

# Campaign Finance Report

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

<b>Filer Identification Number :</b>		2010054		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>		
<b>Name of Filing Committee, Candidate or Lobbyist:</b> HAHN, MARCIA FRIENDS OF												
<b>Street Address:</b> 136 E. NORTHAMPTON ST												
<b>City:</b> BATH						<b>State:</b> PA			<b>Zip Code:</b> 18014			
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4. X	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2010	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>				
<b>Name of Office Sought by Candidate:</b>						<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
REPRESENTATIVE IN THE GENERAL ASSEMBLY						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	STH	REP	48	
						11	2	2010	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
		1	1	2010		9	13	2010				
<b>A. Amount Brought Forward From Last Report</b>						\$		4,324.62				
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$		6,165.00				
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$		10,489.62				
<b>D. Total Expenditures (From Schedule III)</b>						\$		8,451.95				
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$		2,037.67				
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$		0.00				
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$		4,776.74				

## AFFIDAVIT SECTION

**PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.**

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.**

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
Detailed Summary Page

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
HAHN, MARCIA FRIENDS OF	From: <u>1/1/2010</u> To: <u>9/13/2010</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 265.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 2,350.00
<b>All Other Contributions (Part B)</b>	\$ 1,350.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 3,700.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 2,200.00
<b>All Other Contributions (Part D)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 2,200.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)</b>	\$ 6,165.00
---	-------------

# 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.**

<b>Name of Filing Committee or Candidate</b>				<b>Reporting Period</b>			
HAHN, MARCIA FRIENDS OF				From: <u>1/1/2010</u> To: <u>9/13/2010</u>			
				<b>DATE</b>		<b>AMOUNT</b>	

  

<b>Full Name of Contributing Committee</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
BIKEPAC			6	25	2010	
<b>Mailing Address</b>	P.O. BOX 564					
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>				
MECHANICSBURG	PA	17055				

  

<b>Full Name of Contributing Committee</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
CHAMBER PAC			7	14	2010	
<b>Mailing Address</b>						
417 WALNUT STREET						
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>				
HARRISBURG	PA	17101-190				

  

<b>Full Name of Contributing Committee</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
CPA PAC			6	26	2010	
<b>Mailing Address</b>						
500 N. THIRD STREET STE. 600A						
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>				
HARRISBURG	PA	17101				

  

<b>Full Name of Contributing Committee</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
FIRST ENERGY PAC			7	7	2010	
<b>Mailing Address</b>						
800 N. THIRD STREET STE. 100						
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>				
HARRISBURG	PA	17102				

  

<b>Full Name of Contributing Committee</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
HIGHMARK HEALTH PAC			7	7	2010	
<b>Mailing Address</b>						
1800 CENTER STREET P.O. BOX 890089						
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>				
CAMP HILL	PA	17089				

<b>Full Name of Contributing Committee</b> PA BANKERS PUBLIC AFFAIRS COMMITTEE			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> P.O. BOX 345			6	26	2010	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17108				
<b>Full Name of Contributing Committee</b> PA MEDICAL PAC (PAM PAC)			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> P.O. BOX 8820			7	7	2010	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17105				
<b>Full Name of Contributing Committee</b> PA OPTOMETRIC PAC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 218 NORTH STREET			6	26	2010	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101				
<b>Full Name of Contributing Committee</b> PFRW PAC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b> 214 PINE ST.			9	10	2010	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101				
<b>Full Name of Contributing Committee</b> VERIZON COMMUNICATIONS INC. GOOD GOVERNMENT CLUB-PA			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 303 WALNUT ST. 12TH FLOOR			6	26	2010	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101				

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

<b>PAGE TOTAL</b>
\$ 2,350.00

**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.  
(Exclude contributions from political committees reported in Part A)**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
HAHN, MARCIA FRIENDS OF	From: <u>1/1/2010</u> To: <u>9/13/2010</u>

