### **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	059			Report Filed E		CA	MDI	DATE		COM	AITTEE	<b>Y</b>	LUBI	31131	
Name of Filing C	Committee, Candid	ate or L	obbyist:	1	BETTER	GOV	ERNN	1ENT	FOR I	PA						
Street Address:																
City:	STEELTON						Stat	e:	PA			Zip Co	de: 17	'113		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2.	30 DA		P	POST-	3.		AMENDN REPORT		Yes	No	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	AY PRE	- 5. <b>X</b>	30 D/		P	POST-	6.		TERMINA REPORT		Yes	No	<b>√</b>
report type)	ANNUAL REPORT	7.	<b>Year</b> 2017				NG MI					PAPER		$\lor$	DISKE"	TTE
Name of Office S	Sought by Candida	te:	•		•		DAT	ΈO	F ELEC	CTIO	N	District Number	Office Code	Par	ty Code	County Code
							МО		DAY	YE	AR		•	•		
								11		7	2017		(SEE IN	STRUCTIO	ONS FOR C	ODES)
Summary of Expenditures	Receipts and	МО	DAY	YEAR			МО		DAY	YE	AR	FC	R OFFI	CE USE	ONLY	
expenditures	irom:		9 19	20	)17 <b>T</b>	0		10	2	23	2017					
A. Amount Bro	ught Forward Fror	n Last R	eport			\$					319.85					
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sche	dule I)	\$				3,5	500.00					
C. Total Funds	Available (Sum Of	Lines A	and B)			\$				32,8	319.85					
D. Total Expenditures (From Schedule III) \$ 6,250.0						50.00										
E. Ending Cash	Balance (Subtrac	Line D	From Line	C)		\$				26,5	69.85					
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedul	e II)	\$					0.00					
G. Unpaid Debt	ts And Obligations	(From S	Schedule I\	/)		\$					0.00					
				AFF	IDAVI	T SE	CTI	NC								
	s a Committee rep	-	_								_		f my knov	wledge	and helie	of true
correct and comple	ete.		o attached Sc	cau.cs	Thea on	pupe	o. <i>D</i> ,	C.CC.			, are to	c best e	T III Y KIIO	cage	una bene	
Sworn to and subs	cribed before me this day of	1	20			_				s	ignature	of Perso	n Submitt	ting Rep	ort	
	Signatu	re				_						Prin	ted Name	•		
My Commission Ex	cpires					_		·				Ema	il			
	МО	D.	AY	YR					Are	a Cod	le	Daytin	e Teleph	one Nu	mber	
	a report of a cand				•				_		_					
No 320) as amende		ny knowle	edge and bel	ief this	political	comm	iittee i	nas n	ot violat	ed an	y provis	ions of th	e act of Ji	une 3,19	937 (P.L.	1333,
Sworn to and subsc	ribed before me this day of		20								s	ignature	of Candida	ate		
						_						Printe	d Name			
My Commission Exp	Signature pires					_						Ema	il			—
	мо	D	AY	YR		-			Area	Code		D	aytime T	elephon	e Numbe	 er

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
BETTER GOVERNMENT FOR PA	From:	9/19/201	<u>7</u> To:	10/23/2017
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)			\$	0.00
All Other Contributions (Part D)			\$	3,500.00
TOTAL for the Reporting	Period	(3)	\$	3,500.00
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 and totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page			\$	3,500.00

#### **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	lame of Filing Committee or Candidate			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 Committee or Cand	idate			Rep	orting P				
				Fro	m:		To	<b>)</b> :	
		_				DATE			AMOUNT
Full Name of Contributor					МО	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code (Plus 4)						
									PAGE TOTAL

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 Cai	ndidate		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Comm	nittee			мо	DAY	YEAR		0.00
Mailing Address							<b>-</b>   \$	0.00
City	State	Zip Code	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C o	on Schedule I, Detaile	d Summary 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.

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

Name of Filing	Committee or Candidate			Rep	orting Pe	riod				
BETTER GOVE	RNMENT FOR PA			Fro	m:	<u>9/19/2</u>	. <u>017</u> <b>1</b>	To: <u>10/23/2017</u>		
					D/	ATE			AMOUNT	
Full Name of Co	ontributor				МО	DAY	YEAR	<b>≀</b>   \$	3,500.00	
J. ALEX HARTZ	'LER								3,300.00	
Mailing Addres	s				10	23	201	7		
City HARRIS	SBURG	State	Zip Code (P	us 4)	] 10	23	201	´		
		l <sub>PA</sub>	17110							
Employer Name	e WCI PARTNERS				Occupat	ion	MANA	GING I	PARTNER	
Employer Maili	ng Address/Principal Plac	e of Business	City			State		Zip	Code (Plus 4)	
			HBG			PA		171	.02	
Enter Grand T	otal of Part C on Sche	dule I, Detailed S	ummary Pag	e, Secti	on 3.			\$	<b>PAGE TOTAL</b> 3,500.00	

## 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 of	or Candidate		Report	ing Peri	od		
			From:			To:	
				D	ATE		AMOUNT
Full Name				мо	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (	Plus 4)				
Receipt Description	•	•					
Enter Grand Total of Part I	on Schodulo I. Dotailed	Summary Dage	Section	4			PAGE TOTAL
cincer Granu Total Of Part I	on Schedule 1, Detalled	Summary Page,	Section	<b>4.</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

Name of Filing Committee or Candidate	Reporting Perio	d	
BETTER GOVERNMENT FOR PA	From:	<u>9/19/2017</u> <b>To:</b>	10/23/2017
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, 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 Period					
			From:			To:		
				DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address		_				<b> </b>		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				Re	porting	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	′	Stat	e Zip	Code(Plus 4)	Desci	ript	ion of Contribution	on
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	ontributions De	etaile	ed				PAGE TO	ΓAL
Summary Page, Section 3.	<b></b>									0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Reporting Period						
BETTER GOVERNMENT FOR PA	From	9/19/2	<u> 2017</u>	То:	10/23/2017	
		DATE			AMOUNT	
To Whom Paid						

				DATE			AMOUNT	
To Whom Paid			МО	DAY	YEAR			
LALLEY FOR JUDGE			MO	DAT	ILAK			
Mailing Address			6	20	2017	\$	500.00	
City HBG	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	17101	DONATION					
To Whom Paid			МО	DAY	YEAR			
SUSQUEHANNA TWP GOP			140		ILAK			
Mailing Address				7	2017	\$	250.00	
City HBG State Zip Code (Plus 4)				tion of Exp	enditure			
PA 17109 I				ON				
To Whom Paid			МО	DAY	YEAR			
4H REPUBLICAN COMMITTEE			1-10		1 <b>L</b> /110			
Mailing Address			9	14	2017	\$	500.00	
City HUMMELSTOWN	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
	PA	17036	DONATI	ON				
To Whom Paid			МО	DAY	YEAR			
US POSTMASTER			1-10		ILAK			
Mailing Address			10	18	2017	\$	5,000.00	
City HBG State Zip Code (Plus 4)				tion of Exp	enditure			
	PA	17107	POSTAG	iE				
							PAGE TOTAL	
Enter Grand Total of Expenditures	on Page 1, Re	port Cover Page, Item D				\$	6,250.00	