

## Commonwealth of Pennsylvania - Campaign Finance Report

(Note: This report must be clear and legible. It should be typed)

Filer Identification Number		Report Filed By (Mark X)		Candidate	Committee	<input checked="" type="checkbox"/>	Lobbyist	<input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist		Friends of Jeff Haste						
Street Address		220 Hetrick Ln.						
City	Harrisburg	State	PA	Zip Code	17112			
Type of Report (Place x under report type)								
1- 6 <sup>th</sup> Tuesday Pre-Primary	2- 2 <sup>nd</sup> Friday Pre-Primary	3- 30 Day Post Primary	4- 6 <sup>th</sup> Tuesday Pre-Election	5- 2 <sup>nd</sup> Friday Pre-Election	6- 30 Day Post Election	7- Annual	Special 2 <sup>nd</sup> Friday Pre-Election	Special 30 Day Post-Election
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date Of Election (MM/DD/YYYY)		11/3/15	Year	2015	Amendment Report	<input type="checkbox"/>	Termination Report	<input type="checkbox"/>
Summary of Receipts and Expenditures		From Date	To Date	For Office Use Only				
		06/09/2015	10/19/2015					
A. Amount Brought Forward From Last Report		\$	7,059.65					
B. Total Monetary Contributions and Receipts (From Schedule I)		\$	5,000.00					
C. Total Funds Available (Sum of Lines A and B)		\$	12,059.65					
D. Total Expenditures (From Schedule III)		\$	4,062.12					
E. Ending Cash Balance (Subtract Line D from Line C)		\$	7,997.53					
F. Value of In-Kind Contributions Received (From Schedule II)		\$	0					
G. Unpaid Debts and Obligations (From Schedule IV)		\$	0					
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 on paper, is to the best of my knowledge and belief true, correct and complete.								
Sworn to and subscribed before me this								
23 day of October 2015		K. Bowman						
Richie A. Martz		Kathleen Bowman						
Signature		Printed Name						
My Commission expires		585-3084						
MO.		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								
23 day of October 2015		Jeff Haste						
Kathleen Bowman		Jeff Haste						
Signature		Printed Name						
My Commission expires		979-2643						
MO.		Daytime Telephone Number						
NOTARIAL SEAL		717						
RICHIE A. MARTZ, Notary Public		Area Code						
City of Harrisburg, Dauphin County		Daytime Telephone Number						
My Commission Expires May 13, 2019								
NOTARIAL SEAL		717						
Kathleen A. Bowman, Notary Public		Area Code						
City of Harrisburg, Dauphin County		Daytime Telephone Number						
My Commission Expires June 01, 2019								

SCHEDULE I  
**Contributions and Receipts**  
Detailed Summary Page

<b>Filer Identification Number</b>	Friends of Jeff Haste		
<b>1. Unitemized Contributions and Receipts-\$50.00 or Less per Contributor</b>			
Total for the reporting period		(1)	\$ 0
<b>2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)</b>			
Contributions Received from Political Committees (Part A)			\$ 0
All Other Contributions (Part B)			\$ 0
Total for the reporting period		(2)	\$ 0
<b>3. Contributions Over \$250.00 (From Part C and Part D)</b>			
Contributions Received from Political Committees (Part C)			\$ 5,000.00
All Other Contributions (Part D)			\$ 0
Total for the reporting period		(3)	\$ 5,000.00
<b>4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)</b>			
Total for the reporting period		(4)	\$ 0
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 Page 1, Report Cover Page, Item B)			\$ 5,000.00

## 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 over \$250.00 in the reporting period.

Filer Identification Number:	Friends of Jeff Haste
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Full Name of Contributing Committee	Friends of Haste & Pries			Date [MM/DD/YYYY]	07/29/2015	\$	5,000.00
House #		Street Address	P.O. Box 7365	Date [MM/DD/YYYY]		\$	
City	Steelton	State	PA	Zip Code	17113	Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee				Date [MM/DD/YYYY]		\$	
House #		Street Address		Date [MM/DD/YYYY]		\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee				Date [MM/DD/YYYY]		\$	
House #		Street Address		Date [MM/DD/YYYY]		\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee				Date [MM/DD/YYYY]		\$	
House #		Street Address		Date [MM/DD/YYYY]		\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee				Date [MM/DD/YYYY]		\$	
House #		Street Address		Date [MM/DD/YYYY]		\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee				Date [MM/DD/YYYY]		\$	
House #		Street Address		Date [MM/DD/YYYY]		\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee				Date [MM/DD/YYYY]		\$	
House #		Street Address		Date [MM/DD/YYYY]		\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$

