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 2008	3059				port ed B		CAN	ANDIDATE COMMITTEE LOBBYIST					Г				
Name of Filing C	Committee, Candid	ate or L	obbyist:		BET	TTER	GOV	ERNME	NT	FOR	PA							
Street Address:																		
City:	BRESSLER							State:		PA			Zip Code: 17113					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRI PRIMAR	IDAY PRE Y	-	2.		30 DAY P PRIMARY					AMENDMENT REPORT?		Yes]	Vo	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRI	iday pri Dn	E-	5. X	30 DA		P	OST-	6.		TERMINA REPORT?		Yes] [No	\
report type)	ANNUAL REPORT	7.	Year 20)15				NG MET					PAPER		\	DIS	KETTE	
Name of Office S	Sought by Candida	te:	-					DATE	OI	F ELE	CTIO	N	District Number	Office Code	Pa	rty Co	de Cou Cod	
								МО		DAY	YE	AR	Number	Code			lcou	
									11		3	2015		(SEE IN	STRUCTI	ONS FO	R CODES	5)
•	Receipts and	МО	DAY	YEAF	₹			МО		DAY	ΥI	EAR	FO	R OFFI	CE USE	ONL	Y	
Expenditures	from:		9	15 2	015	T	0		10	:	L9	2015						
A. Amount Bro	ught Forward Froi	n Last R	eport				\$				6,8	311.60						
B. Total Monet	ary Contributions	And Rec	eipts (Fı	rom Sche	edule	e I)	\$				8,2	200.00						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$	•										
D. Total Expenditures (From Schedule III)							\$				2,7	66.43						
E. Ending Cash Balance (Subtract Line D From Line C)							\$				12,2	45.17						
F. Value Of In-	Kind Contribution	s Receiv	ed (Fron	n Schedu	ıle I	I)	\$					0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule	e IV)			\$ 0.00											
				AFF	-ID/	AVI	ΓSE	CTIO	N									
PART I - If this is	s a Committee rep	ort, trea	surer si	gn here.	If th	his is	a Car	ndidate	re	port, c	andi	date sig	ın here.					
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	e attached	l schedule	s file	ed on	paper	or by ele	ectr	onic m	edium	, are to t	he best of	my kno	wledge	and b	elief , t	rue
Sworn to and subs	cribed before me this day of	5	20						•		S	ignature	of Persor	Submit	ting Re	port		_
	Signatu	ıre	_				-		•				Print	ed Name	•			
My Commission Ex	cpires								-				Emai	ı				_
	МО	D	AY	YR						Are	ea Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authoriz	zed Comr	nitte	ee, C	andid	ate sha	all s	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of red.	ny knowle	edge and	belief this	s poli	itical	comm	ittee ha	s no	ot viola	ted an	y provisi	ions of the	act of J	une 3,1	937 (1	P.L. 133	з,
Sworn to and subso	ribed before me this											Si	ignature o	f Candid	ate			-
	day of		_ 20 _				-						Printe	d Name				-
Mu Committee:	Signature						-		-				Emai	ı				_
My Commission Exp	ures 																	_
	МО	Di	AY	YF	2		-			Area	Code		Da	ytime T	elepho	ne Nui	nber	_

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>L5</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 Page 1, Page 2, 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 Committee or Candidate				Reporting Period						
				Fro	om:		To			
			·			DATE			AMOUNT	
Full Name of Contributing	Committee				мо	DAY	YEAR			
Mailing Address								\$	0.00	
City	S	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: <u>9/15/2015</u> To:

DATE

10/19/2015

AMOUNT

				DATE		AMOUNT
Full Name of Contributor			мо	DAY	YEAR	
DUSTIN A. GREEN						
Mailing Address						\$ 250.00
City MIDDLETOWN	State	Zip Code (Plus 4)	6	7	2015	
	PA	17057				
Full Name of Contributor			мо	DAY	YEAR	
DOMINIC D. DI FRANCESCO, II			1-10	DAI	ILAK	
Mailing Address						\$ 250.00
City MIDDLETOWN	State	Zip Code (Plus 4)	9	17	2015	
	PA	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	ame of Filing Committee or Candidate		Reporting Period						
			From:			То:			
				DA	TE		А	MOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR	\$		0.00
Mailing Address							7 *		0.00
City	State	Zip Cod	e (Plus 4)						
1	I	ı			ı	<u> </u>			
		_		_				PAGE TOT	AL
Enter Grand Total of Part C on Scheo	lule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$		0.00

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.

