Campaign Finance Report

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

Filer Identificati Number :	on 200	8059			Repo Filed			CANE	IDATE		СОМІ	MITTEE	✓	LOBE	YIST	
Name of Filing C	Committee, Candi	date or L	obbyist:		BETT	ER	GOVI	ERNMEI	NT FOR	R PA						
Street Address:	813 CHAMBI	ERS ST.														
City:	BRESSLER							State:	PA			Zip Cod	de: 1	7113		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	2.		30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- 5.	Х.	30 DA ELECT		POST- 6.				TERMINATION Yes REPORT?			~
report type)	ANNUAL REPOR	T 7.	Year 2015 FILING METHO () CHECK O								PAPER	PAPER DISKETT			ГТЕ	
Name of Office S	Sought by Candid	ate:	•		_	•		DATE	OF EL	ECT:	ION	District Number	Office Code	Pari	ty Code	County Code
	,							МО	DAY	'	YEAR	rtumber	Toode			-
								1	1	3	2015		(SEE II	NSTRUCTIO	ONS FOR C	ODES)
	Receipts and	МО	DAY Y	EAR				МО	DAY	'	YEAR	FC	R OFFI	CE USE	ONLY	
Expenditures	s trom:		9 15	20	015	T	0	1	0	19	2015					
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			(5,811.60					
B. Total Moneta	ary Contributions	And Rec	eipts (From S	che	dule 1	[)	\$				3,200.00					
C. Total Funds Available (Sum Of Lines A and B)							\$									
D. Total Expend	ditures (From Sc	hedule II	I)				\$			2	2,766.43					
E. Ending Cash	Balance (Subtra	ct Line D	From Line C)				\$			12	2,245.17	_				
F. Value Of In-	Kind Contribution	ns Receiv	ed (From Sch	edul	e II)		\$				0.00	_				
G. Unpaid Debt	ts And Obligation	s (From S	Schedule IV)				\$				0.00			'		
			A	١FF	IDA	VI٦	ΓSE	CTION	I							
PART I - If this is		-	_						= '							
I swear (or affirm) correct and complete) that this report, in ete.	cluding the	e attached sched	dules	filed	on p	paper (or by ele	ctronic	mediu	ım, are to t	the best o	f my kno	wledge a	and belie	f , true
Sworn to and subs	cribed before me the day of	is	20								Signature	e of Perso	n Submi	tting Rep	ort	
	Signat	ure					-					Prin	ted Nam	e		
My Commission Ex	_											Ema	il			
	мо	D	AY	YR						Area C	Code	Daytim	e Telep	hone Nui	nber	
Part II- If this is	a report of a car	ndidate's	authorized Co	omm	ittee	, Ca	andida	ate sha	ll sign	here						
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and belief	this	politic	al	commi	ittee has	not vio	lated	any provis	ions of th	e act of 3	June 3,19	937 (P.L.	1333,
Sworn to and subsc		S									s	ignature o	of Candid	late		
	day of											Drinte	d Name			
	Signature	<u> </u>										Finite				
My Commission Exp	-											Ema	il			
	МО	D	AY	YR					Are	a Cod	le	D	aytime 1	Γelephon	e Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	Period		
BETTER GOVERNMENT FOR PA	From:	9/15/201	<u>5</u> To:	10/19/2015
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)			\$	500.00
TOTAL for the Reporting	Period	(2)	\$	500.00
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)			\$	7,700.00
TOTAL for the Reporting	Period	(3)	\$	7,700.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	8,200.00

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 Commit	tee or Candidate			Reporting Period						
				From:	:		То	:		
			•			DATE			AMOUNT	
Full Name of Contributin	g Committee			M	40	DAY	YEAR			
Mailing Address								\$	0.00	
City		State	Zip Code (Plus 4)							

PAGE TOTAL
0.00

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

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

 BETTER GOVERNMENT FOR PA
 From: 9/15/2015
 To: 10/19/2015

				DATE		- 1	AMOUNT
Full Name of Contributor			мо	DAY	YEAR		
DOMINIC D. DI FRANCESCO, I	II		1-10	DAI	ILAK	ı	
Mailing Address 1871 OHA	RA LANE					\$	250.00
City MIDDLETOWN	State	Zip Code (Plus 4)	9	17	2015		
	PA	17057					
Full Name of Contributor			мо	DAY	YEAR		
DUSTIN A. GREEN			1-10	DAI	ILAK	I.	
Mailing Address 1819 BON	NIE BLUE LANE					\$	250.00
City MIDDLETOWN	State	Zip Code (Plus 4)	6	7	2015		
	РΔ	17057					

