#### **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 :	iler Identification 20140264 Report Filed By :							СОМ	4ITTEE	✓	LOBI	BYIST					
Name of Filing C	Committee, Candid	late or L	obbyist:	•	REF	ORM	1 PA P	AC									
Street Address:	PO BOX 141																
City:	MANCHESTER	₹						State:	PA			Zip Cod	<b>le:</b> 17	7345			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	- [	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No	•	<b>/</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	:- !	5.	30 DA ELECT		POST-	6.		TERMINA REPORT		Yes	No	•	<b>/</b>
report type)	ANNUAL REPORT	7. <b>X</b>	<b>Year</b> 2018					IG METH CHECK O				PAPER		$\overline{}$	DISKE	TTE	
Name of Office S	Sought by Candida	ite:	•					DATE (	)F ELE	CTIC	N	District Number	Office Code	Par	ty Code	Count	ty
								МО	DAY	YI	EAR	- rumber	couc	<u> </u>		couc	
								11	-	6	2018		(SEE IN	STRUCTIO	ONS FOR C	ODES)	
•	Receipts and	МО	DAY	YEAR				МО	DAY	Y	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	5 Trom:		11 27	20	018	Т	0	12	2	31	2018						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			;	291.07						
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule	eI)	\$			10,0	000.00						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			10,	291.07						
D. Total Expen	ditures (From Sch	edule II	I)				\$			9,3	371.13						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C	)			\$			ç	14.94						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	hedul	le II	()	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)	ı			\$			408,0	63.55			•			
				AFF	IDA	٩VI	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign h	ere. 1	[f thi	is is	a Can	didate r	eport, e	candi	date sig	ın here.					
I swear (or affirm) correct and comple	) that this report, inc ete.	luding the	e attached sche	edules	filed	d on	paper (	or by elec	tronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , tru	ie,
Sworn to and subs	cribed before me thi day of	s	20							5	Signature	of Perso	n Submit	ting Rep	ort		_
	Signatu	ıre					- -					Prin	ted Name	9			-
My Commission Ex	kpires											Ema	il				-
	мо	D	AY	YR					Ar	ea Cod	le	Daytim	e Telepi	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized C	Comm	itte	e, C	andida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of red.	ny knowl	edge and belief	f this	polit	tical	commi	ittee has ı	not viola	ted ar	y provis	ions of the	e act of J	une 3,1	937 (P.L.	. 1333	,
Sworn to and subsc	ribed before me this										s	ignature o	of Candid	ate			-
	day of ————————————————————————————————————						_					Printe	d Name				-
	Signature						-										_
My Commission Exp	pires											Ema	il				
	мо	D	AY	YR			•		Area	Code		Da	aytime T	elephon	e Numbe	er	-

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
REFORM PA PAC	From:	11/27/201	<u>8</u> To:	12/31/2018
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)			\$	5,000.00
All Other Contributions (Part D)			\$	5,000.00
TOTAL for the Reporting	Period	(3)	\$	10,000.00
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			\$	10,000.00

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate val							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fr	om:		То	:	
		•			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
	•	•		•	•	•	$\overline{}$	PAGE TOTAL

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	ite		Rep	oorting P	eriod			
			Fro	m:		To	o:	
					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.

**PAGE TOTAL \$**0.00

#### **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 F	Period		
REFORM PA PAC	From:	11/27/2018	То:	12/31/2018

DATE AMOUNT

Full Name of Contributing Committee SCOTT WAGNER FOR SENATE	МО	DAY	YEAR			
Mailing Address PO BOX 141				_		\$ 5,000.00
City MANCHESTER	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17345	1	2	2018	

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

**PAGE TOTAL \$** 5,000.00

### 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			Fror	m:	11/27/2	<u>018</u> То	: 12/31/2018
				D	ATE		AMOUNT
Full Name of Contributor RUSS WANTZ				МО	DAY	YEAR	
Mailing 1465 COFFEE MILL L	ANE				10	2010	\$ 5,000.00
City YORK	State	Zip Code (Plus	5 4)	4	13	2018	
	PA	17406					
Employer Name SCHAAD				Occupa	tion	WNER	•
Employer Mailing Address/Principal Place Business	ce of	City			State		Zip Code (Plus 4)
1114 ROOSEVELT AVE		YORK			PA		17404
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.		4	<b>PAGE TOTAL</b> 5,000.00

