#### **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	3059				eport led B		CAND	IDATE		COM	<b>ITTEE</b>	<b>✓</b>	LOBB	YIST	
Name of Filing C	ommittee, Candid	late or L	obbyist:		BET	TTER	GOVE	ERNMEN	IT FOR	PA			•			
Street Address:	PO BOX 7365	5														
City:	STEELTON							State:	PA			Zip Cod	le: 1	7113		
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. <b>X</b>		TERMINA REPORT?		Yes	No	<b>~</b>
report type)	ANNUAL REPORT	7.	<b>Year</b> 2023					IG METH CHECK C				PAPER		$\checkmark$	DISKE	ГТЕ
Name of Office S	ought by Candida	ite:	•					DATE (	OF ELE	CTI	ON	District Number	Office Code	Part	y Code	County Code
	· ,							мо	DAY	Y	EAR	rumber	Toode	I		-
								1:	1	7	2023		(SEE IN	ISTRUCTIO	NS FOR C	ODES)
	Receipts and	МО	DAY Y	EAR	R			МО	DAY	Y	EAR	FO	R OFFI	CE USE	ONLY	
Expenditures	from:		10 24	2	023	3 <b>T</b>	0	1:	1	27	2023					
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			14,	170.39					
B. Total Monet	ary Contributions	And Rec	eipts (From S	che	dul	e I)	\$				0.00					
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			14,	170.39					
D. Total Expend	ditures (From Sch	edule II	I)				\$			7,	413.04					
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)				\$			6,	757.36					
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	edu	le I	<b>I</b> )	\$				0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$				0.00			•		
			ļ	٩FF	ΊD	AVI	T SE	CTION								
PART I - If this is	a Committee rep	ort, trea	surer sign he	re. I	If th	his is	a Can	didate r	eport,	cand	idate sig	ın here.				
I swear (or affirm) correct and comple	that this report, inc ete.	luding the	e attached sche	dules	s file	ed on	paper o	or by elec	tronic m	ediur	n, are to t	the best o	my kno	wledge a	nd belie	f , true
Sworn to and subs	cribed before me thi day of	s	20								Signature	of Perso	1 Submit	ting Rep	ort	
	Signati	ıre					- -					Prin	ed Nam	e		
My Commission Ex	-											Emai	I			
	МО	D	AY	YR					Ar	ea Co	de	Daytim	e Telepi	hone Nur	nber	
Part II- If this is	a report of a can	didate's	authorized Co	omn	nitte	ee, C	andida	ate shall	l sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of a	ny knowle	edge and belief	this	poli	litical	commi	ittee has	not viola	ted a	ny provis	ions of the	e act of J	une 3,19	37 (P.L.	1333,
Sworn to and subsc	ribed before me this								-		s	ignature o	f Candid	late		
	day of ————————————————————————————————————						_					Drints	d Name			
	Signature						-			_		Frinte	d Name			
My Commission Exp	_											Ema	il			
	МО	D	AY	YR			-		Area	Code		Da	ytime 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:	10/24/202	<u>3</u> To:	11/27/2023
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)			\$	0.00
TOTAL for the Reporting	) Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	J 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			\$	0.00

#### **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 of Candidate			Reporting Period From: To:					
					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	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary 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.)

		-	orting Pe				
		Fron	n:		То	:	
			D/	<b>ATE</b>		АМО	UNT
			МО	DAY	YEAR		
						\$	0.00
State	Zip Code (Plus	s <b>4</b> )					
			Occupat	ion			
e of	City			State		Zip Code (	Plus 4)
lule I, Detailed Su	ımmary Page,	Section	on 3.		4		<b>E TOTAL</b> 0.00
	e of	e of City	State Zip Code (Plus 4)	State Zip Code (Plus 4) Occupat	State Zip Code (Plus 4)  Occupation  Octobroad  Octobro	State Zip Code (Plus 4)  Occupation  Occupation  Olivy State  State  Output  Date  Occupation  Output  Output	DATE AMO  MO DAY YEAR  \$ State Zip Code (Plus 4)  Occupation  Occupation  PAG

## 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 Candida	te		Report	ing Perio	od		
			From:			To:	
				D	ATE		AMOUNT
Full Name				мо	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code (	Plus 4)				
Receipt Description		·					
Enter Grand Total of Part E on Scho	edule I. Detaile	d Summary Page	Section	4			PAGE TOTAL
The state of the state of stat	Julie 1, Detailet	a cammury rage,	20000011	••			\$ 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 GOVERNMENT FOR PA	From:	<u>10/24/2023</u> <b>To:</b>	11/27/2023
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTO	R	
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 Candidat	:e		Reporting	g Period			
			From:			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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate	е				Re	porting	Period			
					Fro	om:		То:		
					•		DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor	1		•			Occupa	ation			
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule 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 Candidate	Reporting Period				
BETTER GOVERNMENT FOR PA	From	10/24/2023	То:	11/27/2023	

				DATE			AMOUNT
To Whom Paid RGB POLITICS	МО	DAY	YEAR				
Mailing Address 3031 LOGAN STREE	10	24	2023	\$	7,413.04		
City CAMP HILL	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA	17011	MAIL D	ESIGN			
Fortage Constitution of Free and States	D 1 D	ot Course Donne Manua D					PAGE TOTAL
Enter Grand Total of Expenditures	\$	7,413.04					