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

PAGE TOTAL \$ 500.00

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:			То:			
				DA	TE		P	AMOUNT	
Full Name of Contributing Committee				МО	DAY	YEAR		0	00
Mailing Address							+	0.	00
City	State	Zip Code	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on Scheo	dule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.0	0

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			Fro	m:	9/15/2	<u>015</u> To	: <u>10/19/2015</u>
				D/	ATE		AMOUNT
Full Name of Contributor				мо	DAY	YEAR	
TANYA A. SMITH				МО	DAT	TEAK	\$ 1,950.00
Mailing Address 48 W024 IL RT 38				9	18	2015	7
City MAPLE PARK	State	Zip Code	Plus 4)]	10	2013	
	IL I	60151					
Employer Name DEUNET				Occupat	ion	VP	
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip Code (Plus 4)
1709 AFTON RD.		SYCA	MORE		IL		60178
Full Name of Contributor		•					
J. ALEX HARTZLER				МО	DAY	YEAR	\$ 3,750.00
Mailing Address 2921 N. 2ND ST.					17	2015	
City HARRISBURG	State	Zip Code	Plus 4)	9	17	2015	
	PA	17110					
Employer Name WCI PARTNERS				Occupat	ion	PRESID	ENT
Employer Mailing Address/Principal Plac	e of Business	City		State			Zip Code (Plus 4)
220 MUENCH STREET		HARR	ISBURG		PA		17102
Full Name of Contributor							
				МО	DAY	YEAR	\$ 1,000.00
Full Name of Contributor TODD F. TRUNTZ, ESQ. Mailing Address 1813 SCARLETT LAR	NE						-
TODD F. TRUNTZ, ESQ.	NE State	Zip Code	Plus 4)	мо	DAY 9	YEAR 2015	-
TODD F. TRUNTZ, ESQ. Mailing Address 1813 SCARLETT LAN		Zip Code (Plus 4)				-
TODD F. TRUNTZ, ESQ. Mailing Address 1813 SCARLETT LAN	State PA	-	Plus 4)		9		
TODD F. TRUNTZ, ESQ. Mailing Address 1813 SCARLETT LAN City MIDDLETOWN	State PA OGERS	-	Plus 4)	9	9	2015	
TODD F. TRUNTZ, ESQ. Mailing Address 1813 SCARLETT LAN City MIDDLETOWN Employer Name SAIDIS, SULLIVAN, Re	State PA OGERS	17057	·	9	9	2015	IEY
TODD F. TRUNTZ, ESQ. Mailing Address 1813 SCARLETT LAN City MIDDLETOWN Employer Name SAIDIS, SULLIVAN, Re Employer Mailing Address/Principal Place	State PA OGERS	17057	·	9 Occupat	9 State PA	2015 ATTORN	IEY Zip Code (Plus 4) 17043
TODD F. TRUNTZ, ESQ. Mailing Address 1813 SCARLETT LAN City MIDDLETOWN Employer Name SAIDIS, SULLIVAN, Re Employer Mailing Address/Principal Place 635 N. 12TH STREET	State PA OGERS	17057	·	9	9 State	2015	Zip Code (Plus 4)
TODD F. TRUNTZ, ESQ. Mailing Address 1813 SCARLETT LAN City MIDDLETOWN Employer Name SAIDIS, SULLIVAN, RO Employer Mailing Address/Principal Place 635 N. 12TH STREET Full Name of Contributor	State PA OGERS	17057	·	Occupat	9 State PA DAY	2015 ATTORN YEAR	Zip Code (Plus 4) 17043 \$ 500.00
TODD F. TRUNTZ, ESQ. Mailing Address 1813 SCARLETT LAN City MIDDLETOWN Employer Name SAIDIS, SULLIVAN, Re Employer Mailing Address/Principal Place 635 N. 12TH STREET Full Name of Contributor CAMPUS HEIGHTS ASSOCIATES, I LP	State PA OGERS	17057	YNE	9 Occupat	9 State PA	2015 ATTORN	Zip Code (Plus 4) 17043 \$ 500.00
TODD F. TRUNTZ, ESQ. Mailing Address 1813 SCARLETT LAN City MIDDLETOWN Employer Name SAIDIS, SULLIVAN, RA Employer Mailing Address/Principal Place 635 N. 12TH STREET Full Name of Contributor CAMPUS HEIGHTS ASSOCIATES, I LP Mailing Address P.O. BOX 222	State PA OGERS See of Business	17057 City LEMO	YNE	Occupat	9 State PA DAY	2015 ATTORN YEAR	Zip Code (Plus 4) 17043 \$ 500.00
TODD F. TRUNTZ, ESQ. Mailing Address 1813 SCARLETT LAN City MIDDLETOWN Employer Name SAIDIS, SULLIVAN, RA Employer Mailing Address/Principal Place 635 N. 12TH STREET Full Name of Contributor CAMPUS HEIGHTS ASSOCIATES, I LP Mailing Address P.O. BOX 222	State PA OGERS The of Business State	17057 City LEMO	YNE	Occupat	9 State PA DAY	2015 ATTORN YEAR	Zip Code (Plus 4) 17043 \$ 500.00
TODD F. TRUNTZ, ESQ. Mailing Address 1813 SCARLETT LAN City MIDDLETOWN Employer Name SAIDIS, SULLIVAN, RO Employer Mailing Address/Principal Place 635 N. 12TH STREET Full Name of Contributor CAMPUS HEIGHTS ASSOCIATES, I LP Mailing Address P.O. BOX 222 City SOUTHEASTERN	State PA OGERS The of Business State PA PA	17057 City LEMO	YNE	9 Occupat	9 State PA DAY	2015 ATTORN YEAR 2015	Zip Code (Plus 4) 17043 \$ 500.00

