# **Campaign Finance Report**

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

Filer Identificat Number :	ion 2008	059			Repor Filed I		CANDI	DATE		СОМІ	MITTEE	✓	LOBI	BYIST	Г	
Name of Filing (	Committee, Candid	ate or Lo	obbyist:			-	ERNMEN	T FOR F	PA			<b>L</b>				
Street Address:	813 CHAMBER	RS STRE	ET													
City:	BRESSLER						State:	PA			Zip Co	<b>de:</b> 17	113			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2. <b>X</b>	30 D. PRIM		POST-	3.		AMENDN REPORT		Yes	N	D I	$\checkmark$
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 D. ELEC	AY F TION	POST-	6.		TERMIN REPORT		Yes	N	C	$\checkmark$
report type)	ANNUAL REPORT	7.	<b>Year</b> 2015				NG METHO CHECK O				PAPER		$\checkmark$	DISK	ETTE	
Name of Office S	Sought by Candidat	te:					DATE O	F ELEC	СТІО	N	District Number	Office Code	Par	ty Code	Coun	
							мо	DAY	YE	AR					1	
							11		3	2015		(SEE INS	TRUCTI	ONS FOR	CODES	)
	Receipts and	мо	DAY	YEAR			мо	DAY	YE	AR	FC	OR OFFIC	E USE	ONLY		
Expenditures	s from:		3 31	20	)15 <b>T</b>	0	5	1	4	2015						
A. Amount Bro	ught Forward From	n Last R	eport			\$			9,4	94.70						
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Schec	dule I)	\$	5		14,2	250.00						
C. Total Funds	Available (Sum Of	Lines A	and B)			\$	5		23,7	44.70						
D. Total Expen	ditures (From Sche	edule II	I)			\$	5		7,0	92.77						
E. Ending Cash	Balance (Subtract	t Line D	From Line	C)		\$			16,6	51.93	-					
F. Value Of In-	Kind Contributions	Receive	ed (From S	chedul	e II)	\$	5			0.00	-					
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	()		\$	;			0.00		,				
				AFF]	IDAVI	T SE	CTION									
PART I - If this i	s a Committee repo	ort, trea	surer sign	here. I	f this is	a Ca	ndidate re	eport, c	andio	late sig	gn here.					
I swear (or affirm correct and compl	) that this report, incl ete.	uding the	attached sc	hedules	filed on	paper	or by elect	ronic me	edium,	, are to f	the best o	of my knov	vledge	and bel	ief , tru	ue
Sworn to and subs	scribed before me this day of	5	20						s	ignature	e of Perso	n Submitt	ing Rep	oort		-
	Signatu					_					Prin	ited Name				-
My Commission E	2										Ema	il				-
	мо	DA	AY	YR				Are	ea Cod	e	Daytin	ne Teleph	one Nu	mber		_
Part II- If this is	a report of a cand	lidate's	authorized	Comm	ittee, C	Candid	late shall	sign he	ere.							
I swear (or affirm) No 320) as amend	) that to the best of n ed.	ny knowle	edge and beli	ief this	political	comn	nittee has n	ot violat	ted an	y provis	ions of th	e act of Ju	ine 3,1	937 (P.	L. 1333	з,
Sworn to and subso	cribed before me this day of		20							s	ignature	of Candida	ite			-
						_					Printe	ed Name				-
My Commission F	Signature					-					Ema	il				-
My Commission Exp	ores					_										
	мо	DA	<b>AY</b>	YR				Area	Code		D	aytime Te	elephon	e Numi	ber	

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** BETTER GOVERNMENT FOR PA From: <u>3/31/2015</u> **To:** 5/4/2015 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor \$ 100.00 **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 100.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 100.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 7,000.00 7,050.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 14,050.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 14,250.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

# 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			Re	porting I	Period						
			Fre	om:		То	:				
					DATE			AMOUNT			
Full Name of Contributing Committee				мо	DAY	YEAR					
Mailing Address							\$	0.00			
City	State	Zip Code (Plus	4)								
							Γ	PAGE TOTAL			

