

# 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>		20140264		<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> REFORM PA PAC												
<b>Street Address:</b> PO BOX 124												
<b>City:</b> MANCHESTER						<b>State:</b> PA			<b>Zip Code:</b> 17345			
<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 PRIMARY POST-	3.	AMENDMENT REPORT?	Yes	<input checked="" type="checkbox"/>	No		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.X	30 DAY ELECTION POST-	6.	TERMINATION REPORT?	Yes		No	<input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2014		<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>
						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>				
						11	4	2014				(SEE INSTRUCTIONS FOR CODES)
<b>Summary of Receipts and Expenditures from:</b>				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>					
				9	16	2014	<b>TO</b>	10	20	2014		
<b>A. Amount Brought Forward From Last Report</b>						\$ 0.00						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 445,100.00						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 445,100.00						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 422,185.73						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 22,914.27						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$ 0.00						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$ 185,000.00						

## 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>
REFORM PA PAC	From: <u>9/16/2014</u> To: <u>10/20/2014</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 0.00

<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>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 100.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 100.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 250,000.00
<b>All Other Contributions (Part D)</b>	\$ 195,000.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 445,000.00

<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>	\$ 445,100.00
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

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

<b>Name of Filing Committee or Candidate</b> REFORM PA PAC	<b>Reporting Period</b> <b>From:</b> <u>9/16/2014</u> <b>To:</b> <u>10/20/2014</u>
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				DATE			AMOUNT	
Full Name of Contributor SCOTT WAGNER				MO	DAY	YEAR	\$ 100.00	
Mailing Address PO BOX 1627				8	5	2014		
City YORK		State PA	Zip Code (Plus 4) 17405					

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

<b>PAGE TOTAL</b>
\$ 100.00

## 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>
REFORM PA PAC	<b>From:</b> <u>9/16/2014</u> <b>To:</b> <u>10/20/2014</u>

DATE				AMOUNT
Full Name of Contributing Committee				
STUDENTS FIRST PAC				
Mailing Address				
PO BOX 416				
City	State	Zip Code (Plus 4)		
WYNNEWOOD	PA	19096		
		8	8	2014
				\$ 250,000.00

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

PAGE TOTAL
\$ 250,000.00

**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.)**

<b>Name of Filing Committee or Candidate</b>  REFORM PA PAC	<b>Reporting Period</b>  From: <u>9/16/2014</u> To: <u>10/20/2014</u>
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				DATE			AMOUNT
<b>Full Name of Contributor</b> DAVID BARENSFELD				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 10,000.00
<b>Mailing Address</b> PO BOX 889				9	10	2014	
<b>City</b> ELLWOOD CITY	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16117					
<b>Employer Name</b> ELLWOOD GROUP				<b>Occupation</b> PRESIDENT			
<b>Employer Mailing Address/Principal Place of Business</b> PO BOX 790			<b>City</b> ELLWOOD CITY		<b>State</b> PA		<b>Zip Code (Plus 4)</b> 16117
<b>Full Name of Contributor</b> SCOTT WAGNER				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 110,000.00
<b>Mailing Address</b> PO BOX 1627				10	9	2014	
<b>City</b> YORK	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17405					
<b>Employer Name</b> PENN WASTE				<b>Occupation</b> OWNER			
<b>Employer Mailing Address/Principal Place of Business</b> PO BOX 3066			<b>City</b> YORK		<b>State</b> PA		<b>Zip Code (Plus 4)</b> 17402
<b>Full Name of Contributor</b> SCOTT WAGNER				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 75,000.00
<b>Mailing Address</b> PO BOX 1627				10	15	2014	
<b>City</b> YORK	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17405					
<b>Employer Name</b> PENN WASTE				<b>Occupation</b> OWNER			
<b>Employer Mailing Address/Principal Place of Business</b> PO BOX 3066			<b>City</b> YORK		<b>State</b> PA		<b>Zip Code (Plus 4)</b> 17402

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

PAGE TOTAL	
\$	195,000.00

## 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
	<div style="display: flex; justify-content: space-between;"> <span>From:</span> <span>To:</span> </div>

				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.

