Campaign Finance Report

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

					1		CANDI	DATE	1					BYIST	
Filer Identificat	ion 60	836			Repo Filed		CANDI	DATE	~	CC	OMMITTE		LUBI	51151	
Name of Filing (Committee, Cand	idate or L	obbyist:		HAERT	SCH,	JULIE V								
Street Address:															
City:							State:				Zip Cod	e:			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. X	2ND FRIE PRIMARY		- 2.	30 D/ PRIM		POST- 3.		AMENDMENT REPORT?		Yes	No	\checkmark	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIE		E- 5.	30 D/ ELEC		POST-	6.		TERMINA REPORT?	TION	Yes	No	\checkmark
report type)	ANNUAL REPOP						NG METHO CHECK O				PAPER		\checkmark	DISKE	TTE
Name of Office S	Sought by Candi	date:					DATE O	FELE	CTION		District Number	Office Code	Par	ty Code	County Code
REPRESENTAT	IVE IN THE GEN	FRAI ASS	SEMBLY				мо	DAY	YEA	R	92	STH	REP	•	67
							11		7 2	2006		(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAF			мо	DAY	YEA	R	FO	R OFFIC	E USE	ONLY	
Expenditures	s from:		1	1	1	ГО	3		27 2	2006					
A. Amount Bro	ought Forward Fr	om Last F	Report			\$				0.00					
B. Total Monet	ary Contribution	s And Red	eipts (Fro	om Sche	edule I)	\$	\$ 0.00								
C. Total Funds	Available (Sum	Of Lines A	and B)			\$				0.00					
D. Total Expen	ditures (From S	chedule II	II)			\$			2,542	2.40					
E. Ending Cash	Balance (Subtra	act Line D	From Lin	e C)		\$			(2,542	.40)					
F. Value Of In-	Kind Contributio	ons Receiv	ed (From	Schedu	le II)	\$			(0.00					
G. Unpaid Deb	ts And Obligatio	ns (From	Schedule	IV)		\$			(0.00					
				AFF	IDAV	IT SE	CTION								
PART I - If this i	s a Committee r	eport, trea	asurer sig	n here.	If this i	s a Ca	ndidate re	eport, o	candida	te sig	gn here.				
I swear (or affirm correct and compl) that this report, i ete.	ncluding th	e attached	schedule	s filed or	n paper	or by elect	ronic m	edium, a	re to f	the best of	my know	vledge	and beli	ef , true
Sworn to and subs	scribed before me t dav of	his							Sig	nature	e of Person	Submitt	ing Rep	oort	
						_					Drint	ed Name			
M. Commission F	Signa	ture				_									
My Commission E	MO	D	AY	YR		_		Ar	ea Code		Emai	e Telepho	one Nu	mber	
Part II- If this is						Candid	ato chall								
) that to the best o							-		provis	ions of the	act of Ju	ine 3,1	937 (P.L	. 1333,
Sworn to and subso	cribed before me th	is								s	ignature o	f Candida	ite		
	day of					_					D	d New -			
	Signatur	'e				_		Printed Name							
My Commission Exp	-	-						Email							
	мо	D	AY	YF	ł	_		Area	Code		Da	ytime Te	elephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** HAERTSCH, JULIE V From: To: <u>3/27/2006</u> 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)** 0.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 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 \$ 0.00 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				Period			
			From:		То	:	
		·		DATE			AMOUNT
Full Name of Contributing Con	nmittee		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

\$

PAGE 3

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				
			Fro	m:		Тс):		
					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 S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	2.		\$	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 Candid	Name of Filing Committee or Candidate			Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committe	e			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C on S	chedule I, Detai	led Summary Pa	age, Sectio	n 3.			\$	0.00

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			Report	ing Perio	od				
			From:			То:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$		0.00
City	State	Zip Code (Plus 4)						
Receipt Description	•						-		
Enter Grand Total of Part E on Schedu	ule T. Detailed Summ	nary Page	Section	4				PAGE TO	ſAL
		iiai y i uge,	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 Period		
HAERTSCH, JULIE V	From:	То:	<u>3/27/2006</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	T F)		
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 Period					
F						То:			
				DATE		АМС	DUNT		
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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL		
					4	5	0.00		

