

# 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 : 2008059		Report Filed By :		CANDIDATE	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST					
Name of Filing Committee, Candidate or Lobbyist: BETTER GOVERNMENT FOR PA											
Street Address: 813 CHAMBERS STREET											
City: BRESSLER			State: PA		Zip Code: 17113						
TYPE OF REPORT  (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	FILING METHOD ( ) CHECK ONE		PAPER <input checked="" type="checkbox"/>		DISKETTE			
Name of Office Sought by Candidate:				DATE OF ELECTION			District Number	Office Code	Party Code	County Code	
				MO	DAY	YEAR					
				11	3	2015	(SEE INSTRUCTIONS FOR CODES)				
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		3	31	2015	TO	5	4	2015			
A. Amount Brought Forward From Last Report				\$		9,494.70					
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		14,250.00					
C. Total Funds Available (Sum Of Lines A and B)				\$		23,744.70					
D. Total Expenditures (From Schedule III)				\$		7,092.77					
E. Ending Cash Balance (Subtract Line D From Line C)				\$		16,651.93					
F. Value Of In-Kind Contributions Received (From Schedule II)				\$		0.00					
G. Unpaid Debts And Obligations (From Schedule IV)				\$		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

My Commission Expires \_\_\_\_\_

MO DAY YR

\_\_\_\_\_  
Signature of Person Submitting Report

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Email

\_\_\_\_\_  
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

My Commission Expires \_\_\_\_\_

MO DAY YR

\_\_\_\_\_  
Signature of Candidate

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Email

\_\_\_\_\_  
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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**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.**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
	<b>From:</b> _____ <b>To:</b> _____
	<b>DATE</b> <span style="float: right;"><b>AMOUNT</b></span>

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

**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> From: <u>3/31/2015</u> To: <u>5/4/2015</u>
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				DATE	AMOUNT	
<b>Full Name of Contributor</b> TIM BARKER			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b> 291 SILVER SPUR DRIVE			4	9	2015	
<b>City</b> YORK	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 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> From: <u>3/31/2015</u> To: <u>5/4/2015</u>
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			DATE	AMOUNT		
Full Name of Contributing Committee	Mailing Address	City	MO	DAY	YEAR	
FRIENDS OF HASLE & PRIES	P.O. BOX 7365	STEELTON	3	16	2015	\$ 3,000.00
<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17113					
FRIENDS OF HASTE & PRES	P.O. BOX 7365	STEELTON	3	30	2015	\$ 4,000.00
<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17113					

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> BETTER GOVERNMENT FOR PA	<b>Reporting Period</b> From: <u>3/31/2015</u> To: <u>5/4/2015</u>
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				DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR		
MICHAEL SOLOMON					
<b>Mailing Address</b> 1616 GALEN ROAD				\$ 1,000.00	
<b>City</b> HARRISBURG	2	4	2015		
<b>State</b> PA					
<b>Zip Code (Plus 4)</b> 17110					
<b>Employer Name</b> COHEN SEGLIAS PALLAS GREENHALL & FUJIRMAN				<b>Occupation</b> ATTORNEY	
<b>Employer Mailing Address/Principal Place of Business</b> 240 N. 3RD STREET		<b>City</b> HARRISBURG		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101
CORKY GOLDSTEIN					
<b>Mailing Address</b> 2900 PARKSIDE LANE				\$ 300.00	
<b>City</b> HARRISBURG	3	23	2015		
<b>State</b> PA					
<b>Zip Code (Plus 4)</b> 17110					
<b>Employer Name</b> MOONEY & ASSOCIATES				<b>Occupation</b> ATTORNEY	
<b>Employer Mailing Address/Principal Place of Business</b> 105 N. FRONT ST.		<b>City</b> HARRISBURG		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101
J. ALEX HARTZLER					
<b>Mailing Address</b> 2921 N. 2ND STREET				\$ 1,750.00	
<b>City</b> HARRISBURG	4	9	2015		
<b>State</b> PA					
<b>Zip Code (Plus 4)</b> 17110					
<b>Employer Name</b> WCI PARTNERS				<b>Occupation</b> PRESIDENT	
<b>Employer Mailing Address/Principal Place of Business</b> 220 MUENCH STREET		<b>City</b> HARRISBURG		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17102

<b>Full Name of Contributor</b> STEVE SHIRK			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b> 161 LEXINGTON COURT			4	28	2015	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17112				
<b>Employer Name</b> CAPITAL BUSINESS SYSTEMS			<b>Occupation</b> PRESIDENT			
<b>Employer Mailing Address/Principal Place of Business</b> 2708 COMMERCE DRIVE		<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17110		

