

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:											
City: STEELTON				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.	30 DAY POST-ELECTION	6. X	TERMINATION REPORT?	Yes	No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2017	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	7	2017				
Summary of Receipts and Expenditures from:					MO	DAY	YEAR	FOR OFFICE USE ONLY			
					10	24	2017				
					11	27	2017				
A. Amount Brought Forward From Last Report					\$ 26,569.85						
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 10,500.00						
C. Total Funds Available (Sum Of Lines A and B)					\$ 37,069.85						
D. Total Expenditures (From Schedule III)					\$ 11,811.16						
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 25,258.69						
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 of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

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 of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
BETTER GOVERNMENT FOR PA	From: <u>10/24/2017</u> To: <u>11/27/2017</u>

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)	\$ 2,500.00
All Other Contributions (Part D)	\$ 8,000.00
TOTAL for the Reporting Period (3)	\$ 10,500.00

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 enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 10,500.00
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<div> <div> <div>PART A</div> <div>CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES</div> <div>\$50.01 TO \$250.00</div> <div>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.</div> </div> </div>							
Name of Filing Committee or Candidate				Reporting Period			
				From:	To:		
				DATE	AMOUNT		
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					

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

PAGE TOTAL	
\$	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)**

Name of Filing Committee or Candidate	Reporting Period
	From: To:

				DATE			AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00	
Mailing Address								
City	State	Zip Code (Plus 4)						

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

PAGE TOTAL
\$ 0.00

				DATE			AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$	2,500.00
ECKERT SEAMANS PA GOVERNMENT PAC								
Mailing Address				11	27	2017		
City	PITTSBURGH	State	PA				Zip Code (Plus 4)	15219

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

PAGE TOTAL	
\$	2,500.00

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.)**

Name of Filing Committee or Candidate BETTER GOVERNMENT FOR PA	Reporting Period From: <u>10/24/2017</u> To: <u>11/27/2017</u>
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				DATE	AMOUNT		
Full Name of Contributor MATTHEW KIRK				MO	DAY	YEAR	\$ 1,000.00
Mailing Address				10	31	2017	
City LANCASTER	State PA	Zip Code (Plus 4) 17601					
Employer Name BENECON				Occupation VP			
Employer Mailing Address/Principal Place of Business			City LITITZ	State PA	Zip Code (Plus 4) 17543		
Full Name of Contributor JOEL E. CALLIHAN				MO	DAY	YEAR	\$ 1,000.00
Mailing Address				10	31	2017	
City EPHRATA	State PA	Zip Code (Plus 4) 17522					
Employer Name BENECON				Occupation CFO			
Employer Mailing Address/Principal Place of Business			City LITITZ	State PA	Zip Code (Plus 4) 17543		
Full Name of Contributor FRANK BRESCIA III				MO	DAY	YEAR	\$ 3,000.00
Mailing Address				11	7	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17112					
Employer Name BRESCIA ORTHOPEDICS				Occupation PRESIDENT			
Employer Mailing Address/Principal Place of Business			City HARRISBURG	State PA	Zip Code (Plus 4) 17112		
Full Name of Contributor TIMOTHY WHALEN				MO	DAY	YEAR	\$ 2,000.00
Mailing Address				11	7	2017	
City LANCASTER	State PA	Zip Code (Plus 4) 17601					
Employer Name WHALEN INSURANCE				Occupation INSURANCE SALES			
Employer Mailing Address/Principal Place of Business			City LANCASTER	State PA	Zip Code (Plus 4) 17601		

Full Name of Contributor MATTHEW TUNNELL			MO	DAY	YEAR	\$ 1,000.00
Mailing Address			11	7	2017	
City HUMMELSTOWN	State PA	Zip Code (Plus 4) 17036				
Employer Name LIFT DEVELOPMENT			Occupation PRESIDENT			
Employer Mailing Address/Principal Place of Business		City MIDDLETOWN	State PA	Zip Code (Plus 4) 17057		

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

PAGE TOTAL
\$ 8,000.00

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.

Name of Filing Committee or Candidate	Reporting Period From: To:
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			DATE			AMOUNT	
Full Name			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					
Receipt Description							

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL	
\$	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	
BETTER GOVERNMENT FOR PA		From: <u>10/24/2017</u> To: <u>11/27/2017</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period		(1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period		(2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period		(3)	\$ 0.00
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.)			\$ 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:
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						PAGE TOTAL \$ 0.00

SCHEDULE II
PART G
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OVER \$250.00

Name of Filing Committee or Candidate	Reporting Period
	From: To:

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
BETTER GOVERNMENT FOR PA	From <u>10/24/2017</u> To: <u>11/27/2017</u>

				DATE	AMOUNT		
To Whom Paid COMMITTEE TO ELECT CHRISTINE HOLMAN				MO	DAY	YEAR	\$ 250.00
Mailing Address				10	31	2017	
City	MAHANAY CITY	State	PA	Zip Code (Plus 4)	17113	Description of Expenditure DONATION	
To Whom Paid ARMSTRONG PRINTERY				MO	DAY	YEAR	\$ 392.20
Mailing Address				11	1	2017	
City	HARRISBURG	State	PA	Zip Code (Plus 4)	17110	Description of Expenditure PRINTING	
To Whom Paid DAVID FEIDT				MO	DAY	YEAR	\$ 5,000.00
Mailing Address				11	6	2017	
City	HUMMELSTOWN	State	PA	Zip Code (Plus 4)	17036	Description of Expenditure REIMBURSEMENT	
To Whom Paid EE SMITH DESIGNS				MO	DAY	YEAR	\$ 600.00
Mailing Address				11	9	2017	
City	CAMP HILL	State	PA	Zip Code (Plus 4)	17011	Description of Expenditure DESIGN	
To Whom Paid ARMSTRONG PRINTERY				MO	DAY	YEAR	\$ 481.24
Mailing Address				11	7	2017	
City	HARRISBURG	State	PA	Zip Code (Plus 4)	17110	Description of Expenditure PRINTING	
To Whom Paid FRIENDS OF FALESHOCK & WEBSTER				MO	DAY	YEAR	\$ 1,728.76
Mailing Address				11	8	2017	
City	HARRISBURG	State	PA	Zip Code (Plus 4)	17111	Description of Expenditure DONATION	

To Whom Paid FRIENDS OF JUSTIN WARREN			MO	DAY	YEAR	\$ 2,600.00
Mailing Address			11	8	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17112	Description of Expenditure DONATION			

To Whom Paid FRIENDS OF WILLIAM JONES			MO	DAY	YEAR	\$ 758.96
Mailing Address			11	7	2017	
City STEELTON	State PA	Zip Code (Plus 4) 17113	Description of Expenditure DONATION			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 11,811.16