<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>	
REFORM PA PAC		From: <u>9/16/2014</u> To: <u>10/20/2014</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: <span style="float: right;">To:</span>
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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.						<b>PAGE TOTAL</b>  \$ 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>
REFORM PA PAC	From <u>9/16/2014</u> To: <u>10/20/2014</u>

DATE				AMOUNT		
To Whom Paid REAM PRINTING			MO	DAY	YEAR	\$ 33,952.10
Mailing Address 515 FARMBROOK LANE			8	11	2014	
City YORK	State PA	Zip Code (Plus 4) 17405	Description of Expenditure PRINTING AND POSTAGE FOR MAILERS-SD 46			
To Whom Paid AMANDA DAVIDSON			MO	DAY	YEAR	\$ 74.00
Mailing Address 756 ATLANTIC AVE.			8	12	2014	
City YORK	State PA	Zip Code (Plus 4) 17404	Description of Expenditure REIMBURSEMENT-PO BOX			
To Whom Paid MCLAUGHLIN & ASSOCIATES			MO	DAY	YEAR	\$ 2,000.00
Mailing Address 566 SOUTH ROUTE 303			8	12	2014	
City BLAUVELT	State NY	Zip Code (Plus 4) 10913	Description of Expenditure SD-46 - POLL			
To Whom Paid REAM PRINTING			MO	DAY	YEAR	\$ 33,952.10
Mailing Address 515 FARMBROOK LANE			8	19	2014	
City YORK	State PA	Zip Code (Plus 4) 17405	Description of Expenditure POSTAGE/PRINTING SD-46			
To Whom Paid REAM PRINTING			MO	DAY	YEAR	\$ 33,952.10
Mailing Address 515 FARMBROOK LANE			8	25	2014	
City YORK	State PA	Zip Code (Plus 4) 17405	Description of Expenditure PRINTING/POSTAGE SD-46			

To Whom Paid UNIVERSAL MEDIA			MO	DAY	YEAR	\$ 40,000.00
Mailing Address 4999 LOUISE DR.			8	25	2014	
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17055	Description of Expenditure TV ADS - SD-46			

To Whom Paid M&T BANK			MO	DAY	YEAR	\$ 29.95
Mailing Address 4301 NORTH GEORGE ST.			8	26	2014	
City MANCHESTER	State PA	Zip Code (Plus 4) 17345	Description of Expenditure DELUXE CHECKS			

To Whom Paid STEVE STRICKLER			MO	DAY	YEAR	\$ 3,000.00
Mailing Address 824 FIRST STREET SUITE C			8	28	2014	
City LANCASTER	State PA	Zip Code (Plus 4) 17053	Description of Expenditure VIDEO PRODUCTION SD-46			

To Whom Paid MCLAUGHLIN & ASSOCIATES INC.			MO	DAY	YEAR	\$ 2,500.00
Mailing Address 566 SOUTH ROUTE 303			9	10	2014	
City BLAUVELT	State NY	Zip Code (Plus 4) 10913	Description of Expenditure POLL - SD-46			

To Whom Paid AMANDA DAVIDSON			MO	DAY	YEAR	\$ 500.00
Mailing Address 756 ATLANTIC AVE.			9	10	2014	
City YORK	State PA	Zip Code (Plus 4) 17404	Description of Expenditure AUGUST MANAGEMENT FEE			

To Whom Paid UNIVERSAL MEDIA			MO	DAY	YEAR	\$ 45,000.00
Mailing Address 4999 LOUISE DR.			9	15	2014	
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17055	Description of Expenditure TV AD - SD 46			

To Whom Paid REAM PRINTING			MO	DAY	YEAR	\$ 30,355.56
Mailing Address 515 FARMBROOK LANE			9	21	2014	
City YORK	State PA	Zip Code (Plus 4) 17405	Description of Expenditure PRINTING/POSTAGE-SD 46			

