

Campaign Finance Report

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

Filer Identification Number : 20140264		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST	
Name of Filing Committee, Candidate or Lobbyist: REFORM PA PAC								
Street Address: PO BOX 124								
City: MANCHESTER				State: PA		Zip Code: 17345		
TYPE OF REPORT (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 <input checked="" type="checkbox"/> No <input type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
	ANNUAL REPORT	7. X	Year 2014	FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/>	DISKETTE <input type="checkbox"/>	
Name of Office Sought by Candidate:				DATE OF ELECTION			District Number	
				MO	DAY	YEAR	Office Code	
				11	4	2014	Party Code	
							County Code	
							(SEE INSTRUCTIONS FOR CODES)	
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR
		11	25	2014		12	31	2014
FOR OFFICE USE ONLY								
A. Amount Brought Forward From Last Report				\$ 7,414.27				
B. Total Monetary Contributions And Receipts (From Schedule I)				\$ 48,063.55				
C. Total Funds Available (Sum Of Lines A and B)				\$ 55,477.82				
D. Total Expenditures (From Schedule III)				\$ 49,363.55				
E. Ending Cash Balance (Subtract Line D From Line C)				\$ 6,114.27				
F. Value Of In-Kind Contributions Received (From Schedule II)				\$ 2,147.10				
G. Unpaid Debts And Obligations (From Schedule IV)				\$ 308,036.55				

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

Name of Filing Committee or Candidate	Reporting Period
REFORM PA PAC	From: <u>11/25/2014</u> To: <u>12/31/2014</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)	\$ 0.00
All Other Contributions (Part D)	\$ 48,063.55
TOTAL for the Reporting Period (3)	\$ 48,063.55

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 48,063.55
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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	Reporting Period
	From: To:
<div style="display: flex; justify-content: space-between;"> DATE AMOUNT </div>	

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

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

PAGE TOTAL
\$ 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.
(Exclude contributions from political committees reported in Part A)

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

DATE			AMOUNT
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Full Name of Contributor			MO	DAY	YEAR	\$0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

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

PAGE TOTAL
\$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 Candidate	Reporting Period	
	From:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					

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

PAGE TOTAL
\$ 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 REFORM PA PAC	Reporting Period From: <u>11/25/2014</u> To: <u>12/31/2014</u>
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				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
SCOTT WAGNER							
Mailing Address PO BOX 1627				11	26	2014	\$ 48,063.55
City YORK	State PA	Zip Code (Plus 4) 17405					
Employer Name PENN WASTE				Occupation PRESIDENT			
Employer Mailing Address/Principal Place of Business PO BOX 3066			City YORK	State PA	Zip Code (Plus 4) 17403		

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

PAGE TOTAL
\$ 48,063.55

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	Reporting Period
	From: To:

			DATE		AMOUNT	
Full Name			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Receipt Description						

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 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	
REFORM PA PAC		From: <u>11/25/2014</u> To: <u>12/31/2014</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period (1)		\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period (2)		\$	0.00
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period (3)		\$	2,147.10
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.)		\$	2,147.10

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:
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			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
REFORM PA PAC	From: <u>11/25/2014</u> To: <u>12/31/2014</u>

					DATE		AMOUNT	
Full Name of Contributor SCOTT WAGNER					MO	DAY	YEAR	\$ 1,877.10
Mailing Address PO BOX 1627					11	25	2014	
City YORK		State PA	Zip Code(Plus 4) 17405					
Employer of Contributor PENN WASTE					Occupation PRESIDENT			
Employer Mailing Address/Principal Place of Business PO BOX 3066			City YORK	State PA	Zip Code(Plus 4) 17402		Description of Contribution ELECTION ATTORNEY	

Full Name of Contributor SCOTT WAGNER				MO	DAY	YEAR	\$ 270.00
Mailing Address PO BOX 1627				12	2	2014	
City YORK	State PA	Zip Code(Plus 4) 17405					
Employer of Contributor PENN WASTE				Occupation PRESIDENT			
Employer Mailing Address/Principal Place of Business PO BOX 3066		City YORK	State PA	Zip Code(Plus 4) 17402		Description of Contribution ELECTION ATTORNEY	

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.	PAGE TOTAL 2,147.10
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SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
REFORM PA PAC	From <u>11/25/2014</u> To: <u>12/31/2014</u>

DATE				AMOUNT
To Whom Paid REAM PRINTING	MO	DAY	YEAR	
Mailing Address 515 FARBROOK LANE	11	26	2014	\$ 48,063.55
City YORK	State PA	Zip Code (Plus 4) 17404	Description of Expenditure MAILERS - SD46	
To Whom Paid AMANDA DAVIDSON	MO	DAY	YEAR	
Mailing Address 756 ATLANTIC AVE.	12	1	2014	\$ 500.00
City YORK	State PA	Zip Code (Plus 4) 17404	Description of Expenditure NOVEMBER FEE	
To Whom Paid BMD DESIGN	MO	DAY	YEAR	
Mailing Address 125 SOUTH CAMP ST.	12	1	2014	\$ 800.00
City WINDSOR	State PA	Zip Code (Plus 4) 17366	Description of Expenditure WEBSITE & LOGO DESIGN	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.				PAGE TOTAL \$ 49,363.55

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

Name of Filing Committee or Candidate REFORM PA PAC				Reporting Period From: <u>11/25/2014</u> To: <u>12/31/2014</u>			
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DATE				Outstanding Balance of Debt		
Name of Creditor SCOTT WAGNER			MO	DAY	YEAR	\$ 110,000.00
Mailing Address PO BOX 1627			10	9	2014	
City YORK	State PA	Zip Code (Plus 4) 17405	Description of Debt LOAN FOR TV AND ADS - SD46 RACE			
DATE				Outstanding Balance of Debt		
Name of Creditor SCOTT WAGNER			MO	DAY	YEAR	\$ 75,000.00
Mailing Address PO BOX 1627			10	15	2014	
City YORK	State PA	Zip Code (Plus 4) 17405	Description of Debt LOAN FOR TV AND ADS - SD 46 RACE			
DATE				Outstanding Balance of Debt		
Name of Creditor SCOTT WAGNER			MO	DAY	YEAR	\$ 75,000.00
Mailing Address PO BOX 1627			10	22	2014	
City YORK	State PA	Zip Code (Plus 4) 17405	Description of Debt LOAN FOR TV ADS - SD 46 RACE			
DATE				Outstanding Balance of Debt		
Name of Creditor SCOTT WAGNER			MO	DAY	YEAR	\$ 48,036.55
Mailing Address PO BOX 1627			11	26	2014	
City YORK	State PA	Zip Code (Plus 4) 17405	Description of Debt LOAN FOR MAILERS - SD 46 RACE			

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.	PAGE TOTAL \$ 308,036.55
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