<b>DATE</b>	<b>AMOUNT</b>
-------------	---------------

Full Name of Contributor			MO	DAY	YEAR	\$250.00
J M ULIANA & ASSOCIATES, LLC						
Mailing Address2571 BAGLYOS CIRCLE B20			7	7	2010	
CityBETHLEHEM	StatePA	Zip Code (Plus 4)18020				

Full Name of Contributor BRYAN M. GAULT			MO	DAY	YEAR	\$ 100.00
Mailing Address 1422 PRINCETON COURT			6	26	2010	
City ALLENTOWN	State PA	Zip Code (Plus 4) 18104				

Full Name of Contributor DENNIS & FRANCES GETZ				MO	DAY	YEAR	\$ 200.00
Mailing Address 1228 THIRD STREET				7	7	2010	
City CATASAUQUA	State PA	Zip Code (Plus 4) 18032					

Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
EDWARD J. GOODIN							
Mailing Address 7692 TANGLEWOOD ROAD				6	26	2010	
City NORTHAMPTON		State PA	Zip Code (Plus 4) 18067				

Full Name of Contributor LINDA PERIN			MO	DAY	YEAR	\$ 200.00
Mailing Address 1225 RONE DRIVE			6	26	2010	
City WIND GAP	State PA	Zip Code (Plus 4) 18091				

Full Name of Contributor JOSEPH RAIMO			MO	DAY	YEAR	\$ 200.00
Mailing Address P.O. BOX 17			6	26	2010	
City WIND GAP	State PA	Zip Code (Plus 4) 18091				

Full Name of Contributor CRAIG REYNOLDS			MO	DAY	YEAR	\$ 200.00
Mailing Address 8629 CASCADE ROAD			7	14	2010	
City BREINIGSVILLE	State PA	Zip Code (Plus 4) 18031-156				

Full Name of Contributor MEHMET & INTSAFKA ZIMMER			MO	DAY	YEAR	\$ 100.00
Mailing Address 230 W. MOORESTOWN ROAD			7	7	2010	
City WIND GAP	State PA	Zip Code (Plus 4) 18091				

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

**PAGE TOTAL**

\$ 1,350.00

# 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.**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
HAHN, MARCIA FRIENDS OF	<b>From:</b> <u>1/1/2010</u> <b>To:</b> <u>9/13/2010</u>

				DATE		AMOUNT	
Full Name of Contributing Committee CITIZENS FOR STAN SAYLOR				MO	DAY	YEAR	\$ 300.00
Mailing Address     BATH, PA				6	25	2010	
City     BATH	State PA	Zip Code (Plus 4) 18014					
Full Name of Contributing Committee GEIST FOR ASSEMBLY				MO	DAY	YEAR	\$ 500.00
Mailing Address     1100 27TH AVENUE				6	26	2010	
City     ALTOONA	State PA	Zip Code (Plus 4) 16601					
Full Name of Contributing Committee GIANT CEMENT HOLDING, INC.				MO	DAY	YEAR	\$ 400.00
Mailing Address     PAC ACCOUNT   P.O. BOX 52229				7	7	2010	
City     SUMMERVILLE	State SC	Zip Code (Plus 4) 29485					
Full Name of Contributing Committee PA FUTURE FUND PAC				MO	DAY	YEAR	\$ 500.00
Mailing Address     P.O. BOX 5028				7	7	2010	
City     HARRIBSURG	State PA	Zip Code (Plus 4) 17110					
Full Name of Contributing Committee PPL PEOPLE FOR GOOD GOVERNMENT				MO	DAY	YEAR	\$ 500.00
Mailing Address     2 NORTH NINTH STREET				6	26	2010	
City     ALLENTOWN	State PA	Zip Code (Plus 4) 18101-117					

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

**PAGE TOTAL**

\$ 2,200.00



**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: <span style="float: right;">To:</span>

				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)		

