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 2004	018				port ed B		CANDI	DATE		СОМ	1ITTEE	✓	LOBI	BYIST		
Name of Filing C	Committee, Candid	ate or L	obbyist:		KEL	LER	, MAR	K FRIENI	DS OF								
Street Address:	P O BOX 323																
City:	LANDISBURG							State:	PA			Zip Cod	le: 17	7040			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. X	2ND FRIDAY PRIMARY	PRE-	-	2.	30 DA		POST-	3.		AMENDM REPORT?		Yes	No	•	/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	! -	5.	30 DA		POST-	6.		TERMINA REPORT?		Yes	No	•	/
report type)	ANNUAL REPORT	7.	Year 2005					NG METHO				PAPER		\	DISKE	TTE	
Name of Office S	Sought by Candida	te:	•					DATE 0	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Coun	
	· ,							МО	DAY	YE	AR	rumber	Todac			couc	
								11		8	2005		(SEE IN	STRUCTI	ONS FOR C	ODES)	1
Summary of Expenditures	Receipts and	МО	DAY	/EAR	ł			МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
expenditures	s trom:		1 1		1	Т	0	3	:	28	2005						
A. Amount Bro	ught Forward Fror	n Last R	eport				\$			10,4	47.72						
B. Total Monet	ary Contributions	And Rec	eipts (From S	Sche	dule	e I)	\$			3	300.00						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			10,7	47.72						
D. Total Expen	ditures (From Sch	edule II	I)				\$			1,6	52.32						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)			\$			9,0	95.40						
F. Value Of In-	Kind Contributions	Receiv	ed (From Sch	nedu	le II	I)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$				0.00			•			
				AFF	IDA	AVI	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign he	ere. 1	If th	nis is	a Car	ndidate re	eport, o	andio	date sig	ın here.					
I swear (or affirm) correct and comple) that this report, incl ete.	uding the	attached sche	dules	s file	d on	paper	or by elect	ronic m	edium,	are to t	he best o	f my kno	wledge	and belie	ef , tru	ıe
Sworn to and subs	cribed before me this day of	•	20							s	ignature	of Perso	n Submit	ting Rep	ort		_
	Signatu	re					- -					Prin	ted Name	e			_
My Commission Ex	cpires											Ema	il				_
	мо	D	AY	YR					Are	ea Cod	е	Daytim	e Telepl	one Nu	mber		
Part II- If this is	a report of a cand	didate's	authorized C	omn	nitte	ee, C	andid	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of n	ny knowl	edge and belief	this	poli	itical	comm	ittee has n	ot viola	ted an	y provis	ions of the	e act of J	une 3,1	937 (P.L.	. 1333	3,
Sworn to and subso	ribed before me this										s	ignature o	of Candid	ate			-
	day of ————————————————————————————————————						_					Printe	d Name				-
	Signature						-										_
My Commission Exp	ires											Ema	il				
	МО	D	AY	YR			-		Area	Code		Da	aytime T	elephon	e Numb	er	⁻

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period		
KELLER, MARK FRIENDS OF	From:	To:	<u>3/28/2005</u>
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)		\$	300.00
All Other Contributions (Part D)		\$	0.00
TOTAL for the Reporting	Period (3)	\$	300.00
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		\$	300.00

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 Committe	e or Candidate		Rep	orting F	Period			
			Fro	m:		То	1	
		•			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.

From: To: DATE Full Name of Contributor MO DAY YEAR	Name of Filing Comm	ittee or Candidate		Repo	orting P	eriod			
Full Name of Contributor				Fron	n:		To	o:	
Full Name of Contributor MO DAY YEAR			I.			DATE			AMOUNT
	Full Name of Contribute	or			мо	DAY	YEAR		
Mailing Address	Mailing Address							\$	0.00
City State Zip Code (Plus 4)	City	State	Zip Code (Plus 4)						
									PAGE TOTAL

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:	То:	<u>3/28/2005</u>

Full Name of Contributing Committee

PABAR-PAC

MO
DAY

YEAR

\$ 300.00

Mailing Address 100 SOUTH STREET/ P.O. BOX 186

City HARRISBURG State Zip Code (Plus 4)