Full Name of Contributor				МО	DAY	YEAR	# F00.00
CAMPUS HEIGHTS ASSOCIATES, I LP				110	DAI	ILAK	\$ 500.00
Mailing Address P.O. BOX 222				6	22	2015	
City SOUTHEASTERN	State	Zi	p Code (Plus 4)]	22	2013	
	PA	19	399				1
Employer Name CAMPUS HEIGHTS				Occupat	ion	DEVELO	PER
Employer Mailing Address/Principal Pla	ce of Business		City		State		Zip Code (Plus 4)
P.O. BOX 222			SOUTHEASTERN		PA		19399

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

PAGE TOTAL	
\$ 7,700.00	

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		Report	ing Peri	od			
			From:			To:		
		'			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (P	Plus 4)					
Receipt Description	'	'		<u> </u>			•	
				_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	Section	4.			\$	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	i	
BETTER GOVERNMENT FOR PA	From:	<u>9/15/2015</u> To:	<u>10/19/2015</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (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, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporting	g Period				
						То:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	-	-	•	•	•			
Enter Grand Total of Part F on Sche	dule II, In-Kind	d Contributions Deta	iled Sum	mary Pag	ge,		PAGE TOTA	L
Section 2.						\$		0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Rep	orting	Period				
				Fro	m:		To:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address									\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	ation				
Employer Mailing Address/Principal Plac	e of Business	City	V	State	e Zip	Code(Plus 4)	Descr	ript	ion of Contribution	on
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	Contributions De	etaile	ed				PAGE TO	ΓAL
Summary Page, Section 3.	,									0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period			
BETTER GOVERNMENT FOR PA	From	9/15/2015	То:	<u>10/19/2015</u>

