

Commonwealth of Pennsylvania

# 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 ST.										
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.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.X	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	
		9	15	2015	TO	10	19	2015		
A. Amount Brought Forward From Last Report				\$		6,811.60				
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		8,200.00				
C. Total Funds Available (Sum Of Lines A and B)				\$		15,011.60				
D. Total Expenditures (From Schedule III)				\$		2,766.43				
E. Ending Cash Balance (Subtract Line D From Line C)				\$		12,245.17				
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>9/15/2015</u> To: <u>10/19/2015</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 0.00

<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>	\$ 500.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 500.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 0.00
<b>All Other Contributions (Part D)</b>	\$ 7,700.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 7,700.00

<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>	\$ 8,200.00
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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>9/15/2015</u> To: <u>10/19/2015</u>
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				DATE	AMOUNT	
<b>Full Name of Contributor</b> DUSTIN A. GREEN			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 1819 BONNIE BLUE LANE			6	7	2015	
<b>City</b> MIDDLETOWN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17057				

<b>Full Name of Contributor</b> DOMINIC D. DI FRANCESCO, II			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b> 1871 OHARA LANE			9	17	2015	
<b>City</b> MIDDLETOWN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17057				

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

<b>PAGE TOTAL</b>
\$ 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: <span style="margin-left: 100px;">To:</span>

	DATE			AMOUNT			
Full Name of Contributing Committee	MO	DAY	YEAR				
Mailing Address				\$ 0.00			
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%; padding: 5px;">City</td> <td style="width: 20%; padding: 5px;">State</td> <td style="width: 50%; padding: 5px;">Zip Code (Plus 4)</td> </tr> </table>	City	State	Zip Code (Plus 4)				
City	State	Zip Code (Plus 4)					

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

<b>PAGE TOTAL</b>
\$ 0.00

**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>9/15/2015</u> To: <u>10/19/2015</u>
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				DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR		
CAMPUS HEIGHTS ASSOCIATES, I LP					
<b>Mailing Address</b> P.O. BOX 222	6	22	2015	\$	500.00
<b>City</b> SOUTHEASTERN <b>State</b> PA <b>Zip Code (Plus 4)</b> 19399					
<b>Employer Name</b> CAMPUS HEIGHTS	<b>Occupation</b> DEVELOPER				
<b>Employer Mailing Address/Principal Place of Business</b> P.O. BOX 222	<b>City</b> SOUTHEASTERN		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19399	

Full Name of Contributor	MO	DAY	YEAR		
CAMPUS HEIGHTS ASSOCIATES, I LP					
<b>Mailing Address</b> P.O. BOX 222	6	22	2015	\$	500.00
<b>City</b> SOUTHEASTERN <b>State</b> PA <b>Zip Code (Plus 4)</b> 19399					
<b>Employer Name</b> CAMPUS HEIGHTS	<b>Occupation</b> DEVELOPER				
<b>Employer Mailing Address/Principal Place of Business</b> P.O. BOX 222	<b>City</b> SOUTHEASTERN		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19399	

Full Name of Contributor	MO	DAY	YEAR		
TODD F. TRUNTZ, ESQ.					
<b>Mailing Address</b> 1813 SCARLETT LANE	9	9	2015	\$	1,000.00
<b>City</b> MIDDLETOWN <b>State</b> PA <b>Zip Code (Plus 4)</b> 17057					
<b>Employer Name</b> SAIDIS, SULLIVAN, ROGERS	<b>Occupation</b> ATTORNEY				
<b>Employer Mailing Address/Principal Place of Business</b> 635 N. 12TH STREET	<b>City</b> LEMOYNE		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17043	