<b>Full Name of Contributor</b> TOM MEHAFFIE			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 3,000.00
<b>Mailing Address</b> 921 EBENCEZER RD.			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> 1170 EISENHOWER BLVD.		<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>
\$ 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.**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
	<b>From:</b> _____ <b>To:</b> _____

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

**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>  BETTER GOVERNMENT FOR PA	<b>Reporting Period</b>  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
<b>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.)</b>	\$ 0.00

**SCHEDULE II  
PART F  
IN-KIND CONTRIBUTIONS RECEIVED  
VALUE OF \$50.01 TO \$250.00**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
	<b>From:</b> <span style="float: right;"><b>To:</b></span>

	DATE			AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
<b>Mailing Address</b>				\$ 0.00
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>		
<b>Description of Contribution:</b>				
<b>Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.</b>				<b>PAGE TOTAL</b> \$ 0.00

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

<b>Name of Filing Committee or Candidate</b>				<b>Reporting Period</b>			
				<b>From:</b>		<b>To:</b>	
				<b>DATE</b>		<b>AMOUNT</b>	
<b>Full Name of Contributor</b>				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$ 0.00</b>
<b>Mailing Address</b>							
<b>City</b>	<b>State</b>	<b>Zip Code(Plus 4)</b>					
<b>Employer of Contributor</b>				<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b>	<b>State</b>	<b>Zip Code(Plus 4)</b>	<b>Description of Contribution</b>	
<b>Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.</b>						<b>PAGE TOTAL</b>	
						0.00	

## SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b> BETTER GOVERNMENT FOR PA	<b>Reporting Period</b> From <u>3/31/2015</u> To: <u>5/4/2015</u>
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			DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR	
LOWER PAXTON REPUBLICAN COMM.	1	30	2015	\$ 500.00
<b>Mailing Address</b> 3973 CHESTNUT STREET				
<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> DERRY TWP. REPUBLICAN COMM.	3	20	2015	\$ 300.00
<b>Mailing Address</b> P.O. BOX 78				
<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> FRIENDS OF JUDGE JESSICA BREWBAKER	3	24	2015	\$ 300.00
<b>Mailing Address</b> P.O. BOX 444				
<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> MICHAEL MUSSER	3	27	2015	\$ 351.59
<b>Mailing Address</b> 813 CHAMBERS STREET				
<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> JOE LAHR	3	27	2015	\$ 100.00
<b>Mailing Address</b> 1037 S. 18TH STREET				
<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> STEVE SILCOX			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 96 BEARD RD.			3	27	2015	
<b>City</b> ENOLA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17025	<b>Description of Expenditure</b> VOTER ID			
<b>To Whom Paid</b> STEVE SILCOX			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 96 BEARD RD.			3	30	2015	
<b>City</b> ENOLA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17025	<b>Description of Expenditure</b> VOTER ID			
<b>To Whom Paid</b> STEVE SILCOX			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 96 BEARD RD.			4	2	2015	
<b>City</b> ENOLA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17025	<b>Description of Expenditure</b> VOTER ID			
<b>To Whom Paid</b> STEVE SILCOX			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 96 BEARD RD.			4	6	2015	
<b>City</b> ENOLA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17025	<b>Description of Expenditure</b> VOTER ID			
<b>To Whom Paid</b> FRIENDS OF KELLY HENSHAW			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 233 BELLEVUE RD.			4	9	2015	
<b>City</b> RED LION	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17356	<b>Description of Expenditure</b> DONATION			
<b>To Whom Paid</b> FRIENDS OF JUDGE JESSICA BREWBAKER			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> P.O. BOX 444			4	15	2015	
<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> LAWNTON LEGION			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 4700 DERRY STREET			4	20	2015	\$ 582.00
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17111	<b>Description of Expenditure</b> FUNDRAISER EXPENSES			
<b>To Whom Paid</b> CAPITAL AREA PROMOTIONS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 912 SUNNYHILL LANE			5	1	2015	\$ 2,531.10
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17111	<b>Description of Expenditure</b> YARD SIGNS			
<b>To Whom Paid</b> ARMSTRONG PRINTING			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 2940 JEFFERSON ST.			5	1	2015	\$ 178.08
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17110	<b>Description of Expenditure</b> PRINTING - PALM CARDS			
<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b> \$ 7,092.77