## 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 Car	ndidate		Report	ing Perio	od			
			From:			To:		
				D	ATE		A	MOUNT
Full Name				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	·	·						
Enter Grand Total of Part E on	Schedule T. Detailed	d Summary Page	Section	4			P	AGE TOTAL
	2, <b>200</b>		22300				\$	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 Pe	riod	
REFORM PA PAC	From:	11/27/2018 To:	12/31/2018
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTO	OR	
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
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 Candidate			Reporting	Period			
			From:			To:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Sche	dule II. In-Kind (	Contributions Deta	iled Sum	marv Pac	ıe.		PAGE TOTAL
Section 2.	<b>,</b>			<b>,</b>		\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate					Re	porting l	Period			
					Fro	om:		To:		
					•		DATE			AMOUNT
Full Name of Contributor						МО	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupa	ition		•	
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iption	of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, I	in-Kind	Contributi	ons De	etaile	ed				<b>PAGE TOTAL</b> 0.00

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	ndidate		Reporti	ng Period			
REFORM PA PAC			From	11/2	7/2018	То:	12/31/2018
				DATE			AMOUNT
To Whom Paid HAMILTON & MUSSER			МО	DAY	YEAR		
Mailing Address 176 CUMBER	LAND PARKWAY		1	3	2018	\$	975.00
City MECHANICSBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	<u> </u>	
	PA	17055	TAXES				
To Whom Paid AMANDA DAVIDSON			МО	DAY	YEAR		
Mailing Address 2555 COLDS	PRING RD.		1	3	2018	\$	567.17
City YORK	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	<u> </u>	
	PA	17404	1	RY FEE / PI			
To Whom Paid AMANDA DAVIDSON			МО	DAY	YEAR		
Mailing Address 2555 COLDS	PRING RD.		1	25	2019	\$	567.19
City YORK	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	17404		ILY RETAIN			
<b>To Whom Paid</b> M&T BANK			мо	DAY	YEAR		
Mailing Address 4301 N. GEO	PRGE ST. EXT.		1	9	2018	\$	5.00
City MANCHESTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	<u> </u>	
	PA	17345		CE CHARGE			
To Whom Paid STAPLES	•	·	МО	DAY	YEAR		
Mailing Address 2915 CONCO	ORD RD.		1	22	2018	\$	21.71
City YORK	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	!	
	PA	i	1				

To Whom Paid AMANDA DAVIDSON  Mailing Address 2555 COLDSPRING RD.  City YORK  State PA 17404  To Whom Paid AMANDA DAVIDSON  To Whom Paid AMANDA DAVIDSON  Mo DAY YEAR  PA 2 22 2018 \$  City YORK  To Whom Paid AMANDA DAVIDSON  Mailing Address 2555 COLDSPRING RD.  State Zip Code (Plus 4) 17404  Description of Expenditure 3 23 2018 \$  City YORK  State Zip Code (Plus 4) Description of Expenditure	567.19
City YORK  State   Zip Code (Plus 4)   Description of Expenditure   MONTHLY RETAINER & Day; EXPENSE  To Whom Paid   AMANDA DAVIDSON  Mailing Address   2555 COLDSPRING RD.   3   23   2018   \$	567.19
To Whom Paid AMANDA DAVIDSON  Mailing Address 2555 COLDSPRING RD.  PA 17404 MONTHLY RETAINER & Description of Expenditure MONTHLY RETAINER & Description of Expe	
AMANDA DAVIDSON  Mo DAY YEAR  Mailing Address 2555 COLDSPRING RD.  3 23 2018 \$	
2555 COLDST KING KD.	
City YORK State Zip Code (Plus 4)	567.19
PA 17404 Description of Expenditure  PA 17404 MONTHLY FEE & Description of Expenditure	
To Whom Paid AMANDA DAVIDSON  MO DAY YEAR	
Mailing Address 2555 COLDSPRING RD. 4 13 2018 \$	567.19
City YORK  State PA  Zip Code (Plus 4) Description of Expenditure RETAINER & Description of Expenditure	
To Whom Paid AMANDA DAVIDSON  MO DAY YEAR	
	567.19
Mailing Address 2555 COLDSPRING RD. 5 29 2018 \$	
Mailing Address 2555 COLDSPRING RD. 5 29 2018 \$  City YORK PA 2ip Code (Plus 4) Description of Expenditure RETAINER & Company FEE	
City YORK State Zip Code (Plus 4) Description of Expenditure	
City YORK  State PA  In the part of the pa	568.46
City YORK  State PA	568.46
City YORK  State PA  17404  PA  To Whom Paid AMANDA DAVIDSON  Mailing Address 2555 COLDSPRING RD.  State PA  2ip Code (Plus 4) 17404  Description of Expenditure RETAINER & Day PEAR  4	568.46
City YORK  State PA	568.46 567.34

