	<u>:0</u> To:	11/23/2020
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)			\$	500.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	500.00
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			\$	500.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize onl with an aggregate val	-			-			
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		1			DATE			AMOUNT
Full Name of Contribution	ng Committee			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.

PAGE TOTAL \$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 Filling Committee of Canadate				Reporting Period From: To:				
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	1					

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 P	eriod		
FRIENDS OF MARCIA HAHN	From:	10/20/2020	То:	11/23/2020

DATE AMOUNT

Full Name of Contributing Committee NORFOLK SOUTHERN CORPORATION GO	OOD GOVERNMENT FI	UND	МО	DAY	YEAR	
Mailing Address 1 CONSTITUTION AV	11			\$ 500.00		
City WASHINGTON State DC Zip Code (Plus 4) 20002				18	2020	

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

PAGE TOTAL \$ 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				
				Fror	n:		To	o:		
					D	ATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								\$		0.00
City	State	Zi	p Code (Plus	4)						
Employer Name		•			Occupa	tion	•	•		
Employer Mailing Address/Principal Pla Business	ce of		City			State		Zip C	ode (Plus	4)
Enter Grand Total of Part C on Scho	edule I, Detail	led Sumr	mary Page,	Section	on 3.			\$	PAGE TO	TAL 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 Co	andidate		Report	ting Perio	bd			
			From:			То:		
				D	ATE		AN	10UNT
Full Name				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	•						
Enter Grand Total of Part E or	Schedule T Detaile	d Summary Page	Section	4			PA	GE TOTAL
Lines Grana Fotal of Fair 2 of	r benedule 1/ betanet	z Sammary r age,	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 Peri	od	
FRIENDS OF MARCIA HAHN	From:	<u>10/20/2020</u> To:	11/23/2020
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	R	
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 Candidat	:e		Reporting	g Period			
			From:			То:	
				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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Re	porting	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	ation		•	
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, I	n-Kind	Contributi	ons De	taile	ed				PAGE TOTAL 0.00
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting I	Period		
FRIENDS OF MARCIA HAHN	From	10/20/2020	То:	11/23/2020

			DATE				AMOUNT
To Whom Paid BANNED FROM THE RANCH			МО	DAY	YEAR		
Mailing Address 5509 JACLYN LANE			11	11	2020	\$	400.00
City BETHLEHEM	State	Zip Code (Plus 4)	Description of Expenditure RALLY-BUSHKIL FIRE HAL				
	PA	18017					
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
						\$	400.00