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 2014	10264				port ed B		CANE	OID	IDATE COMMITTEE LOBBYIST					ST			
Name of Filing C	Committee, Candid	late or L	obbyist:		REF	ORM	1 PA F	PAC										
Street Address:																		
City:	MANCHESTER	t						State:		PA			Zip Cod	l e: 17	'345			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRI PRIMARY	DAY PRE	-	2.	30 DA		PC	OST-	3.		AMENDMENT Yes REPORT? TERMINATION Yes REPORT?					~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRI ELECTIC	DAY PRE	E-	5.	30 DA		PC	OST-	6. X							\
report type)	ANNUAL REPORT	7.	Year 20	16				NG METI CHECK					PAPER		V	DI	SKETT	E
Name of Office S	Sought by Candida	te:	•					DATE	OF	ELEC	СТІО	N	District Number	Office Code	Pa	rty C	ode C	ounty ode
	,							МО		DAY	YE	AR	Number	Code				Jue
								1	1		8	2016		(SEE IN	STRUCT	ONS	FOR COL	DES)
Summary of Receipts and MO DAY YE.								МО		DAY	YE	AR	FO	R OFFI	CE USI	ON	ILY	
Expenditures	from:		10	25 2	016	T	0	1	.1	2	28	2016						
A. Amount Bro	ught Forward Fror	m Last R	eport				\$	_			97,0	81.59						
B. Total Monet	ary Contributions	And Rec	eipts (Fr	om Sche	dule	e I)	\$		49,000.00									
C. Total Funds Available (Sum Of Lines A and B)							\$:	146,0	81.59						
D. Total Expenditures (From Schedule III)							\$			1	119,3	806.44						
E. Ending Cash	Balance (Subtrac	t Line D	From Lir	ne C)			\$				26,7	75.15						
F. Value Of In-	Kind Contributions	s Receiv	ed (Fron	n Schedu	le I	I)	\$					0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule	IV)			\$			4	108,0	63.55						
				AFF	·ID/	AVI	ΓSE	CTION	١									
	s a Committee rep	-							_	-		_						
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	e attached	l schedule:	s file	d on p	paper	or by ele	ctro	onic me	edium	, are to t	he best of	my kno	wledge	and	belief ,	, true
Sworn to and subs	cribed before me this day of	s	20						-		S	ignature	of Persor	Submit	ting Re	port		
	Signatu	ıre	_				- -		-				Print	ed Name	•			
My Commission Ex	cpires								-				Emai	I				
	мо	D	AY	YR						Are	ea Cod	le	Daytim	e Teleph	one Nu	ımbe	er	
Part II- If this is	a report of a can	didate's	authoriz	ed Comn	nitte	ee, Ca	andid	ate sha	ll s	ign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of ned.	ny knowle	edge and I	belief this	poli	itical	comm	ittee has	no	t violat	ed an	y provisi	ions of the	act of J	une 3,1	.937	(P.L. 1	333,
Sworn to and subso	ribed before me this								•			Si	ignature o	f Candid	ate			一
	day of						-						Printe	d Name				<u> </u>
	Signature						-		_				E *					
My Commission Exp	ires												Emai	1				
	МО	D	AY	YR	ł		•		•	Area	Code		Da	ytime T	elepho	ne N	umber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
REFORM PA PAC	From:	10/25/201	<u>6</u> To:	11/28/2016
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g 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)			\$	0.00
TOTAL for the Reporting	(2)	\$	0.00	
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	15,000.00
All Other Contributions (Part D)			\$	34,000.00
TOTAL for the Reporting	g Period	(3)	\$	49,000.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)				
TOTAL for the Reporting	g 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			\$	49,000.00

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 Candidat	e		Reporting Period							
From						To	1			
					DATE			AMOUNT		
Full Name of Contributing Committee				мо	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.

PAGE TOTAL

0.00

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 Candida	te		Reporting Period						
			From:			To	То:		
					DATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4)							

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

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						
REFORM PA PAC	From:	10/25/2016	То:	11/28/2016			

DATE AMOUNT

Full N	Full Name of Contributing Committee				DAY	YEAR	
SCOT	SCOTT WAGNER FOR SENATE				27(1	1 2711	\$ 15,000.00
Mailin	Mailing Address				23	2016	.,
City	MANCHESTER	State	Zip Code (Plus 4)	11	23	2010	
		PA	17345				

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

PAGE TOTAL \$ 15,000.00

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.

