

# 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>		2008059		<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> BETTER GOVERNMENT FOR PA												
<b>Street Address:</b>												
<b>City:</b> BRESSLER						<b>State:</b> PA		<b>Zip Code:</b> 17113				
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2015	<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	3	2015				
									(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>			
		3	31	2015		5	4	2015				
<b>A. Amount Brought Forward From Last Report</b>						\$ 9,494.70						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 14,250.00						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 23,744.70						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 7,092.77						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 16,651.93						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$ 0.00						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$ 0.00						

## 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>
BETTER GOVERNMENT FOR PA	From: <u>3/31/2015</u> To: <u>5/4/2015</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 100.00

<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>	\$ 7,000.00
<b>All Other Contributions (Part D)</b>	\$ 7,050.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 14,050.00

<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>	\$ 14,250.00
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<b>PART A</b> <b>CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES</b> <b>\$50.01 TO \$250.00</b> <b>Use this Part to itemize only contributions received from political committees</b> <b>with an aggregate value from \$50.01 to \$250.00 in the reporting period.</b>							
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 A on Schedule I, Detailed Summary Page, Section 2.**

<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> BETTER GOVERNMENT FOR PA	<b>Reporting Period</b> <b>From:</b> <u>3/31/2015</u> <b>To:</b> <u>5/4/2015</u>
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				DATE			AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 100.00	
TIM BARKER								
Mailing Address								
City	YORK	State	Zip Code (Plus 4)	4	9	2015		
		PA	17402					

**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>  BETTER GOVERNMENT FOR PA	<b>Reporting Period</b>  <b>From:</b> <u>3/31/2015</u> <b>To:</b> <u>5/4/2015</u>
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				DATE			AMOUNT
Full Name of Contributing Committee				MO	DAY	YEAR	
FRIENDS OF HASLE & PRIES							\$ 3,000.00
Mailing Address							
City    STEELTON	State PA	Zip Code (Plus 4) 17113		3	16	2015	

  

Full Name of Contributing Committee				MO	DAY	YEAR	
FRIENDS OF HASTE & PRES							\$ 4,000.00
Mailing Address							
City    STEELTON	State PA	Zip Code (Plus 4) 17113		3	30	2015	

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

<b>PAGE TOTAL</b>
\$ 7,000.00

**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>	<b>Reporting Period</b>
BETTER GOVERNMENT FOR PA	<b>From:</b> <u>3/31/2015</u> <b>To:</b> <u>5/4/2015</u>

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 1,000.00
MICHAEL SOLOMON							
Mailing Address							
City	HARRISBURG	State	PA	Zip Code (Plus 4)	17110		
Employer Name				COHEN SEGLIAS PALLAS GREENHALL & FUIRMAN			
Employer Mailing Address/Principal Place of Business				City		State	Zip Code (Plus 4)
				HARRISBURG		PA	17101
Full Name of Contributor				MO	DAY	YEAR	\$ 300.00
CORKY GOLDSTEIN							
Mailing Address							
City	HARRISBURG	State	PA	Zip Code (Plus 4)	17110		
Employer Name				MOONEY & ASSOCIATES			
Employer Mailing Address/Principal Place of Business				City		State	Zip Code (Plus 4)
				HARRISBURG		PA	17101
Full Name of Contributor				MO	DAY	YEAR	\$ 1,750.00
J. ALEX HARTZLER							
Mailing Address							
City	HARRISBURG	State	PA	Zip Code (Plus 4)	17110		
Employer Name				WCI PARTNERS			
Employer Mailing Address/Principal Place of Business				City		State	Zip Code (Plus 4)
				HARRISBURG		PA	17102
Full Name of Contributor				MO	DAY	YEAR	\$ 1,000.00
STEVE SHIRK							
Mailing Address							
City	HARRISBURG	State	PA	Zip Code (Plus 4)	17112		
Employer Name				CAPITAL BUSINESS SYSTEMS			
Employer Mailing Address/Principal Place of Business				City		State	Zip Code (Plus 4)
				HARRISBURG		PA	17110