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

0.00

\$

Use this Part to ite \$5	\$ emize all 50.01 to \$	PART B ER CONTRI 550.01 TO \$250.00 other contribution 5250.00 in the repo rom political comn	) ns w ortir	ith an ng peri	aggreg iod.			rom
Name of Filing Committee or Candida	te		Rep	orting Po	eriod			
BETTER GOVERNMENT FOR PA			Fro	m:	<u>3/31/</u>	<u>2015</u> To	):	<u>5/4/2015</u>
					DATE			AMOUNT
Full Name of Contributor TIM BARKER				мо	DAY	YEAR		
Mailing Address         291 SILVER SPUR	DRIVE						\$	100.00
City YORK	State	Zip Code (Plus 4)	)	4	9	2015		
	РА	17402						
								PAGE TOTAL
Enter Grand Total of Part A on	Schedule I,	Detailed Summary Pag	ge, S	ection 2			\$	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.

Name of Filing Committee or Candidate			Reporting	Period				
BETTER GOVERNMENT FOR PA			From:	<u>3/3</u>	<u>1/2015</u>	То:	<u>5/4/2015</u>	
				DA	TE		Α	MOUNT
Full Name of Contributing Committee FRIENDS OF HASLE & amp; PRIES				мо	DAY	YEAR		
Mailing Address P.O. BOX 7365				_			\$	3,000.00
City STEELTON	State PA	<b>Zip Code</b> 17113	e (Plus 4)	3	16	2015	5	
Full Name of Contributing Committee FRIENDS OF HASTE & amp; PRES				мо	DAY	YEAR		
Mailing Address P.O. BOX 7365							\$	4,000.00
City STEELTON	<b>State</b> PA	<b>Zip Code</b> 17113	e (Plus 4)	3	30	2015	5	
								PAGE TOTAL
Enter Grand Total of Part C on Schee	ule I, Detailed Sum	nmary Pa	ige, Sectio	n 3.			\$	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.)

Name of Filing Committee or Candidate				Rep	orting Pe	riod		
BETTER GOVERNMENT FOR PA				From	n:	<u>3/31/2</u>	015 To	<b>5/4/2015</b>
					DA	TE		AMOUNT
Full Name of Contributor MICHAEL SOLOMON					мо	DAY	YEAR	
Mailing 1616 GALEN ROAD Address								<b>\$</b> 1,000.00
City HARRISBURG	State	Zij	p Code (Plus	; 4)	2	4	2015	
	PA	17	'110					
Employer Name COHEN SEGLIAS PALL	AS GREENHALL &ar	mp;	FUIRMAN		Occupat	ion A	TTORN	EY
Employer Mailing Address/Principal Plac Business	e of		City			State		Zip Code (Plus 4)
240 N. 3RD STREET			HARRISB	URG		РА		17101
Full Name of Contributor CORKY GOLDSTEIN					мо	DAY	YEAR	
Mailing 2900 PARKSIDE LANE								<b>\$</b> 300.00
City HARRISBURG	State	Zij	p Code (Plus	; 4)	3	23	2015	
	PA	17	110					
Employer Name MOONEY & amp; ASSC	DCIATES				Occupat	ion A	TTORN	EY
Employer Mailing Address/Principal Plac Business	e of		City			State		Zip Code (Plus 4)
105 N. FRONT ST.			HARRISB	URG		PA		17101
<b>Full Name of Contributor</b> J. ALEX HARTZLER					мо	DAY	YEAR	
Mailing 2921 N. 2ND STREET								<b>\$</b> 1,750.00
City HARRISBURG	State	Zij	p Code (Plus	; 4)	4	9	2015	
	PA	17	'110					
Employer Name WCI PARTNERS					Occupat	i <b>on</b> P	RESIDE	ENT
Employer Mailing Address/Principal Plac Business	e of		City			State		Zip Code (Plus 4)
220 MUENCH STREET			HARRISB	URG		PA		17102