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

Name of Filing Committee or Candidate				Rep	orting Pe	riod				
REFORM PA PAC				Fron	n:	10/25/2	<u>016</u> T	o:	1	1/28/2016
					DA	ATE			АМО	UNT
Full Name of Contributor					мо	DAY	YEAR			
SCOTT HARTMAN					MO	DAT	ILAN		\$	2,000.00
Mailing Address					11	30	201	6		
City YORK	State	Zip	Code (Plus	(4)				Ĭ		
	l _{PA}	17	404							
Employer Name RUTTERS					Occupat	tion	MANAC	SEMI	ENT	
Employer Mailing Address/Principal Plac	e of Business		City			State		Zi	ip Code (Plus 4)
			YORK			PA		17	7404	
Full Name of Contributor					МО	DAY	YEAR			
SCOTT WAGNER					MO	DAT	TEAR		\$	30,000.00
Mailing Address					11	2	201	6		
City YORK	State	Zip	Code (Plus	(4)		_	201	Ĭ		
	l _{PA}	17	405							
Employer Name PENN WASTE					Occupat	tion	OWNE	R		
Employer Mailing Address/Principal Plac	e of Business		City			State		Zi	ip Code (Plus 4)
			YORK			PA		17	7402	
Full Name of Contributor										
STEPHEN POND					МО	DAY	YEAR		\$	2,000.00
Mailing Address					11	2	201			
City GREENSBORO	State	Zip	Code (Plus	4)] **		201	٠		
	l _{NC}	27	404							
Employer Name					Occupat	tion				
Employer Mailing Address/Principal Place	e of Business		City			State		Zi	ip Code (Plus 4)
nter Grand Total of Part C on Schedule I, Detailed Summary Page,				Section	on 3.			-	PAG	E TOTAL
								\$		34,000.00

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:		
		•						AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	.	•		•	•	•	_	
Enton Cuand Total of David	E on Cohodulo I Detailed	Summany Dane	Cookie	4				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 Per	iod							
REFORM PA PAC	From:	<u>10/25/2016</u> To:	11/28/2016						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	R							
TOTAL for the Reporting Pe	eriod (1)	\$	0.00						
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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,		\$	0.00						

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Can	didate		Reporting Period						
			From:				То:		
				DATE			AMOUNT		
Full Name of Contributor				DAY	YEAR				
Mailing Address						7 \$		0.00	
City	State	Zip Code (Plus 4)							
Description of Contribution:	•	•	•	•		·			
					-				
nter Grand Total of Part F on Schedule II, In-Kind Contributions Deta			ailed Summary Page,			PAGE TOTAL		-	
Section 2.						\$		0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Rep	porting	Period			
		From:			То:				
						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	ce of Business	Cit	ty	State	e Zij	o Code(Plus 4)	Descri	ptio	n of Contribution
Enter Grand Total of Part G on Sch	edule II, In-Kir	nd (Contributions D	etaile	ed				PAGE TOTAL
Summary Page, Section 3.									0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting) Period		
REFORM PA PAC	From	10/25/2016	То:	<u>11/28/2016</u>
		DATE		AMOUNT

			DATE				AMOUNT				
To Whom Paid				мо	DAY	YEAR					
MCLAUGHLIN & ASSOC.											
Mailing Address				10	26	2016	\$	33,500.00			
City BLAUVELT State Zip Code (Plus 4)			Description of Expenditure								
NY 10913					POLLING-ERIE						
To Whom Paid				мо	DAY	YEAR					
SRCC				МО	DAI	ILAK					
Mailing Address					28	2016	\$	30,200.00			
City HARRISBURG State Zip Code (Plus 4)				Description of Expenditure							
PA 17102				DONATION							
To Whom Paid				мо	DAY	YEAR					
AMANDA DAVIDSON						ILAK					
Mailing Address					28	2016	\$	49.64			
City YORK State Zip Code (Plus 4)			Description of Expenditure								
PA 17404				REIMBURSEMENT EXP.							
To Whom Paid				мо	DAY	YEAR					
WHITE ROSE					DAI	ILAK					
Mailing Address			11	1	2016	\$	726.46				
City YORK State Zip Code (Plus 4)			Description of Expenditure								
		PA	IN-KIND - SEARS RACE								
To Whom Paid				мо	DAY	YEAR					
ARLINGTON EDITS				М		ILAK					
Mailing Address				11	2	2016	\$	40,000.00			
City ALEXANDRIA		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
		VA	22314	MEDIA BUY-LAUGHLIN							
To Whom Paid				мо	DAY	YEAR					
ROCKWOOD STRATEGIES				МО	DAI	ILAK					
Mailing Address				11	16	2016	\$	2,200.00			
City DOYLESTOWN State Zip Code (Plus 4)			Description of Expenditure								
PA 18902			CONSULTING								
	177										