## SCHEDULE III

## Statement of Expenditures

Filer Identification Number:

Friends of Jeff Haste

To Whom Paid		Harrisburg Hilton		Date [MM/DD/YYYY]	09/14/2015	\$	60.00
House #	1	Street Address		N 2nd St.		Description of Expenditure	
City	Harrisburg	State	PA	Zip Code	17101	Business Meeting	
To Whom Paid		AT & T		Date [MM/DD/YYYY]	08/26/2015	\$	490.77
House #	100	Street Address		S. 32nd St.		Description of Expenditure	
City	Camp Hill	State	PA	Zip Code	17011	Phone Expense	
To Whom Paid		AT & T		Date [MM/DD/YYYY]	07/27/15	\$	265.34
House #	100	Street Address		S. 32nd St.		Description of Expenditure	
City	Camp Hill	State	PA	Zip Code	17011	Phone Expense	
To Whom Paid		AT & T		Date [MM/DD/YYYY]	06/15/2015	\$	259.89
House #	100	Street Address		S. 32nd St.		Description of Expenditure	
City	Camp Hill	State	PA	Zip Code	17011	Phone Expense	
To Whom Paid		AT & T		Date [MM/DD/YYYY]	09/22/2015	\$	235.90
House #	100	Street Address		S. 32nd St.		Description of Expenditure	
City	Camp Hill	State	PA	Zip Code	17011	Phone Expense	
To Whom Paid		Harrisburg Hilton		Date [MM/DD/YYYY]	06/09/2015	\$	251.22
House #	1	Street Address		N. 2nd St.		Description of Expenditure	
City	Harrisburg	State	PA	Zip Code	17101	Business Meeting	
To Whom Paid		Hilton Harrisburg		Date [MM/DD/YYYY]	07/13/2015	\$	47.00
House #	1	Street Address		N. 2nd St.		Description of Expenditure	
City	Harrisburg	State	PA	Zip Code	17101	Business Meeting	
To Whom Paid		Harrisburg Hilton		Date [MM/DD/YYYY]	08/10/2015	\$	77.00
House #	1	Street Address		N. 2nd St.		Description of Expenditure	
City	Harrisburg	State	PA	Zip Code	17101	Business Meeting	

## SCHEDULE III

## Statement of Expenditures

Filer Identification Number:

Friends of Jeff Haste

To Whom Paid	Friends of Fort Hunter				Date [MM/DD/YYYY]	\$	300.00
House #	5300	Street Address	N. Front St.		Description of Expenditure		
City	Harrisburg	State	PA	Zip Code	17110	Donation	
To Whom Paid	Jeff Haste				Date [MM/DD/YYYY]	\$	1,000.00
House #	220	Street Address	Hetrick Ln.		Description of Expenditure		
City	Harrisburg	State	PA	Zip Code	17112	Reimbursement	
To Whom Paid	Jeff Haste				Date [MM/DD/YYYY]	\$	300.00
House #	220	Street Address	Hetrick Ln.		Description of Expenditure		
City	Harrisburg	State	PA	Zip Code	17112	reimbursement	
To Whom Paid	Jeff Haste				Date [MM/DD/YYYY]	\$	650.00
House #	220	Street Address	Hetrick Ln.		Description of Expenditure		
City	Harrisburg	State	PA	Zip Code	17112	reimbursement	
To Whom Paid	Susquehanna Soccer Club				Date [MM/DD/YYYY]	\$	125.00
House #		Street Address	P.O. Box 60889		Description of Expenditure		
City	Harrisburg	State	PA	Zip Code	17106	Donation	
To Whom Paid					Date [MM/DD/YYYY]	\$	
House #		Street Address			Description of Expenditure		
City		State		Zip Code			
To Whom Paid					Date [MM/DD/YYYY]	\$	
House #		Street Address			Description of Expenditure		
City		State		Zip Code			
To Whom Paid					Date [MM/DD/YYYY]	\$	
House #		Street Address			Description of Expenditure		
City		State		Zip Code			