				DATE		AMOUNT	
To Whom Paid			мо	DAY	YEAR		
EE SMITH DESIGNS			М		TEAK		
Mailing Address 2002 COLUMBIA AVE.		10	8	2015	\$	125.00	
City CAMP HILL State Zip Code (Plus 4)			Descript	tion of Exp	enditure		
	PA	17011	GRAPHI	C DESIGN			
To Whom Paid DCCRW			мо	DAY	YEAR		
Mailing Address 2255 PAXTON CHURCH RD.		9	28	2015	\$	150.00	
City HARRISBURG State Zip Code (Plus 4)			Description of Expenditure				
	PA	17110	DONATI	ON			
To Whom Paid DAUPHIN COUNTY REPUBLICAN COMMI	TTEE		мо	DAY	YEAR		
Mailing Address 2255 PAXTON CHUR			9	23	2015	\$	250.00
City HARRISBURG State Zip Code (Plus 4)			Descript	l tion of Exp	l enditure		
, , , , , , , , , , , , , , , , , , , ,	PA	17110	DONATION				
			•				
To Whom Paid					\		
To Whom Paid CCRC			мо	DAY	YEAR		
			мо 9	DAY 23	YEAR 2015	\$	45.00
CCRC	State	Zip Code (Plus 4)	9		2015	\$	45.00
CCRC Mailing Address P.O. BOX 1495	State PA	Zip Code (Plus 4) 17001	9	23	2015	\$	45.00
CCRC Mailing Address P.O. BOX 1495			9 Descript	23	2015	\$	45.00
CCRC Mailing Address P.O. BOX 1495 City CAMP HILL To Whom Paid	PA		9 Descript DONATI	23 tion of Exp	2015 enditure	\$	45.00 792.12
CCRC Mailing Address P.O. BOX 1495 City CAMP HILL To Whom Paid ARMSTRONG PRINTERY	PA		9 Descript DONATI MO 9	23 tion of Exp	2015 enditure YEAR 2015		
CCRC Mailing Address P.O. BOX 1495 City CAMP HILL To Whom Paid ARMSTRONG PRINTERY Mailing Address 2940 JEFFERSON ST	PA	17001	9 Descript DONATI MO 9	23 tion of Exp ON DAY 18	2015 enditure YEAR 2015		
CCRC Mailing Address P.O. BOX 1495 City CAMP HILL To Whom Paid ARMSTRONG PRINTERY Mailing Address 2940 JEFFERSON ST City HARRISBURG To Whom Paid	PA State	17001 Zip Code (Plus 4)	9 Descript DONATI MO 9 Descript	23 tion of Exp ON DAY 18	2015 enditure YEAR 2015		
CCRC Mailing Address P.O. BOX 1495 City CAMP HILL To Whom Paid ARMSTRONG PRINTERY Mailing Address 2940 JEFFERSON ST City HARRISBURG	PA State	17001 Zip Code (Plus 4)	9 Descript DONATI MO 9 Descript PRINTIN	23 tion of Exp ON DAY 18 tion of Exp	2015 enditure YEAR 2015 enditure		
CCRC Mailing Address P.O. BOX 1495 City CAMP HILL To Whom Paid ARMSTRONG PRINTERY Mailing Address 2940 JEFFERSON ST City HARRISBURG To Whom Paid HBA PAC	PA State	17001 Zip Code (Plus 4)	Description MO Description PRINTIN MO 9	23 tion of Exp ON DAY 18 tion of Exp NG DAY	2015 enditure YEAR 2015 enditure YEAR 2015	\$	792.12

							PAGE 13
To Whom Paid			мо	DAY	YEAR		
W & L SALES			140		ILAK		
Mailing Address 4050 INDUSTRIAL RD.			8	14	2015	\$	209.09
City HARRISBURG	State	Zip Code (Plus 4)	Description of Expenditure FUNDRAISING EXPENSES				
	PA	17110					
To Whom Paid			мо	DAY	YEAR		
FRIENDS OF GREG ROTHMAN			110		12/110		
Mailing Address P.O. BOX 412			7	7	2015	\$	100.00
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	17108	DONATION				
To Whom Paid			мо	DAY	YEAR		
MIDDLETOWN PRESS & amp; J	OURNAL						
Mailing Address 20 S. UNIC	N ST.		10	14	2015	\$	170.00
City MIDDLETOWN	State	Zip Code (Plus 4)	Description of Expenditure				
PA 17057			ADVERTISING				
To Whom Paid			мо	DAY	YEAR		
ARMSTRONG PRINTERY			1.0		1 = 1		
Mailing Address 2940 JEFFERSON ST.		10	9	2015	\$	392.20	
City HARRISBURG	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	17110	PRINTING				
To Whom Paid			мо	DAY	YEAR		
SWATARA TWP. REPUBLICAN	СОММ.		1.10		12/110		
Mailing Address 663 DUNKI	E ST.		10 15 2015			\$	100.00
City HARRISBURG	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	17113	DONATION				
To Whom Paid			мо	DAY	YEAR		
ARMSTRONG PRINTERY			1.0		1 = 1		
Mailing Address 2940 JEFFERSON ST.		10	19	2015	\$	283.02	
City HARRISBURG	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	17110	PRINTING				
Futor Curred T : 1 C F							PAGE TOTAL
Enter Grand Total of Expen	uitures on Page 1, Re	port Cover Page, Item D	,			\$	2,766.43
						I	