Name of Filing Committee or Candidate

(Exclude contributions from political committees reported in Part C.)

Reporting Period

BETTER GOVERNMENT FOR PA			ı	From	:	9/15/2	<u>015</u> To	:	10/1	<u>9/2015</u>
					DA	TE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR	Ι.		500.00
CAMPUS HEIGHTS ASSOCIATES, I LP					140	DAI	ILAK	\$		500.00
Mailing Address					6	22	2015			
City SOUTHEASTERN	State	Zip	Code (Plus 4)		ŭ	22	2013			
	PA	l ₁₉₃	399		l					
Employer Name CAMPUS HEIGHTS					Occupat	ion	DEVELO	PER		
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip (Code (Plu	ıs 4)
			SOUTHEASTE	ERN		PA		1939	99	
Full Name of Contributor		•								
CAMPUS HEIGHTS ASSOCIATES, I LP					МО	DAY	YEAR	\$		500.00
Mailing Address							2015	1		
City SOUTHEASTERN	State	Zip	Code (Plus 4)		6	22	2015			
	l _{PA}	 ₁₉₃	399							
Employer Name CAMPUS HEIGHTS					Occupat	ion	DEVELO	PFR		
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip (Code (Plu	ıs 4)
Employer Mailing Address/Principal Plac	e of Business		City SOUTHEASTE	ERN		State PA		Zip (-	ıs 4)
	e of Business		-	ERN				-	-	ıs 4)
Full Name of Contributor	e of Business		-	ERN	мо		YEAR	-	-	1,000.00
Full Name of Contributor TODD F. TRUNTZ, ESQ.	e of Business		-	ERN		PA DAY		1939	-	
Full Name of Contributor TODD F. TRUNTZ, ESQ. Mailing Address	e of Business		-		мо 9	РА	YEAR 2015	1939	-	
Full Name of Contributor TODD F. TRUNTZ, ESQ. Mailing Address	State	Zip	SOUTHEASTE			PA DAY		1939	-	
Full Name of Contributor TODD F. TRUNTZ, ESQ. Mailing Address City MIDDLETOWN	State PA		SOUTHEASTE		9	DAY 9	2015	\$	-	
Full Name of Contributor TODD F. TRUNTZ, ESQ. Mailing Address City MIDDLETOWN Employer Name SAIDIS, SULLIVAN, Re	State PA OGERS	Zip 170	SOUTHEASTE Code (Plus 4)			DAY 9		1939 \$	99	1,000.00
Full Name of Contributor TODD F. TRUNTZ, ESQ. Mailing Address City MIDDLETOWN	State PA OGERS	Zip 170	Code (Plus 4)		9	DAY 9 ion State	2015	1939 \$ EY Zip (99 Code (Plu	1,000.00
Full Name of Contributor TODD F. TRUNTZ, ESQ. Mailing Address City MIDDLETOWN Employer Name SAIDIS, SULLIVAN, Re Employer Mailing Address/Principal Place	State PA OGERS	Zip 170	SOUTHEASTE Code (Plus 4)		9	DAY 9	2015	1939 \$	99 Code (Plu	1,000.00
Full Name of Contributor TODD F. TRUNTZ, ESQ. Mailing Address City MIDDLETOWN Employer Name SAIDIS, SULLIVAN, Re Employer Mailing Address/Principal Place Full Name of Contributor	State PA OGERS	Zip 170	Code (Plus 4)		9	DAY 9 ion State	2015	1939 \$ EY Zip (99 Code (Plu	1,000.00
Full Name of Contributor TODD F. TRUNTZ, ESQ. Mailing Address City MIDDLETOWN Employer Name SAIDIS, SULLIVAN, Re Employer Mailing Address/Principal Place Full Name of Contributor J. ALEX HARTZLER	State PA OGERS	Zip 170	Code (Plus 4)		9 Occupat	DAY 9 ion State PA	2015 ATTORN	1939 \$ \$ EY Zip (99 Code (Plu	1,000.00
