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 2	004018				port ed B		CAN	IDII	DATE		СОМ	ITTEE	✓	LOBE	YIST			
Name of Filing C	Committee, Car	ndidate or L	obbyist:	KELLER, MARK FRIENDS OF															
Street Address:	P O BOX 3	323																	
City:	LANDISBU	JRG						State	:	PA			Zip Cod	le: 17	7040				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	2.	30 DA PRIMA		Р	OST-	3.		AMENDM REPORT		Yes	No	~				
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	-	5.	30 DA ELECT		Р	OST-	6.		TERMINA REPORT		Yes	No	~		
report type)	ANNUAL REPO	ORT 7. X	Year 2004					IG ME			<u> </u>		PAPER		\checkmark	DISKE	TTE		
Name of Office S	Sought by Cand	lidate:	•					DATE	E 0	F ELE	CTIC	DN N	District Number	Office Code	Part	ty Code	County Code		
								МО		DAY	Y	EAR	Ivaniber		50				
REPRESENTATI	VE IN THE GE	NERAL ASS	SEMBLY						11		2	2004	(SEE INSTRUCTIONS FOR COD						
Summary of Expenditures		мо	DAY	/EAR	l			МО		DAY	Y	EAR	FOR OFFICE USE ONLY						
Expenditures	i i i oiii:		1 1		1	Т	<u> </u>		12		31	2004							
A. Amount Bro	ught Forward	From Last F	eport				\$				10,	942.72							
B. Total Moneta	ary Contribution	ons And Red	eipts (From S	Sche	dule	e I)	\$					0.00							
C. Total Funds	Available (Sur	n Of Lines A	and B)				\$				10,	942.72]						
D. Total Expend	ditures (From	Schedule II	I)				\$				4	495.00							
E. Ending Cash	Balance (Sub	tract Line D	From Line C))			\$				10,4	147.72							
F. Value Of In-	Kind Contribut	ions Receiv	ed (From Sch	nedu	le II	I)	\$					0.00							
G. Unpaid Debt	s And Obligati	ons (From	Schedule IV)				\$					0.00			•				
				AFF	ΊD	AVI	T SE	CTIO	N										
PART I - If this is	s a Committee	report, trea	surer sign he	ere. 1	[f th	nis is	a Can	didat	e re	port, c	candi	date sig	jn here.						
I swear (or affirm) correct and complete		, including th	e attached sche	dules	file	d on	paper (or by e	lectr	ronic m	edium	ı, are to t	the best o	f my kno	wledge a	and belie	ef , true		
Sworn to and subs	cribed before me	e this	20								:	Signature	of Perso	n Submit	ting Rep	ort			
							- -						Prin	ted Name	e				
My Commission Ex	_	nature											Ema	il					
	МО	D	AY	YR			-			Are	ea Co	de		e Teleph	none Nui	mber			
Part II- If this is	a report of a	candidate's	authorized C	omn	nitte	ee, C	andida	ate sh	all s	sign he	ın here.								
I swear (or affirm) No 320) as amende		of my knowl	edge and belief	this	poli	tical	commi	ittee ha	as no	ot viola	ted ar	d any provisions of the act of June 3,1937 (P.L. 1333,							
Sworn to and subsc	ribed before me	this								Signature of Candidate									
	day of						_							J 87					
	£:						-						Printe	d Name					
My Commission Exp	Signat ires	uie							•				Ema	il					
	мо	D	AY	YR			•			Area	Code		Da	aytime T	elephon	e Numbe	er		

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period		
KELLER, MARK FRIENDS OF	From:	To:	12/31/2004
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 ar 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

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
	•	·			•	•	$\overline{}$	DACE 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 Candidate				Reporting Period From: To:				
			l		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				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule 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 Candi	date			Rep	orting Pe	riod			
				Fror	n:		To) :	
			_		D	ATE		А	MOUNT
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/Principa Business	l Place of		City		•	State		Zip Cod	de (Plus 4)
Enter Grand Total of Part C on	Schedule I, Deta	iled Sumr	mary Page,	Section	on 3.			F \$	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 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,	Dection	••			\$		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 Period		
KELLER, MARK FRIENDS OF	From:	To:	12/31/2004
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	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 Candid	ate		Reporting	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 Sum	mary Pag	те Г		PAGE TOTAL
Section 2.	ciicadic 11, 111 Kii	ia contributions beta	nea Sam	iiiiai y i aş	,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Re	porting l	Period			
					Fro	om:		To:		
					•		DATE			AMOUNT
Full Name of Contributor						МО	DAY	YEAR		
Mailing Address									\$ \$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupa	ition			
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descr	ption	of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, I	in-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	ndidate		Reporti	ng Period			
KELLER, MARK FRIENDS OF			From			То:	12/31/2004
				DATE			AMOUNT
To Whom Paid PERRY COUNTY TOURIST/SM. B	US. ALL. GRP.		мо	DAY	YEAR		
Mailing Address PO BOX 20			12	3	2004	\$	120.00
City ELLIOTTSBURG	State PA	Zip Code (Plus 4) 17024	1 '	otion of Exp ENDARS	penditure		
To Whom Paid HOUSE OF REP. CAMP. COMM.			МО	DAY	YEAR		
Mailing Address P.O. BOX 11	787		12	9	2004	\$	375.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17108	1 .	otion of Exp			
Enter Grand Total of Expendi	itures on Page 1, Re	eport Cover Page, Item [).				PAGE TOTAL

495.00