								,_ 12		
To Wh	om Paid			МО	DAY	YEAR				
REBECCA REAM				1-10		1 = Aux				
Mailing Address				11	4	2016	\$	1,200.00		
City YORK State Zip Code (Plus 4)				Description of Expenditure						
PA 17408				ADMIN FEE						
To Whom Paid					DAY	YEAR				
INTELLIGENT DIRECT						1 2 / u.t				
Mailing Address			11	15	2016	\$	1,044.71			
City	WELLSBORO	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
		PA	16901	MAP						
To Wh	om Paid			МО	DAY	YEAR				
BACCO PIZZERIA					DAI	ILAK				
Mailin	g Address			11	4	2016	\$	43.40		
City	HARRISBURG	State	Zip Code (Plus 4)	Description of Expenditure						
		PA	17102	LUNCH						
To Wh	om Paid			МО	DAY	YEAR				
M&am	p;T BANK			MO	DAI	ILAK				
Mailing Address					8	2016	\$	150.00		
City MANCHESTER State Zip Code (Plus 4) Description of Expendit					enditure					
		PA	17345	SERVICE CHARGE						
To Whom Paid				МО	DAY	YEAR				
MAVERICK FINANCE				1-10		TEAR				
Mailin	g Address			11	16	2016	\$	3,874.07		
City	HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•			
		PA	17101	FUNDRAISING & amp; REIMBURSE						
To Whom Paid				МО	DAY	YEAR				
BMD [DESIGN									
Mailin	g Address			11	16	2016	\$	275.75		
City	WINDSOR	State	Zip Code (Plus 4)	1) Description of Expenditure						
		PA	17366	DESIGN WORK						
To Wh	om Paid			МО	DAY	YEAR				
YORK	CTY. REPUBLICAN COMM	l.		PIO		ILAK				
Mailing Address			11	16	2016	\$	1,000.00			
City YORK		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
PA 17402				DONATION						
To Whom Paid				МО	DAY	YEAR				
REBECCA REAM				14O		ILAK				
Mailing Address			11	18	2016	\$	1,239.59			
City	YORK	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
<u></u>		PA	17408	ADMIN FEE						
1 1										

To Whom Paid	мо	DAY	YEAR							
MAVERICK FINANCE	MO	DA1	ILAK							
Mailing Address	11	18	2016	\$	2,000.00					
City HARRISBURG	Zip Code (Plus 4)	Description of Expenditure								
PA 17101				OCT. CONSULTING FEE						
To Whom Paid				DAY	YEAR					
AMANDA DAVIDSON	МО	DA1	ILAK							
Mailing Address	11	22	2016	\$	572.14					
City YORK	Zip Code (Plus 4)	Description of Expenditure								
PA 17404				NOV. FEE & REIMBURSE						
To Whom Paid REBECCA REAM	мо	DAY	YEAR							
Mailing Address	12	1	2016	\$	1,200.00					
City YORK State Zip Code (Plus 4)			Description of Expenditure							
	PA	17408	ADMINISTRATIVE FEE							
To Whom Paid			МО	DAY	YEAR					
BOOKS A MILLION	MO	DA1	ILAK							
Mailing Address			11	29	2016	\$	13.73			
City YORK State Zip Code (Plus 4) PA 17402			Description of Expenditure							
			BOOKLETS							
To Whom Paid			мо	DAY	YEAR					
BOOKS A MILLION					7 = 7 1111					
Mailing Address				29	2016	\$	16.95			
City YORK	Zip Code (Plus 4)	Description of Expenditure								
PA 17402				BOOKLETS						
Enton Cuand Tatal of Frances	dituuse on Door 1 D	amout Cover Page There					PAGE TOTAL			
Enter Grand Total of Expen	altures on Page 1, R	eport Cover Page, Item D	, .			\$	119,306.44			

STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate				Reporting Period					
REFORM PA PAC			From:	<u>10/25/2016</u> To:				11/28/2016	
					DATE			Outstanding Balance of Debt	
Name of Creditor					DAY	YEAR			
SCOTT WAGNER									
Mailing Address					2	201	5 \$	30,000.00	
City YORK	State Zip Code (Plus 4)			Description of Debt					
	PA	17402		LOAN					
Name of Creditor					DAY	YEAR			
SCOTT WAGNER					DAI	ILAK			
Mailing Address					5	201	5 \$	378,063.55	
City YORK	State	Zip Code (P	lus 4)	us 4) Description of Debt					
PA 17405 LOANS BROUGHT				HT FORWARD					
								PAGE TOTAL	
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							\$	408,063.55	