### **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	8015	5				port ed B		CAN	ANDIDATE COMMITTEE LOBBYIST									
Name of Filing C	ommitte	e, Candida	ate or Lo	obbyist:		Kell	ler, I	Mark					•						
Street Address:																			
City:									State:					Zip Code	e:				
TYPE OF REPORT	6TH TUES		1.	2ND FRIDA PRIMARY	Y PRE	; <b>-</b>	2.	30 DA PRIMA		Р	OST-	3.		AMENDME REPORT?	NT	Yes	No	)	<b>\</b>
(place X to the right of	6TH TUES		4.	2ND FRIDATELECTION	y pri	E-	5.	30 DA ELECT		Р	OST-	6. 3	X	TERMINATION Yes REPORT?				)	<b>√</b>
report type)	ANNUAL	. REPORT	7.	<b>Year</b> 2008					IG MET					PAPER					
Name of Office S	ought by	, Candidat	e:						DATE	0	F ELEC	СТІ	ON	District					
									MO DAY YEAR 86 STH REP							50			
REPRESENTATI	VE IN TH	ie gener	AL ASS	EMBLY						11		4	2008		CODES	)			
Summary of		s and	МО	DAY	YEAR	2			МО		DAY	1	YEAR	FOF	OFFIC	E USE	ONLY		
Expenditures	from:			1 1	2	008	Т	0		11	2	24	2008						
A. Amount Bro	ught Forv	ward From	ı Last R	eport				\$					0.00						
B. Total Monet	ary Contr	ibutions A	and Rec	eipts (From	Sche	dule	e I)	\$					0.00						
C. Total Funds Available (Sum Of Lines A and B) \$ 0.00																			
D. Total Expend	ditures (I	From Sche	dule II	I)				\$					0.00						
E. Ending Cash	Balance	(Subtract	Line D	From Line (	C)			\$					0.00						
F. Value Of In-	Kind Con	tributions	Receive	ed (From S	chedu	le I	I)	\$					0.00						
G. Unpaid Debt	s And Ob	ligations	(From S	Schedule IV	)			\$					0.00		'				
					AFF	ID	AVI	T SE	CTIO	N									
PART I - If this is	s a Comm	nittee repo	ort, trea	surer sign	here.	If th	nis is	a Can	didate	re	port, c	and	didate sig	n here.					
I swear (or affirm) correct and comple		report, incl	uding the	attached scl	hedule	s file	d on	paper (	or by el	ectr	onic me	ediu	m, are to t	the best of	my know	/ledge	and beli	ef , tr	ue.
Sworn to and subs	cribed bef	ore me this		20									Signature	of Person	Submitti	ing Rep	ort		_
	_	Signatur	·e					- -						Printe	ed Name				-
My Commission Ex	cpires									•				Email					_
		МО	D/	AY	YR						Are	a Co	ode	Daytime	Telepho	one Nu	mber		
Part II- If this is	a report	of a cand	idate's	authorized	Comn	nitte	ee, C	andida	ate sh	all s	sign he	ere.							
I swear (or affirm) No 320) as amende		ne best of m	y knowle	edge and beli	ef this	poli	tical	commi	ittee ha	s no	ot violat	ed a	any provis	ions of the	act of Ju	ne 3,1	937 (P.L	133	3,
Sworn to and subsc		re me this											s	ignature of	Candida	te			-
	day of —							-						Printed	Name				-
		Signature						-											_
My Commission Exp	ires													Email					
	_	МО	D	AY	YR	ł		-			Area	Code	e	Day	time Te	lephon	e Numb	er	-

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

, -								
Name of Filing Committee or Candidate	Reporting Period							
Keller, Mark	From:	1/1/200	<u>8</u> To:	11/24/2008				
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 an 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

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 C	Name of Filing Committee or Candidate			Reporting Period							
		Fi	rom:		То	•					
		•		DATE			AMOUNT				
Full Name of Contributing Comm	ittee		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.

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.

(Exclu	de contributions fron	n political comm	itte	es re <sub>l</sub>	oortea	in Part	A)	
Name of Filing Committe	ee or Candidate		Rep	orting P	eriod			
			From: To:					
		1			DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.0
City	State	Zip Code (Plus 4)						
	•	•			•	•		PAGE TOTAL

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

9/14/2025 3:43:13 PM

#### **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	ame of Filing Committee or Candidate			Reporting Period							
			From:			То:					
				DA	TE		A	MOUNT			
Full Name of Contributing Committee				мо	DAY	YEAR			0.00		
Mailing Address							<b>-</b>   \$		0.00		
City	State	Zip Cod	e (Plus 4)								
								PAGE TOT	AL		
Enter Grand Total of Part C on School	dule 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 Candidate				Reporting Period						
	F						т	То:		
					D	DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR		\$	0.00
Mailing Address										
City	State	Zip	Code (Plus	4)						
Employer Name					Occupation					
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip	Code (Plus 4	)
Enter Grand Total of Part C on Sche	dule I, Detailed Sເ	umm	ary Page,	Section	on 3.			\$	PAGE TOTA	<b>AL</b> 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 Peri	od				
			From: To:				D:		
		<b>'</b>			ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$	0.00	
Mailing Address							7		
City	State	Zip Code (P	Plus 4)						
Receipt Description	<b>'</b>	1					<u> </u>		
	- C		<b>.</b> .:	_				PAGE TOTAL	
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	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	From:	<u>1/1/2008</u> <b>To:</b>	11/24/2008
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		Reporting Period					
						То:		
				DATE			AMOUNT	
Full Name of Contributor				DAY	YEAR			
Mailing Address						<b>7</b> \$	0.00	
City	State	Zip Code (Plus 4)						
Description of Contribution:	•		•	•	•			
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Det				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	Name of Filing Committee or Candidate				porting	Period				
	From:						То:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	Mailing Address/Principal Place of Business City State Zip Code(Plus 4) Description of C					ion of Contribu	tion			
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate					Reporting Period				
	From			То:						
				DATE			AMOUNT			
To Whom Paid	мо	DAY	YEAR							
Mailing Address						\$	0.00			
City	State	Zip Code (Plus 4)	Description of Expenditure							
Enter Grand Total of Expenditures of					PAGE TOTAL					
Lines Grand Total Of Expenditures of	ni rage 1, kepoit C	over rage, Item L	<b>,</b> .			\$	0.00			