<b>Full Name of Contributor</b> J. ALEX HARTZLER			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 3,750.00
<b>Mailing Address</b> 2921 N. 2ND ST.			9	17	2015	
<b>City</b> HARRISBURG	<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> TANYA A. SMITH			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,950.00
<b>Mailing Address</b> 48 W024 IL RT 38			9	18	2015	
<b>City</b> MAPLE PARK	<b>State</b> IL	<b>Zip Code (Plus 4)</b> 60151				
<b>Employer Name</b> DEUNET			<b>Occupation</b> VP			
<b>Employer Mailing Address/Principal Place of Business</b> 1709 AFTON RD.		<b>City</b> SYCAMORE	<b>State</b> IL	<b>Zip Code (Plus 4)</b> 60178		

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

<b>PAGE TOTAL</b>
\$ 7,700.00

**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>9/15/2015</u> To: <u>10/19/2015</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>\$</b> 0.00
<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>	<b>Reporting Period</b>
BETTER GOVERNMENT FOR PA	From <u>9/15/2015</u> To: <u>10/19/2015</u>

			DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR	
EE SMITH DESIGNS	10	8	2015	\$ 125.00
<b>Mailing Address</b> 2002 COLUMBIA AVE.				
<b>City</b> CAMP HILL				
<b>State</b> PA				
<b>Zip Code (Plus 4)</b> 17011				
<b>Description of Expenditure</b> GRAPHIC DESIGN				
<b>To Whom Paid</b> DCCRW	9	28	2015	\$ 150.00
<b>Mailing Address</b> 2255 PAXTON CHURCH RD.				
<b>City</b> HARRISBURG				
<b>State</b> PA				
<b>Zip Code (Plus 4)</b> 17110				
<b>Description of Expenditure</b> DONATION				
<b>To Whom Paid</b> DAUPHIN COUNTY REPUBLICAN COMMITTEE	9	23	2015	\$ 250.00
<b>Mailing Address</b> 2255 PAXTON CHURCH				
<b>City</b> HARRISBURG				
<b>State</b> PA				
<b>Zip Code (Plus 4)</b> 17110				
<b>Description of Expenditure</b> DONATION				
<b>To Whom Paid</b> CCRC	9	23	2015	\$ 45.00
<b>Mailing Address</b> P.O. BOX 1495				
<b>City</b> CAMP HILL				
<b>State</b> PA				
<b>Zip Code (Plus 4)</b> 17001				
<b>Description of Expenditure</b> DONATION				
<b>To Whom Paid</b> ARMSTRONG PRINTERY	9	18	2015	\$ 792.12
<b>Mailing Address</b> 2940 JEFFERSON ST.				
<b>City</b> HARRISBURG				
<b>State</b> PA				
<b>Zip Code (Plus 4)</b> 17110				
<b>Description of Expenditure</b> PRINTING				

<b>To Whom Paid</b> HBA PAC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 2416 PARK DR.			9	14	2015	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17110	<b>Description of Expenditure</b> DONATION			
<b>To Whom Paid</b> W & L SALES			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 4050 INDUSTRIAL RD.			8	14	2015	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17110	<b>Description of Expenditure</b> FUNDRAISING EXPENSES			
<b>To Whom Paid</b> FRIENDS OF GREG ROTHMAN			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> P.O. BOX 412			7	7	2015	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17108	<b>Description of Expenditure</b> DONATION			
<b>To Whom Paid</b> MIDDLETOWN PRESS & JOURNAL			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 20 S. UNION ST.			10	14	2015	
<b>City</b> MIDDLETOWN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17057	<b>Description of Expenditure</b> ADVERTISING			
<b>To Whom Paid</b> ARMSTRONG PRINTERY			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 2940 JEFFERSON ST.			10	9	2015	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17110	<b>Description of Expenditure</b> PRINTING			
<b>To Whom Paid</b> SWATARA TWP. REPUBLICAN COMM.			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 663 DUNKLE ST.			10	15	2015	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17113	<b>Description of Expenditure</b> DONATION			

<b>To Whom Paid</b> ARMSTRONG PRINTERY			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 2940 JEFFERSON ST.			10	19	2015	\$ 283.02
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17110	<b>Description of Expenditure</b> PRINTING			
<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b> \$ 2,766.43