Full Name of Contributor STEVE SHIRK				мо	DAY	YEAR		
Mailing 161 LEXINGTON COUR Address	RT						\$	1,000.00
City HARRISBURG	State	Zij	p Code (Plus 4)	4	28	2015		
	РА	17	'112					
Employer Name CAPITAL BUSINESS S	YSTEMS			Occupat	ion P	RESIDE	INT	
Employer Mailing Address/Principal Place Business	e of		City		State		Zip Cod	e (Plus 4)
2708 COMMERCE DRIVE			HARRISBURG		PA		17110	
Full Name of Contributor TOM MEHAFFIE				мо	DAY	YEAR		
Mailing Address921 EBENCEZER RD.							\$	3,000.00
City MIDDLETOWN	State	Zij	p Code (Plus 4)	4	28	2015		
	РА	17	057					
Employer Name BRESKI BEVERAGE				Occupat	<b>ion</b> P	RESIDE	INT	
Employer Mailing Address/Principal Place Business	e of		City		State		Zip Cod	e (Plus 4)
1170 EISENHOWER BLVD.			HARRISBURG		PA		17111	
Enter Grand Total of Part C on Schee	lule I, Detailed Su	ımn	nary Page, Sectio	on 3.			P/ \$	<b>AGE TOTAL</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	2		Report	ting Perio	od				
			From:			То:			
				D	ATE			AMOUNT	ſ
Full Name				мо	DAY	YEAR			
Mailing Address							\$	5	0.00
City	State	Zip Code (	Plus 4)						
Receipt Description	·					•	•		
Enter Grand Total of Part E on Sched	ule T. Detailed Sum	mary Page	Section	4				PAGE TO	TAL
			20000				\$		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		
BETTER GOVERNMENT FOR PA	From:	<u>3/31/2015</u> <b>To:</b>	<u>5/4/2015</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	「 F)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD ( amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, I		\$	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:			То:	
				DATE		ΑΜΟυΙ	NT
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)	'				
Description of Contribution:							
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE T	OTAL
					4	5	0.00

### PAGE 11

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

Name of Filing Committee or Candida	ate				Re	porting F	Period			
					Fro	om:		То:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor			-1			Occupa	tion	-1		
Employer Mailing Address/Principal I Business	Place of	City		State		Zip 4)	Code(Plus	Descri	ption o	of Contribution
Enter Grand Total of Part G on S	chedule II.	[n-Kind	Contributi	ions De	etaile	ed				PAGE TOTAL
Summary Page, Section 3.	<b>,,</b> -					-				0.00

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period			
BETTER GOVERNMENT FOR PA			From	<u>3/3</u>	<u>1/2015</u>	То:	<u>5/4/2015</u>
				DATE			AMOUNT
To Whom Paid LOWER PAXTON REPUBLICAN COMM.			мо	DAY	YEAR		
Mailing Address 3973 CHESTNUT ST	REET		1	30	2015	\$	500.00
City HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17109	<b>Descrip</b> DONAT	ntion of Exp TION	penditure	11	
To Whom Paid DERRY TWP. REPUBLICAN COMM.			мо	DAY	YEAR		
Mailing Address P.O. BOX 78			3	20	2015	\$	300.00
City HERSHEY	<b>Descrip</b> DONAT	<b>ition of Ex</b> TION	penditure	1			
To Whom Paid FRIENDS OF JUDGE JESSICA BREWBAK	(ER		мо	DAY	YEAR		
Mailing Address P.O. BOX 444			3	24	2015	\$	300.00
City CARLISLE	State PA	<b>Zip Code (Plus 4)</b> 17013	<b>Descrip</b> DONAT	<b>otion of Exp</b> TON	penditure	1	
<b>To Whom Paid</b> MICHAEL MUSSER			мо	DAY	YEAR		
Mailing Address 813 CHAMBERS STF	REET		3	27	2015	\$	351.59
City BRESSLER	State PA	<b>Zip Code (Plus 4)</b> 17113	-	<b>ition of Exp</b> JRSEMENT			
<b>To Whom Paid</b> JOE LAHR			мо	DAY	YEAR		
Mailing Address 1037 S. 18TH STRE	ET		3	27	2015	\$	100.00
City HARRISBURG	State PA	<b>Zip Code (Plus 4)</b> 17104	Descrip CONSU	otion of Exp	penditure	1	

