### **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				port ed B		CAND	IDATE		COM	<b>4ITTEE</b>	<b>✓</b>	LOBE	BYIST	
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		BET	TER	GOV	T FOR P	4							
Street Address:	PO BOX 7365															
City:	STEELTON							State:	PA			Zip Cod	de: 1	7113		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2	2.	30 DA		POST-	3.		AMENDM REPORT		Yes	No	<b>Y</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDATELECTION	y pri	≣- !	5.	30 DA		POST-	POST- 6. <b>X</b>			ATION ?	Yes	No	<b>\</b>
report type)	ANNUAL REPORT	7.	<b>Year</b> 2019					NG METH CHECK (				PAPER		$\overline{}$	DISKE	TTE
Name of Office S	- Sought by Candida	te:						DATE	OF ELI	CTI	ОИ	District Number	Office Code	Par	ty Code	County
								МО	DAY	Y	EAR					
								1	L	5	2019		(SEE IN	ISTRUCTIO	ONS FOR C	CODES)
	Receipts and	МО	DAY	YEAR	ł			МО	DAY	Y	EAR	FO	R OFFI	CE USE	ONLY	
Expenditures	from:		10 22	2	019	Т	0	1	1	25	2019					
A. Amount Bro	ught Forward Fron	n Last R	eport				\$			26,	048.43					
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule	: I)	\$			15,	294.72					
C. Total Funds Available (Sum Of Lines A and B)							\$			41,	343.15					
D. Total Expend	ditures (From Scho	edule II	I)				\$			11,	000.00					
E. Ending Cash	Balance (Subtract	Line D	From Line (	C)			\$			30,	343.15					
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedu	le II	()	\$				0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	)			\$				0.00			•		
				AFF	IDA	١٧٢	T SE	CTION								
	s a Committee rep	•	-								_					
I swear (or affirm) correct and comple	) that this report, incl ete.	uding the	e attached scl	hedule	s filed	d on	paper	or by elec	tronic r	nediun	n, are to t	he best o	f my kno	wledge	and belie	ef , true
Sworn to and subs	cribed before me this day of	3	20								Signature	of Perso	n Submit	ting Rep	ort	
	Signatu	ra					- -					Prin	ted Nam	e		
My Commission Ex	_											Ema	il			
	мо	D	AY	YR					A	rea Co	de	Daytim	e Telepi	hone Nu	mber	
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nitte	e, C	andid	ate shal	sign l	nere.						
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and beli	ef this	polit	tical	comm	ittee has	not viol	ated a	ny provis	ions of the	e act of J	une 3,19	937 (P.L.	. 1333,
Sworn to and subsc	ribed before me this										s	ignature o	of Candid	late		
	day of 						_					Printe	d Name			
	Signature						-									
My Commission Exp	<del>-</del>											Ema	il			
	МО	D	AY	YR	l		•		Are	a 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		
BETTER GOVT FOR PA	From:	10/22/201	<u>9</u> To:	11/25/2019
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)			\$	900.00
TOTAL for the Reporting	) Period	(2)	\$	900.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	8,894.72
All Other Contributions (Part D)			\$	5,500.00
TOTAL for the Reporting	J Period	(3)	\$	14,394.72
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			\$	15,294.72

#### **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	Name of Filing Committee or Candidate				Reporting Period							
		F	rom:		То	:						
		1		DATE			AMOUNT					
Full Name of Contributing C	ommittee		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 Candida	Name of Filing Committee or Candidate				eriod				
BETTER GOVT FOR PA			Froi	m:	<u>10/22/</u>	2019 <b>T</b> o	<b>1</b> 1/25/	<u>11/25/2019</u>	
					DATE		AMOUNT		
Full Name of Contributor JOSEPH BURFORD				МО	DAY	YEAR			
Mailing Address 2986 DEARBORN	_N						\$	100.00	
City YORK	<b>State</b> PA	Zip Code (Plus 4 17402	)	11	6	2019			
Full Name of Contributor DONNA SPANDLER				мо	DAY	YEAR			
Mailing Address 663 DUNKLE ST  City STEELTON	State PA	<b>Zip Code (Plus 4</b> 17113	)	11	6	2019	\$	200.00	
Full Name of Contributor  MARY MCELWEE				МО	DAY	YEAR			
Mailing Address 612 FOXFIELDS R	D						\$	250.00	
City BRYN MAWR	<b>State</b> PA	<b>Zip Code (Plus 4</b> 19010	)	11	6	2019			
Full Name of Contributor ERIC R. CLANCY				мо	DAY	YEAR			
Mailing Address 2000 TECHNOLOG  City MECHANICSBURG	Y PARKWAY  State PA	Zip Code (Plus 4	)	11	6	2019	\$	250.00	
Full Name of Contributor CRAIG CAPPELLI				МО	DAY	YEAR		_	
Mailing Address 122 MARGARET LN City MALVERN	State	Zip Code (Plus 4	)	11	6	2019	\$	100.00	
	PA	19355					DACE TO		