Full Name of Contributor TODD F. TRUNTZ, ESQ. Mailing Address City MIDDLETOWN Employer Name SAIDIS, SULLIVAN, Re Employer Mailing Address/Principal Place Full Name of Contributor J. ALEX HARTZLER Mailing Address	State PA OGERS Se of Business	Zip 170	Code (Plus 4) 057 City LEMOYNE	,	9 Occupat	DAY 9 ion State PA	2015 ATTORN	\$ SEY Zip (1704	99 Code (Plu	1,000.00
Full Name of Contributor TODD F. TRUNTZ, ESQ. Mailing Address City MIDDLETOWN Employer Name SAIDIS, SULLIVAN, Re Employer Mailing Address/Principal Place Full Name of Contributor J. ALEX HARTZLER	State PA OGERS Se of Business State	Zip 170	Code (Plus 4) Coty LEMOYNE Code (Plus 4)	,	9 Occupat	PA DAY 9 ion State PA DAY	2015 ATTORN YEAR	\$ SEY Zip (1704	99 Code (Plu	1,000.00
Full Name of Contributor TODD F. TRUNTZ, ESQ. Mailing Address City MIDDLETOWN Employer Name SAIDIS, SULLIVAN, Re Employer Mailing Address/Principal Place Full Name of Contributor J. ALEX HARTZLER Mailing Address City HARRISBURG	State PA OGERS Se of Business	Zip 170	Code (Plus 4) Coty LEMOYNE Code (Plus 4)	,	9 Occupat	PA DAY 9 ion State PA DAY 17	2015 ATTORN YEAR 2015	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	99 Code (Plu	1,000.00
Full Name of Contributor TODD F. TRUNTZ, ESQ. Mailing Address City MIDDLETOWN Employer Name SAIDIS, SULLIVAN, Re Employer Mailing Address/Principal Place Full Name of Contributor J. ALEX HARTZLER Mailing Address City HARRISBURG Employer Name WCI PARTNERS	State PA OGERS Se of Business State PA	Zip 170	Code (Plus 4) DESTRUCTION OF THE PROPERTY OF T	,	9 Occupat	PA DAY 9 ion State PA DAY 17	2015 ATTORN YEAR	1939 \$ SEY Zip (1704 5 5 5 5 5 5 5 5 5	20 de (Pl u	1,000.00 as 4) 3,750.00
Full Name of Contributor TODD F. TRUNTZ, ESQ. Mailing Address City MIDDLETOWN Employer Name SAIDIS, SULLIVAN, Re Employer Mailing Address/Principal Place Full Name of Contributor J. ALEX HARTZLER Mailing Address City HARRISBURG	State PA OGERS Se of Business State PA	Zip 170	Code (Plus 4) Coty LEMOYNE Code (Plus 4)		9 Occupat	PA DAY 9 ion State PA DAY 17	2015 ATTORN YEAR 2015	1939 \$ SEY Zip (1704 5 5 5 5 5 5 5 5 5	Code (Plu	1,000.00 as 4) 3,750.00

Full N	III Name of Contributor				мо	DAY	YEAR	\$ 1,950.00		
TANY	A A. SMITH							1,950.00		
Mailing Address				9	18	2015				
City	MAPLE PARK	State	Zi	p Code (Plus 4)		10	2013			
		l IL	60	0151						
Emplo	oyer Name DEUNET				Occupat	Occupation VP				
Employer Mailing Address/Principal Place of Business				City		State		Zip Code (Plus 4)		
				SYCAMORE		IL		60178		