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

Name of Filing Committee or Candidate				Rej	porting P	eriod				
					From: To:					
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address								\$	0.00	
City	State		Zip Code(Plus 4)						
Employer of Contributor	Employer of Contributor					Occupat	tion			
Employer Mailing Address/Principal Place of City State					Zip 4)	Code(Plus	Descri	ption of	Contribution	

		1		
Enter Grand Total of Part G on Schedule I	I. In-Kind Contril	butions Detail	ed	PAGE TOTAL
Summary Page, Section 3.	_,			0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee o	or Candidate		Reporti	ng Period				
HAERTSCH, JULIE V			From			То:	<u>3/27/2006</u>	
				DATE			AMOUNT	
To Whom Paid OFFICE MAX			мо	DAY	YEAR			
Mailing Address 2435 EA	ST MARKET STREET		2	17	2006	\$	26.37	
City YORK	State PA	Zip Code (Plus 4) 17402		Description of Expenditure SUPPLIES				
To Whom Paid PNC BANK			мо	DAY	YEAR			
Mailing Address RTE 283 & EISENHOWER BLVD.			3	1	2006	\$	14.04	
CityHARRISBURGStateZip Code (Plus 4)PA17100			Descrip STAMP	ition of Ex S	penditure	1		
To Whom Paid YORK COUNTY			мо	DAY	YEAR			
Mailing Address ONE MA	RKET WAY		3	3	2006	\$	0.25	
City YORK	State PA	Zip Code (Plus 4) 17400	Descrip MAP	tion of Exp	penditure			
To Whom Paid MAIL BOXES ETC.			мо	DAY	YEAR			
Mailing Address 185 NEV	VBERRY COMMONS		3	4	2006	\$	185.50	
City ETTERS	State PA	Zip Code (Plus 4) 17319		cOPIES	penditure			
To Whom Paid MAIL BOXES ETC.			мо	DAY	YEAR			
Mailing Address 185 NEV	Mailing Address 185 NEWBERRY COMMONS			6	2006	\$	3.18	
City ETTERS	State PA	Zip Code (Plus 4) 17319	Descrip COPIES	otion of Ex	penditure			