To M/h	om Paid								
-	SILCOX				мо	DAY	YEAR		
Mailing	g Address	96 BEARD RD.			3	27	2015	\$	500.00
City	ENOLA		State	Zip Code (Plus 4)	Descrip	tion of Exp	Denditure		
			РА	17025	VOTER				
	om Paid SILCOX				мо	DAY	YEAR		
Mailing	g Address	96 BEARD RD.			3	30	2015	\$	650.00
City	ENOLA		State	Zip Code (Plus 4)	Descrip	tion of Exp	, penditure		
			РА	17025	VOTER				
	om Paid SILCOX				мо	DAY	YEAR		
Mailing	g Address	96 BEARD RD.			4	2	2015	\$	550.00
City	ENOLA		State	Zip Code (Plus 4)	Descrip	tion of Exp	, penditure		
			РА	17025	VOTER				
	om Paid SILCOX				мо	DAY	YEAR		
STEVE		96 BEARD RD.			<b>мо</b> 4	<b>DAY</b> 6	<b>YEAR</b> 2015	\$	350.00
STEVE	SILCOX	96 BEARD RD.	State	Zip Code (Plus 4)	4	6	2015		350.00
STEVE Mailing	SILCOX g Address	96 BEARD RD.	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17025	4	6 otion of Exp	2015		350.00
STEVE Mailing City To Wh	SILCOX g Address ENOLA	96 BEARD RD.			4 Descrip	6 otion of Exp	2015		350.00
STEVE Mailing City To Wh FRIEN	SILCOX g Address ENOLA				4 Descrip VOTER	6 htion of Exp ID	2015 penditure		350.00
STEVE Mailing City To Wh FRIEN	SILCOX g Address ENOLA om Paid DS OF KELL g Address	LY HENSHAW 233 BELLEVUE RD.			4 Descrip VOTER MO	6 htion of Exp ID DAY 9	2015 penditure YEAR 2015	\$ 	
STEVE Mailing City To Wh FRIEN Mailing	SILCOX g Address ENOLA om Paid DS OF KELL	LY HENSHAW 233 BELLEVUE RD.	РА	17025	4 Descrip VOTER MO	6 Ition of Exp ID DAY 9 stion of Exp	2015 penditure YEAR 2015	\$ 	
STEVE Mailing City To Wh FRIEN Mailing City To Wh	ESILCOX g Address ENOLA OM Paid DS OF KELL g Address RED LION OM Paid	LY HENSHAW 233 BELLEVUE RD.	PA State PA	17025 Zip Code (Plus 4)	4 Descrip VOTER MO 4 Descrip	6 Ition of Exp ID DAY 9 stion of Exp	2015 penditure YEAR 2015	\$ 	
STEVE Mailing City To Wh FRIEN City To Wh FRIEN	ESILCOX g Address ENOLA OM Paid DS OF KELL g Address RED LION OM Paid	LY HENSHAW 233 BELLEVUE RD.	PA State PA	17025 Zip Code (Plus 4)	4 Descrip VOTER MO 4 Descrip DONAT	6 ID DAY 9 ID ID	2015 penditure YEAR 2015 penditure	\$	
STEVE Mailing City To Wh FRIEN City To Wh FRIEN	SILCOX g Address ENOLA Om Paid DS OF KELL g Address RED LION Om Paid DS OF JUDO	LY HENSHAW 233 BELLEVUE RD. GE JESSICA BREWBAK P.O. BOX 444	PA State PA	17025 Zip Code (Plus 4)	4 Descrip VOTER MO 4 Descrip DONAT MO	6 stion of Exp ID DAY 9 stion of Exp ION DAY	2015 penditure YEAR 2015 penditure YEAR 2015	\$	100.00

							1
To Whom Paid LAWNTON LEGION			мо	DAY	YEAR		
Mailing Address 4700 DERRY STREET			4	20	2015	\$	582.00
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	oenditure		
	PA	17111	FUNDRAISER EXPENSES				
To Whom Paid CAPITAL AREA PROMOTIONS			мо	DAY	YEAR		
Mailing Address 912 SUNNYHILL LANE			5	1	2015	\$	2,531.10
City HARRISBURG	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	17111	YARD SIGNS				
To Whom Paid ARMSTRONG PRINTING			мо	DAY	YEAR		
Mailing Address 2940 JEFFERSON ST.			5	1	2015	\$	178.08
City HARRISBURG	State	Zip Code (Plus 4)	Description of Expenditure PRINTING - PALM CARDS				
	PA	17110					
							PAGE TOTAL
Enter Grand Total of Expend	itures on Page 1, Re	eport Cover Page, Item D	•			\$	7,092.77