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

**PAGE TOTAL \$** 900.00

#### **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	Period				
BETTER GOVT FOR PA			From:	10/2	22/2019	То:	1	1/25/2019
				DA	TE			AMOUNT
Full Name of Contributing Committee ECKERT SEAMANS PA GOV'T PAC				мо	DAY	YEAR	\$	3,000.00
Mailing Address 600 GRANT ST. 44T	H FLOOR			11	6	2019	7	5,655.65
City PITTSBURGH	State PA	<b>Zip Code</b> 16219	e (Plus 4)					
Full Name of Contributing Committee HRG PAC					DAY	YEAR	\$	3,000.00
Mailing Address 369 E. PARK DRIVE		,		11	6	2019		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
City HARRISBURG	State PA	<b>Zip Code</b> 17111	e (Plus 4)					
Full Name of Contributing Committee  AIMA PARTNERSHIP DBA				мо	DAY	YEAR		2.400.00
Mailing Address 1312 LAUREL POINT	CIRCLE			11		2010	\$	2,100.00
City HARRISBURG	State PA	<b>Zip Code</b> 17110	e (Plus 4)	11	6	2019		
Full Name of Contributing Committee STEELTON REP. CAMPAIGN COMM.				мо	DAY	YEAR	\$	494.72
Mailing Address 533 SPRUCE ST				11	6	2019	7	.5, _
City STEELTON	State PA	<b>Zip Code</b> 17113	e (Plus 4)					
Full Name of Contributing Committee  LAW OFFICE OF TUCKER HULL LLC				МО	DAY	YEAR	\$	300.00
Mailing Address PO BOX 330				11	6	2019	7	
City ANNVILLE	State PA	<b>Zip Code</b> 17003	e (Plus 4)					
		•						PAGE TOTAL

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

8,894.72

## 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 of Candidate	luate				Reporting Period						
BETTER GOVT FOR PA				Fron	n:	10/22/2	<u>019</u> To	:	11/25/2019		
					DA	\TE		Α	MOUNT		
Full Name of Contributor					мо	DAY	YEAR		F00.00		
JOHN K MURPHY					1-10	DAI	ILAK	<b>_</b> \$	500.00		
Mailing Address 565 BRENTWATER F	RD				11	6	2019				
City CAMP HILL	State	Zip	Code (Plus	4)							
	PA	170	11								
Employer Name ALPHA CONSULTING E	ENGINEERS	IGINEERS (			Occupat	ion	PRESID	ENT			
Employer Mailing Address/Principal Plac	e of Business	of Business City				State		Zip Cod	de (Plus 4)		
115 LIMEKIN RD	NEW CUMBELAND			D	PA		17070				
Full Name of Contributor											
MATTHEW TUNNELL					МО	DAY	YEAR	\$	500.00		
Mailing Address 1225 AUBURN AVE					11	6	2019	7			
City HUMMELSTOWN	State	Zip	Code (Plus	4)	11	0	2019				
	PA	170	36								
Employer Name LIFT DEVELOPMENT					Occupat	ion	CO-OWI	NER			
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip Cod	de (Plus 4)		
451 W. MAIN ST			MIDDLETC	NWC	PA			17057			
Full Name of Contributor		-				<u> </u>					
JOHN J TIERNEY					МО	DAY	YEAR	\$	500.00		
Mailing Address 906 INDIANA AVE								1			
City LEMOYNE	State	Zip	Code (Plus	4)	11	6	2019				
	PA	170	143								
Employer Name LIFT DEVELOPMENT					Occupat	ion	CO-OWI	NER			
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip Cod	de (Plus 4)		
451 W. MAIN ST			MIDDLETO	OWN		PA		17057			
Full Name of Contributor		•									
DOUGLAS GELLATLY					МО	DAY	YEAR	\$	1,000.00		
Mailing Address 193 CEDAR ST				11	6	2019					
City MIDDLETOWN	State	Zip	Code (Plus	4)	11	O	2019				
	PA	170	157								
Employer Name VINEYARD AT HERSHE	ΞΥ				Occupat	ion	OWNER				
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip Code (Plus 4)			
598 SCHOOL HOUSE RD			MIDDLETO	OWN		PA	17057				