To Whom Paid WALNUT STREET PARKING				мо	DAY	YEAR			
Mailing Address WALNUT STREET PARKING GARAGE			3	6	2006	\$	5.00		
City HARRISBUR	RG	State	Zip Code (Plus 4)	Descrip	tion of Exp	l Denditure			
		РА	17019	PARKIN	IG				
To Whom Paid COMMONWEALTH OF PA				мо	DAY	YEAR			
Mailing Address 210 NORTH OFFICE BUILDING			3	6	2006	\$	100.00		
City HARRISBUR	RG	Zip Code (Plus 4)	Description of Expenditure						
		РА	171200721	FILING FEES					
To Whom Paid YORK CITY PARKING BUREAU				мо	DAY	YEAR			
Mailing Address PHILADELPHIA STREET GARAGE			3	7	2006	\$	7.50		
City YORK	State Zip Code (Plus 4)			Description of Expenditure					
PA 17400				PARKING					
To Whom Paid STAPLES		I	1	мо	DAY	YEAR			
STAPLES	5850 CARLISLE PIK	E	<u> </u>	мо 3	DAY 8	YEAR 2006	\$	54.86	
STAPLES		E	Zip Code (Plus 4)	3		2006		54.86	
STAPLES Mailing Address		1	Zip Code (Plus 4) 17055	3 Descrip	8	2006 Denditure		54.86	
STAPLES Mailing Address		State		3 Descrip	8 Dition of Exp	2006 Denditure		54.86	
STAPLES Mailing Address City MECHANICS To Whom Paid STAPLES Mailing Address		State PA		3 Descrip SUPPLI	8 btion of Exp ES/PRINTI	2006 Denditure		201.55	
STAPLES Mailing Address City MECHANICS To Whom Paid STAPLES Mailing Address	SBURG 5850 CARLISLE PIK	State PA		3 Descrip SUPPLI MO 3	8 btion of Exp ES/PRINTI DAY	2006 Penditure NG YEAR 2006	\$		
STAPLES Mailing Address City MECHANICS To Whom Paid STAPLES Mailing Address	SBURG 5850 CARLISLE PIK	State PA E	17055	3 Descrip SUPPLI MO 3 Descrip	8 btion of Exp ES/PRINTI DAY 9	2006 Denditure NG YEAR 2006	\$		
STAPLES Mailing Address City MECHANICS To Whom Paid STAPLES Mailing Address	SBURG 5850 CARLISLE PIK SBURG	State PA E State	17055	3 Descrip SUPPLI MO 3 Descrip	8 htion of Exp ES/PRINTI DAY 9 htion of Exp	2006 Denditure NG YEAR 2006	\$		
STAPLES Mailing Address City MECHANICS To Whom Paid STAPLES Mailing Address City MECHANICS To Whom Paid BLUE RIDGE COMM	SBURG 5850 CARLISLE PIK SBURG	State PA E State PA	17055	3 Descrip SUPPLI MO 3 Descrip SUPPLI	8 btion of Exp ES/PRINTI DAY 9 btion of Exp ES/PRINTI	2006 Denditure ING YEAR 2006 Denditure	\$		
STAPLES Mailing Address City MECHANICS To Whom Paid STAPLES Mailing Address City MECHANICS To Whom Paid BLUE RIDGE COMM	SBURG 5850 CARLISLE PIK SBURG 1UNICATIONS 2800 LEWISBERRY 1	State PA E State PA	17055	3 Descrip SUPPLI MO 3 Descrip SUPPLI MO 3	8 btion of Exp ES/PRINTI DAY 9 btion of Exp ES/PRINTI DAY	2006 Cenditure NG 2006 Cenditure NG YEAR 2006	\$	201.55	

						PA	JE 13
To Whom Paid HUGGINS PRINTING CO	мо	DAY	YEAR				
Mailing Address 2900 SYCAMORE ST			3	14	2006	\$	340.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17111	Description of Expenditure T-SHIRTS				
To Whom Paid HUGGINS PRINTING CO			мо	DAY	YEAR		
Mailing Address 2900 SYCAMORE ST			3	14	2006	\$	15.25
City HARRISBURG	State PA	Zip Code (Plus 4) 17111		Description of Expenditure			
To Whom Paid HUGGINS PRINTING CO			мо	DAY	YEAR		
Mailing Address 2900 SYCAMORE ST			3	3	2006	\$	972.50
City HARRISBURG	State PA	Zip Code (Plus 4) 17111	Description of Expenditure COIN PURSES				
To Whom Paid YORK CITY PARKING BUREAU			мо	DAY	YEAR		
Mailing Address PHILADELPHIA STREET GARAGE			3	21	2006	\$	7.50
City YORK	State PA	Zip Code (Plus 4) 17400	Description of Expenditure PARKING				
To Whom Paid OFFICE DEPOT			мо	DAY	YEAR		
Mailing Address 351 LOUCKS ROAD			3	3	2006	\$	15.90
City YORK	State PA	Zip Code (Plus 4) 17404	Description of Expenditure OFFICE SUPPLIES				
To Whom Paid MAIL BOXES ETC			мо	DAY	YEAR		
Mailing Address 185 NEWBERRY COMMONS			2	22	2006	\$	3.00
City ETTERS	State PA	Zip Code (Plus 4) 17319	Descri p FAX	tion of Exp	benditure		

To Whom Paid WIX, WENGER & WEIDNER			мо	DAY	YEAR		
Mailing Address 508 NORTH SECOND ST PO BOX 845			3	15	2006	\$	500.00
City HARRISBURG	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	17108	RETAINER/PETITION CHALLENGED (NOT YET BILLED FOR WORK)				D (NOT YET
							PAGE TOTAL
Enter Grand Total of Expenditure	es on Page 1, R	eport Cover Page, Item D.				\$	2,542.40