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:			То:		
		'			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	lus 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:	10/19/2015
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	ame of Filing Committee or Candidate				Reporting Period				
						То:			
				DATE			AMOUNT		
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 Sche Section 2.	dule II, In-Kind (Contributions Detai	iled Sum	mary Pag	je,		PAGE TOTAL		
						\$	(0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	ame of Filing Committee or Candidate				porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
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:	10/19/2015

					DATE		AMOUNT		
To Whom Paid				мо	DAY	YEAR			
EE SMITH DESIGNS					DAI	ILAK			
Mailing Address				10	8	2015	\$	125.00	
City CAMP HILL State Zip Code (Plus 4)			Descrip						
		PA	17011	GRAPHIC DESIGN					
To Whom Paid				мо	DAY	YEAR			
DCCRW				МО	DAI	ILAK			
Mailing Address				9	28	2015	\$	150.00	
City HARRISBURG State Zip Code (Plus 4)			Description of Expenditure						
PA 17110				DONATION					
To Whom Paid					DAY	YEAR			
DAUPHIN COUNTY REPUB	BLICAN COMMI	TTEE		МО	DAI	ILAK			
Mailing Address			9	23	2015	\$	250.00		
City HARRISBURG State Zip Code (Plus 4)			Description of Expenditure						
PA 17110				DONATION					
To Whom Paid				мо	DAY	YEAR			
CCRC				110		1 = July			
Mailing Address			9	23	2015	\$	45.00		
City CAMP HILL State Zip Code (Plus 4)			Description of Expenditure						
PA 17001				DONATION					
To Whom Paid				мо	DAY	YEAR			
ARMSTRONG PRINTERY				1-10		1 = July			
Mailing Address				9	18	2015	\$	792.12	
City HARRISBURG		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	ı		
PA 17110				PRINTING					
To Whom Paid				мо	DAY	YEAR			
HBA PAC									
Mailing Address			9	14	2015	\$	150.00		
City HARRISBURG State Zip Code (Plus 4) PA 17110			Description of Expenditure						
			DONAT	ION					

								PAGE 13		
To Wh	om Paid			мо	DAY	YEAR				
W & L SALES						ILAK				
Mailing Address				8	14	2015	\$	209.09		
City	HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	PA 17110 FUNDRAISI				AISING EX	PENSES				
To Wh	om Paid			мо	DAY	YEAR				
FRIENDS OF GREG ROTHMAN										
Mailing Address				7	7	2015	\$	100.00		
City	HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	PA 17108				DONATION					
To Wh	om Paid			мо	DAY	YEAR				
MIDDLETOWN PRESS & amp; JOURNAL										
Mailing	g Address			10	14	2015	\$	170.00		
City	MIDDLETOWN	State	Zip Code (Plus 4)	Descrip	Description of Expenditure					
	PA 17057 ADVERTISING									
To Wh	om Paid			мо	DAY	YEAR				
ARMSTRONG PRINTERY										
Mailing Address					9	2015	\$	392.20		
City	HARRISBURG State Zip Code (Plus 4)			Description of Expenditure						
		PA	17110	PRINTI	PRINTING					
To Whom Paid				мо	DAY	YEAR				
SWAT	ARA TWP. REPUBLICAN COMM	1.								
Mailin	g Address			10	15	2015	\$	100.00		
City	HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
		PA	17113	DONAT	ION					
To Wh	om Paid			мо	DAY	YEAR				
ARMSTRONG PRINTERY										
Mailing Address				10	19	2015	\$	283.02		
City	HARRISBURG	State	Zip Code (Plus 4)	Description of Expenditure						
	PA 17110 PRINTING									
Emt	Cunnel Total of Francisco	on on Doss 1 Ds	mout Cover Door It	_				PAGE TOTAL		
⊏nter	Grand Total of Expenditur	es on Page 1, Re	port Cover Page, Item	u.			\$	2,766.43		