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

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
HAHN, MARCIA FRIENDS OF		From: <u>1/1/2010</u> To: <u>9/13/2010</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)		\$	0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)		\$	0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period (3)		\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)		\$	0.00

SCHEDULE II  
PART F  
**IN-KIND CONTRIBUTIONS RECEIVED**  
VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	Reporting Period	
	From:	To:

			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						PAGE TOTAL \$ 0.00

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

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
HAHN, MARCIA FRIENDS OF	From <u>1/1/2010</u> To: <u>9/13/2010</u>

DATE				AMOUNT		
To Whom Paid THE HOME NEWS			MO	DAY	YEAR	\$ 391.00
Mailing Address PO BOX 39			6	25	2010	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure CAMPAIGN AD			
To Whom Paid MARCIA HAHN			MO	DAY	YEAR	\$ 154.00
Mailing Address 136 E. NORTHAMPTON STREET			6	26	2010	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure REIMBURSE-POSTAGE			
To Whom Paid BATH CHEMICAL, ENGINE & HOSE CO. #1, INC.			MO	DAY	YEAR	\$ 381.00
Mailing Address 135 S. WALNUT STREET			6	26	2010	
City BATH	State PA	Zip Code (Plus 4) 18014	Description of Expenditure ELECTION NIGHT			
To Whom Paid BLUE VALLEY TIMES			MO	DAY	YEAR	\$ 700.00
Mailing Address 900 NORTH MAIN STREET			6	26	2010	
City BANGOR	State PA	Zip Code (Plus 4) 18013	Description of Expenditure CAMPAIGN AD			
To Whom Paid BEST WESTERN LEHIGH VALLEY HOTEL			MO	DAY	YEAR	\$ 131.35
Mailing Address 300 GATEWAY DRIVE			6	28	2010	
City BETHLEHEM	State PA	Zip Code (Plus 4) 18017	Description of Expenditure FUND RAISER BREAKFAST			

<b>To Whom Paid</b> COMMUNITY BUSINESS NETWORK, LTD.			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 275.00
<b>Mailing Address</b> 601 W. MARKET STREET SUITE 100			7	14	2010	
<b>City</b> PERKASIE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18944	<b>Description of Expenditure</b> ADVERTISING			

  

<b>To Whom Paid</b> HILTON HARRISBURG			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 540.50
<b>Mailing Address</b> ONE NORTH SECOND STREET			7	14	2010	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101	<b>Description of Expenditure</b> FUND RAISER BREAKFAST			

  

<b>To Whom Paid</b> WAVELENGTH COMMUNICATIONS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 5,778.00
<b>Mailing Address</b> 123 N. 3RD STREET 3RD FL			7	14	2010	
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19106	<b>Description of Expenditure</b> CAMPAIGN MAILINGS			

  

<b>To Whom Paid</b> MARCIA HAHN			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 101.10
<b>Mailing Address</b> 136 E. NORTHAMPTON STREET			8	2	2010	
<b>City</b> BATH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18014	<b>Description of Expenditure</b> REIMBURSE-POSTAGE			

  

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 8,451.95

**SCHEDULE IV**

**STATEMENT OF UNPAID DEBTS**

**Use this Section to itemize all unpaid debts and obligations  
which are outstanding at the end of the reporting period**

<b>Name of Filing Committee or Candidate</b>  HAHN, MARCIA FRIENDS OF				<b>Reporting Period</b>  From: <u>1/1/2010</u> To: <u>9/13/2010</u>			
							<b>Outstanding Balance of Debt</b>
				<b>DATE</b>			
<b>Name of Creditor</b> MARCIA HAHN				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 136 E. NORTHAMPTON ST.				5	10	2010	\$ 4,776.74
<b>City</b> BATH	<b>State</b> PA		<b>Zip Code (Plus 4)</b> 18014		<b>Description of Debt</b> REIMBURSEMENTS		
<b>Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.</b>							<b>PAGE TOTAL</b>  \$ 4,776.74