<b>Full Name of Contributor</b> TOM MEHAFFIE			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 3,000.00
<b>Mailing Address</b>			4	28	2015	
<b>City</b> MIDDLETOWN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17057				
<b>Employer Name</b> BRESKI BEVERAGE			<b>Occupation</b> PRESIDENT			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17111		

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

<b>PAGE TOTAL</b>
<b>\$</b> 7,050.00

## 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  From: <span style="float: right;">To:</span>
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				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>	
BETTER GOVERNMENT FOR PA		From: <u>3/31/2015</u> To: <u>5/4/2015</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 RECEIVED - 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:

				DATE		AMOUNT	
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>
BETTER GOVERNMENT FOR PA	From <u>3/31/2015</u> To: <u>5/4/2015</u>

DATE				AMOUNT
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
LOWER PAXTON REPUBLICAN COMM.				
<b>Mailing Address</b>	1	30	2015	\$ 500.00
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17109	<b>Description of Expenditure</b> DONATION	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
DERRY TWP. REPUBLICAN COMM.				
<b>Mailing Address</b>	3	20	2015	\$ 300.00
<b>City</b> HERSHEY	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17033	<b>Description of Expenditure</b> DONATION	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
FRIENDS OF JUDGE JESSICA BREWBAKER				
<b>Mailing Address</b>	3	24	2015	\$ 300.00
<b>City</b> CARLISLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17013	<b>Description of Expenditure</b> DONATION	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
MICHAEL MUSSER				
<b>Mailing Address</b>	3	27	2015	\$ 351.59
<b>City</b> BRESSLER	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17113	<b>Description of Expenditure</b> REIMBURSEMENT	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
JOE LAHR				
<b>Mailing Address</b>	3	27	2015	\$ 100.00
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17104	<b>Description of Expenditure</b> CONSULTING	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
STEVE SILCOX				
<b>Mailing Address</b>	3	27	2015	\$ 500.00
<b>City</b> ENOLA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17025	<b>Description of Expenditure</b> VOTER ID	

To Whom Paid STEVE SILCOX			MO	DAY	YEAR	\$ 650.00
Mailing Address			3	30	2015	
City ENOLA	State PA	Zip Code (Plus 4) 17025	Description of Expenditure VOTER ID			

To Whom Paid STEVE SILCOX			MO	DAY	YEAR	\$ 550.00
Mailing Address			4	2	2015	
City ENOLA	State PA	Zip Code (Plus 4) 17025	Description of Expenditure VOTER ID			

To Whom Paid STEVE SILCOX			MO	DAY	YEAR	\$ 350.00
Mailing Address			4	6	2015	
City ENOLA	State PA	Zip Code (Plus 4) 17025	Description of Expenditure VOTER ID			

To Whom Paid FRIENDS OF KELLY HENSHAW			MO	DAY	YEAR	\$ 100.00
Mailing Address			4	9	2015	
City RED LION	State PA	Zip Code (Plus 4) 17356	Description of Expenditure DONATION			

To Whom Paid FRIENDS OF JUDGE JESSICA BREWBAKER			MO	DAY	YEAR	\$ 100.00
Mailing Address			4	15	2015	
City CARLISLE	State PA	Zip Code (Plus 4) 17013	Description of Expenditure DONATION			

To Whom Paid LAWNTON LEGION			MO	DAY	YEAR	\$ 582.00
Mailing Address			4	20	2015	
City HARRISBURG	State PA	Zip Code (Plus 4) 17111	Description of Expenditure FUNDRAISER EXPENSES			

To Whom Paid CAPITAL AREA PROMOTIONS			MO	DAY	YEAR	\$ 2,531.10
Mailing Address			5	1	2015	
City HARRISBURG	State PA	Zip Code (Plus 4) 17111	Description of Expenditure YARD SIGNS			

To Whom Paid ARMSTRONG PRINTING			MO	DAY	YEAR	\$ 178.08
Mailing Address			5	1	2015	
City HARRISBURG	State PA	Zip Code (Plus 4) 17110	Description of Expenditure PRINTING - PALM CARDS			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

**PAGE TOTAL**

\$ 7,092.77

