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 20	008059				port ed B		CANI	DID	ATE		COMN	1ITTEE	✓	LOB	BYIST		
Name of Filing C	ommittee, Can	didate or L	.obbyist:		BET	TER	GOV	ERNME	NT F	FOR F	PA							
Street Address:																		
City:	STEELTON							State:	Ρ	PA			Zip Code: 17113					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRID PRIMARY	AY PRE	-	2. X	30 DA		РО	ST-	3.		AMENDM REPORT?		Yes	N	0	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRID ELECTION		E-	5.	30 DA		РО	ST-	6.		TERMINA REPORT?		Yes	N	0	\
report type)	ANNUAL REPO	RT 7.	Year 201	7				NG METI CHECK					PAPER		\	DISK	ETTE	
Name of Office S	ought by Cand	idate:						DATE	OF	ELEC	CTIO	N	District Number	Office Code	Pai	ty Code	Cour	
								МО	D	PAY	YE	AR			•		•	
								1	.1		7	2017		(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of		МО	DAY	YEAR	₹			МО	D	PAY	YE	AR	FO	R OFFIC	E USE	ONLY		
Expenditures	from:		3 2	8 2	2017	Т	0		5		1	2017						
A. Amount Bro	ught Forward F	rom Last F	Report				\$				24,0	88.79						
B. Total Moneta	ary Contribution	ns And Red	ceipts (Fro	m Sche	edule	ı)	\$				9,5	00.00						
C. Total Funds Available (Sum Of Lines A and B)											33,5	88.79						
D. Total Expend	ditures (From S	chedule I	II)				\$				7,0	00.00						
E. Ending Cash	Balance (Subti	ract Line D	From Line	e C)			\$				26,5	88.79						
F. Value Of In-	Kind Contributi	ons Receiv	red (From	Schedu	ile II	[)	\$					0.00						
G. Unpaid Debt	s And Obligation	ons (From	Schedule 1	(V)			\$					0.00						
				AFF	FIDA	٩VI	T SE	CTIO	١									
PART I - If this is			_						-	-		_			.11			
I swear (or affirm) correct and comple		including th	e attached s	cneaule	s file	a on	paper	or by ele	ctroi	nic me	earum,	, are to t	ne best of	ту кпоч	rieage	and bei	ier , tr	ue
Sworn to and subs	cribed before me day of	this	20						_		S	ignature	of Persor	Submitt	ing Re _l	ort		
	Sign	ature					-		-				Print	ed Name				_
My Commission Ex	pires						_		_				Emai	I				
	МО	D	AY	YR						Are	a Cod	e	Daytim	e Teleph	one Nu	mber		$\underline{}$
Part II- If this is	a report of a c	andidate's	authorize	d Comr	nitte	e, C	andid	ate sha	II si	gn he	re.							
I swear (or affirm) No 320) as amende		of my knowl	ledge and be	elief this	s polit	tical	comm	ittee has	not	violat	ed an	y provisi	ions of the	act of Ju	ine 3,1	937 (P.	L. 133	3,
Sworn to and subsc	ribed before me t day of	his	20						-			Si	ignature o	f Candida	te			_
							-		_				Printe	d Name				-
	Signatu	re					-											_
My Commission Exp	ires												Emai	ı				
	мо		PAY	YF	₹		•		_	Area	Code		Da	ytime Te	lephor	e Num	ber	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
BETTER GOVERNMENT FOR PA	From:	<u>3/28/201</u>	<u>7</u> To:	5/1/2017
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)			\$	0.00
TOTAL for the Reporting	Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	2,000.00
All Other Contributions (Part D)			\$	7,500.00
TOTAL for the Reporting	Period	(3)	\$	9,500.00
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			\$	9,500.00

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:		То	:	
		·		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.

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 Commit	tee or Candidate		Rep	oorting P	eriod			
			Fro	m:		To) :	
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
Mailing Address City	State	Zip Code (Plus 4	4)				\$	0.00

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 Pe	eriod		
BETTER GOVERNMENT FOR PA	From:	3/28/2017	То:	<u>5/1/2017</u>

			DA	TE		AMOUNT	
Full Name of Contributing Committee			мо	DAY	YEAR		
MCNEES PAC				DAI	LAK	\$	2,000.00
Mailing Address			2	28	2017	•	_,000.00
City HARRISBURG	State	Zip Code (Plus 4)	_	20	2017		
	PA	17108					

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

PAGE TOTAL \$ 2,000.00

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 Candid	ame of Filing Committee or Candidate				orting Pe	riod			
BETTER GOVERNMENT FOR PA				Fron	n:	<u>3/28/2</u>	<u>017</u> T o	o:	5/1/2017
					D/	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		\$ 7.500.00
J. ALEX HARTZLER						57.	I Z/IIX		\$ 7,500.00
Mailing Address					3	31	2017	,	
City HARRISBURG	State	Zij	p Code (Plus	4)		31	2017	İ	
	l _{PA}	1 17	7110						
Employer Name WCI PARTNERS					Occupat	ion	PRESID	ENT	Ī
Employer Mailing Address/Principa	l Place of Business		City			State		Zip	Code (Plus 4)
			HARRISBU	RG		PA		17	'102
Enter Grand Total of Part C on S	Schedule I. Detailed S	Sumn	narv Page. S	Sectio	on 3.				PAGE TOTAL
			, . u go, .					\$	7,500.00

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							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	'	1					<u> </u>	
	- C		. .:	_				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 Perio	od	
BETTER GOVERNMENT FOR PA	From:	3/28/2017 To:	5/1/2017
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,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Ca	me of Filing Committee or Candidate Re						
			From:		То:		
				DATE			AMOUNT
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address						 	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:	•		•	•			
				_	Г		
Enter Grand Total of Part F of Section 2.	n Schedule II, In-Ki	nd Contributions Detai	led Sum	nmary Pa	ge,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Rep	porting	Period			
				Fro	m:		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	e of Business	City	у	State	e Zip	Code(Plus 4)	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, In-Kin	nd C	Contributions D	etaile	ed				PAGE TOTAL
Summary Page, Section 3.									0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Pe	eriod		
BETTER GOVERNMENT FOR PA	From	3/28/2017	То:	<u>5/1/2017</u>

			DATE				AMOUNT
To Whom Paid			МО	DAY	YEAR		
MCNALLY FOR JUDGE			MO		ILAK		
Mailing Address				15	2017	\$	1,000.00
City HARRISBURG	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	17106	DONATION				
To Whom Paid				DAY	YEAR		
MORRIS FOR JUDGE					1 = 1 1		
Mailing Address				16	2017	\$	1,000.00
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	17111	DONATION				
To Whom Paid			МО	DAY	YEAR		
LOWER PAXTON GOP							
Mailing Address			3	10	2017	\$	1,500.00
City HARRISBURG	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	17111	DONATION				
To Whom Paid			МО	DAY	YEAR		
CITIZENS FOR TIM SCOTT							
Mailing Address			3	10	2017	\$	1,000.00
City CARLISLE	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	17013	DONATION				
To Whom Paid FRIENDS OF FALESHOCK & WEBSTER				DAY	YEAR		
Mailing Address			4	21	2017	\$	2,500.00
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	17111	DONATION				
							PAGE TOTAL
Enter Grand Total of Expe	enditures on Page 1, Re	port Cover Page, Item D) .			\$	7,000.00