To Whom Paid POLITICS PA, LLC			MO	DAY	YEAR	\$ 640.00
Mailing Address 900 19TH STREET, NW SUITE 800			7	23	2014	
City WASHINGTON	State DC	Zip Code (Plus 4) 20006	Description of Expenditure AD - GOVERNOR'S RACE			

To Whom Paid L2			MO	DAY	YEAR	\$ 1,538.94
Mailing Address 2500 116TH AVE. NE			9	24	2014	
City BELLEVUE	State WA	Zip Code (Plus 4) 98004	Description of Expenditure MAILING LISTS - SD 46			

To Whom Paid COMMITTEE TO ELECT BROOKS			MO	DAY	YEAR	\$ 2,500.00
Mailing Address 301 ALGOMA STREET			10	8	2014	
City JAMESTOWN	State PA	Zip Code (Plus 4) 16134	Description of Expenditure DONATION - SD 50			

To Whom Paid WILLFTALLMAN.COM			MO	DAY	YEAR	\$ 2,500.00
Mailing Address PO BOX 404			10	8	2014	
City EAST BERLIN	State PA	Zip Code (Plus 4) 17316	Description of Expenditure HD - 193			

To Whom Paid AMANDA DAVIDSON			MO	DAY	YEAR	\$ 500.00
Mailing Address 756 ATLANTIC AVE.			10	8	2014	
City YORK	State PA	Zip Code (Plus 4) 17404	Description of Expenditure SEPT. MANAGEMENT FEE			

<b>To Whom Paid</b> UNIVERSAL MEDIA			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 4999 LOUISE DRIVE			10	10	2014	
<b>City</b> MECHANICSBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17055	<b>Description of Expenditure</b> TV ADS - SD 46			

  

<b>To Whom Paid</b> MCLAUGHLIN & ASSOCIATES			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 566 SOUTH ROUTE 303			10	17	2014	
<b>City</b> BLAUVELT	<b>State</b> NY	<b>Zip Code (Plus 4)</b> 10913	<b>Description of Expenditure</b> POLL FOR SD-46			

  

<b>To Whom Paid</b> L2			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 2500 116TH AVE. NE			10	17	2014	
<b>City</b> BELLEVUE	<b>State</b> WA	<b>Zip Code (Plus 4)</b> 98004	<b>Description of Expenditure</b> MAIL LIST - SD 32			

  

<b>To Whom Paid</b> MIND MOTION			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 824 FIRST ST. SUITE C			10	17	2014	
<b>City</b> LANCASTER	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17503	<b>Description of Expenditure</b> VIDEO - SD 46			

  

<b>To Whom Paid</b> REAM PRINTING			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> PO BOX 2891			10	17	2014	
<b>City</b> YORK	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17405	<b>Description of Expenditure</b> MAILERS - SD - 46			

  

<b>To Whom Paid</b> UNIVERSAL MEDIA			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 4999 LOUISE DRIVE			10	17	2014	
<b>City</b> MECHANICSBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17055	<b>Description of Expenditure</b> TV ADS - SD 46			

  

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 422,185.73

**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>  REFORM PA PAC				<b>Reporting Period</b>  From: <u>9/16/2014</u> To: <u>10/20/2014</u>			
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						<b>Outstanding Balance of Debt</b>		
						<b>DATE</b>		
<b>Name of Creditor</b> SCOTT WAGNER					<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 110,000.00
<b>Mailing Address</b> PO BOX 1627					10	9	2014	
<b>City</b> YORK	<b>State</b> PA		<b>Zip Code (Plus 4)</b> 17405		<b>Description of Debt</b> LOAN			

  

						<b>Outstanding Balance of Debt</b>		
						<b>DATE</b>		
<b>Name of Creditor</b> SCOTT WAGNER					<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 75,000.00
<b>Mailing Address</b> PO BOX 1627					10	15	2014	
<b>City</b> YORK	<b>State</b> PA		<b>Zip Code (Plus 4)</b> 17405		<b>Description of Debt</b> LOAN			

  

<b>Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.</b>							<b>PAGE TOTAL</b>  \$ 185,000.00
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