					PAGE	13
To Whom Paid USPS	мо	DAY	YEAR			
Mailing Address 15 MANCHESTER ST.	8	7	2018	\$		74.00
City MANCHESTER State PA 17345		ption of Exp				
To Whom Paid AMANDA DAVIDSON	мо	DAY	YEAR			
Mailing Address 2555 COLDSPRING RD.	8	24	2018	\$		554.63
City         YORK         State         Zip Code           PA         17404		Description of Expenditure MONTHLY FEE & Description of Expenditure				
<b>To Whom Paid</b> M&T BANK	мо	DAY	YEAR			
Mailing Address 4301 N. GEORGE ST. EXT	4	9	2018	\$		5.00
MANCHESTER		Description of Expenditure SERVICE CHARGE				
PA 17345	SERVI	LE CHARGE	-			
To Whom Paid AMANDA DAVIDSON	MO	DAY	YEAR			
To Whom Paid				\$		1,109.26
To Whom Paid AMANDA DAVIDSON  Mailing Address 2555 COLDSPRING RD.	MO  10 e (Plus 4) Descri	DAY	YEAR 2018 penditure		NTS	1,109.26
To Whom Paid AMANDA DAVIDSON  Mailing Address 2555 COLDSPRING RD.  City YORK  State Zip Code	MO  10 e (Plus 4) Descri	DAY 3	YEAR 2018 penditure		NTS	1,109.26
To Whom Paid AMANDA DAVIDSON  Mailing Address 2555 COLDSPRING RD.  City YORK State Zip Code PA 17404  To Whom Paid	MO  10 e (Plus 4) Descri	DAY  3  ption of Exploy & Samp;	YEAR  2018  Denditure  REIMBUR		NTS	1,109.26 218.96
To Whom Paid AMANDA DAVIDSON  Mailing Address 2555 COLDSPRING RD.  City YORK State Zip Code PA 17404  To Whom Paid AMANDA DAVIDSON  Mailing Address 2555 COLDSPRING RD.	MO  10 e (Plus 4) Descri OCT./I  MO  10 e (Plus 4) Descri	DAY  3 ption of Exp OV & DAY  24 ption of Exp	YEAR  2018  Penditure REIMBUR  YEAR  2018	RSEMEI	NTS	
To Whom Paid AMANDA DAVIDSON  Mailing Address 2555 COLDSPRING RD.  City YORK State Zip Code PA 17404  To Whom Paid AMANDA DAVIDSON  Mailing Address 2555 COLDSPRING RD.  City YORK State Zip Code	MO  10 e (Plus 4) Descri OCT./I  MO  10 e (Plus 4) Descri	DAY  3 ption of Exp OV & DAY  24 ption of Exp	YEAR  2018  Penditure REIMBUR  YEAR  2018	RSEMEI	NTS	
To Whom Paid AMANDA DAVIDSON  Mailing Address 2555 COLDSPRING RD.  City YORK State PA 17404  To Whom Paid AMANDA DAVIDSON  Mailing Address 2555 COLDSPRING RD.  City YORK State Zip Code 17404  To Whom Paid AMANDA DAVIDSON  Mailing Address 2555 COLDSPRING RD.  City YORK State Zip Code 17404	MO  10 e (Plus 4) Descri OCT./f  MO  10 e (Plus 4) Descri EXPEN	DAY  3  Ption of Exp IOV & amp;  DAY  24  Ption of Exp SE	YEAR  2018  Penditure REIMBUR  YEAR  2018  Penditure	RSEMEI	NTS	

To Whom Paid BMD DESIGN				DAY	YEAR					
Mailing Address 125 SOUTH CAMP ST.			11	2	2018	\$	201.46			
City WINDSOR	WINDSOR State Zip Code (Plus 4)				Description of Expenditure					
	PA	17366	WEB H	OSTING						
To Whom Paid AMANDA DAVIDSON			МО	DAY	YEAR					
Mailing Address 2555 COLDSPRING RD.			11	2	2018	\$	567.19			
City YORK State Zip Code (Plus 4) Description of Expenditure				enditure						
	PA	17404	MONTHLY FEE & mp; EXPENSES							
To Whom Paid M&T BANK			МО	DAY	YEAR					
Mailing Address 4301 N. GEORGE ST. EXT.			12	10	2018	\$	5.00			
City MANCHESTER State Zip Code (Plus 4) Description of				tion of Exp	enditure					
	PA	17345	SERVICE FEE							
					PAGE TOTAL					
Enter Grand Total of Expenditures	on Page 1, Report C	over Page, Item D.	•			\$	9,376.13			

## 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			Reporti	ng Period						
REFORM PA PAC			From:	<u>11</u>	/27/2018	То:		12/31/2018		
				DATE				Outstanding Balance of Debt		
Name of Creditor SCOTT WAGNER				мо	DAY	YEAR				
Mailing Address PO BOX 1627			12	31	2018	\$	408,063.55			
City YORK	<b>State</b> PA	<b>Zip Code (Pl</b> 17402	us 4)	Description of Debt LOANS BROUGHT FORWAR						
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							\$	<b>PAGE TOTAL</b> 408,063.55		