Full Name of Contributor	Il Name of Contributor					YEAR	١.	4 000 00
LAWRENCE COONEY				МО	DAY	ILAK	\$	1,000.00
Mailing Address 231 HIDDEN VALLE	Y LN			11	6	2019		
City HARRISBURG	State	Zij	p Code (Plus 4)	] ''	0	2013		
	PA	17	'112					
Employer Name SBC				Occupat	ion	OWNER		
Employer Mailing Address/Principal Plac	e of Business		City		State		Zip Cod	de (Plus 4)
231 HIDDEN VALLEY LN			HARRISBURG		PA		17112	
Full Name of Contributor				мо	DAY	YEAR	\$	1 000 00
DAVID LA TORRE				140	DAI	ILAK	] *	1,000.00
Mailing Address 443 ARLINGTON RD				11	6	2019		
City CAMP HILL	State	Zij	p Code (Plus 4)					
	PA	17	011			l		
Employer Name LA TORRE COMMUNIC	ATIONS			Occupation PRINCIPAL				
Employer Mailing Address/Principal Plac	e of Business		City		State		Zip Cod	de (Plus 4)
409 N 2ND ST			HARRISBURG		PA		17101	
Full Name of Contributor				мо	DAY	YEAR	\$	1 000 00
MARK S. STEWART							] *	1,000.00
Mailing Address 119 N. 15TH STREE	Т			11	6	2019		
City CAMP HILL	State	Zij	p Code (Plus 4)					
	PA	17	011					
Employer Name ECKERT SEAMANS				Occupat	ion	ATTORN	IEY	
Employer Mailing Address/Principal Plac	e of Business		City		State		Zip Cod	de (Plus 4)
213 MARKET ST8TH FL			HARRISBURG		PA		17101	

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

PAGE TOTAL
\$ 5,500.00

## 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:		
		•		C	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description		1					<u> </u>	
Enter Crand Total of Dort	E on Schodule I. Detailed	Summary Dage	Costion	4				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page,	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 Peri	od	
BETTER GOVT FOR PA	From:	10/22/2019 <b>To:</b>	<u>11/25/2019</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTO	₹	
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 Candidate			Reporting	g Period				
						То:		
				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				Rep	orting	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	e of Business	City	V	State	e Zip	Code(Plus 4)	Descr	ript	ion of Contribution	on
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	Contributions De	etaile	ed				PAGE TO	ΓAL
Summary Page, Section 3.	,									0.00

**PAGE TOTAL** 

11,000.00

## STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period					
BETTER GOVT FOR PA			From	<u>10/22/2019</u> <b>To:</b>			11/25/2019	
			DATE				AMOUNT	
To Whom Paid			МО	DAY	YEAR			
DAVID E FEIDT								
Mailing Address 763 ZURICH DR			10	31	2019	\$	7,000.00	
City HUMMELSTOWN	Description of Expenditure							
	PA	17036	REIMBURSEMENT					
To Whom Paid			МО	DAY	YEAR			
DAUPHIN COUNTY GOP			МО	DAI	ILAK			
Mailing Address 2255 PAXTON CHURCH RD			11	6	2019	\$	4,000.00	
City HARRISBURG	State	Zip Code (Plus 4)	Descrip	Description of Expenditure				
	PA	17110	DONAT	DONATION				

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.