DATE

PA 17108

PAGE TOTAL \$ 300.00

AMOUNT

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

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				Repo	orting Pe	riod					
				Fron	n:		٦	То:			
					D	ATE			А	MOUNT	
Full Name of Contributor					МО	DAY	YEAR	R	\$		0.00
Mailing Address											
City	State	Zip	Code (Plus	4)							
Employer Name					Occupa	tion					
Employer Mailing Address/Principal Plac	e of Business		City			State		z	ip Cod	de (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Sเ	umm	nary Page,	Section	on 3.			\$	F	PAGE TOTA	L .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:			To:	
				D	ATE		AMOUNT
Full Name				мо	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)				
Receipt Description	•	•			•		
Forten Commit Tatal of Boot	F an Cabadala I Batallad	I C B	C				PAGE TOTAL
Enter Grand Total of Part	c on scnedule 1, Detailed	i Summary Page,	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 Period		
KELLER, MARK FRIENDS OF	From:	To:	<u>3/28/2005</u>
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 Candi	idate		Reportin	g Period			
			From:			To:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						7 \$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:	•		•	•	•		
Enter Grand Total of Part F on	Schedule II, In-Ki	nd Contributions Detai	led Sum	mary 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				Rep	orting	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	ation				
Employer Mailing Address/Principal Plac	e of Business	City	V	State	e Zip	Code(Plus 4)	Descr	ript	ion of Contribution	on
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	Contributions De	etaile	ed				PAGE TO	ΓAL
Summary Page, Section 3.	,									0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period		
KELLER, MARK FRIENDS OF	From	То:	<u>3/28/2005</u>

				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
HRCC 2006 INC.			110				
Mailing Address P.O. BOX 11	787		1	10	2005	\$	500.00
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	17108	FUNDRA	AISER			
To Whom Paid			мо	DAY	YEAR		
PERRY PRINTING			110				
Mailing Address P.O. BOX 85			1	18	2005	\$	139.92
City NEW BLOOMFIELD	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA	17068	NEW BL	OOMFIELD	LIONS	CLUB PLAY	TICKETS
To Whom Paid			мо	DAY	YEAR		
PERRY COUNTY FAIR ASSOCIAT	TON		110				
Mailing Address RR #2 BOX	197		2	12	2005	\$	100.00
City MILLERSTOWN	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA	17062	AD FOR	PERRY CO	UNTY FA	IR BOOK	
To Whom Paid			мо	DAY	YEAR		
POST MASTER			140		ILAK		
Mailing Address US POSTAL	SERVICE		2	12	2005	\$	7.40
City LANDISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	17040	POSTAC	GE STAMPS	5		
To Whom Paid			мо	DAY	YEAR		
FRANKLIN CO REP COMM			140		ILAK		
Mailing Address 293 SOUTH	GATE MALL		2	18	2005	\$	500.00
City CHAMBERSBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	17201	1 TABLE	E LINCOLN	DAY DIN	INER	
To Whom Paid			мо	DAY	YEAR		
HRCC 2006 INC.			1.10		ILAN		
Mailing Address P.O. BOX 11	787		3	12	2005	\$	200.00
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	17108	RECEPT	ION			
		•	•				

To Whom Paid			МО	DAY	YEAR		
PATH VALLEY PICNIC/KAREN ROTZ			1410	DAI	ILAK		
Mailing Address P.O. BOX 51			3	14	2005	\$	35.00
City DRY RUN	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	17220	AD FOR PATH VALLEY PICNIC AD BOOK				
To Whom Paid			мо	DAY	YEAR		
NEWPORT HIGH SCHOOL MUSICAL			МО	DAT	TEAR		
Mailing Address RD #3			3	24	2005	\$	20.00
City NEWPORT	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	17074	AD FOR IN HIGH SCHOOL MUSICAL BOOK				
To Whom Paid				DAY	YEAR		
LANDISBURG LOYSVILLE YOUTH SOFTBALL ASSOC.			МО		ILAK		
Mailing Address 117 BELLS HILL ROAD			3	26	2005	\$	50.00
City LANDISBURG	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	17040	SPONSOR BASKET FOR FUNDRAISER				
To Whom Paid				DAY	YEAR		
PERRY COUNTY SPORTSMEN FOR YOUTH			МО		ILAK		
Mailing Address 781 MONTOUR ROAD			3	26	2005	\$	100.00
City LOYSVILLE	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	17047	AD				
						PAGE TOTAL	
Enter Grand Total of Expendit	ures on Page 1, Re	port Cover Page, Item D	•			\$	1,652.32