# **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 :	ion 2008	059			Repor Filed	-		CANDI	DATE		СОММ	<b>1ITTEE</b>	✓	LOBI	BYIST		
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		BETTE	R GO	DVT	FOR PA									
Street Address:	813 CHAMBEI	RS ST															
City:	BRESSLER						5	State:	PA			<b>Zip Code:</b> 17113					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2.		DAY [MAF		POST- 3.			AMENDN REPORT	Yes	Ν	lo	$\checkmark$	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	ELECTION				DAY ECTI	AY POST- 6. CTION				TERMIN/ REPORT	Yes	Ν	lo	$\checkmark$	
report type)	ANNUAL REPORT	7. <b>X</b>	( Year 2010 FILING MET ( ) CHECK									PAPER		$\checkmark$	DISK	ETTE	
Name of Office S	L Sought by Candida	te:						DATE O	F ELEC	TION		District Number	Office Code	Par	ty Cod	e Cou Cod	
							ľ	40	DAY	YEA	AR						
								11		2	2010		(SEE INS	TRUCTI	ONS FOI	R CODES	5)
Summary of Receipts and MO DAY YEAR								мо	DAY	YEA	AR	FC	R OFFIC	E USE	ONLY	1	
Expenditures	s from:		1 1	20	010	ГО		12	3	1	2010						
A. Amount Bro	ught Forward Fror	n Last Ro	eport				\$			9,29	95.40						
B. Total Monet		\$				0.00											
C. Total Funds Available (Sum Of Lines A and B) \$ 9,295.40																	
D. Total Expen	ditures (From Sch	edule II	I)				\$			1,00	0.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)		_	\$			8,29	5.40	-					
F. Value Of In-	Kind Contributions	s Receive	ed (From S	chedu	le II)		\$				0.00	-					
G. Unpaid Debt	ts And Obligations	(From S	chedule IV	/)			\$				0.00						
				AFF	IDAV	IT S	SEC	TION									
	s a Committee rep	•	-						• •		_	•					
I swear (or affirm) correct and comple	) that this report, incl ete.	luding the	attached sc	hedules	s filed or	i pape	er oi	by electi	ronic mee	dium, a	are to t	the best o	f my know	vledge	and be	lief , ti	rue
Sworn to and subs	cribed before me this day of	5	20							Sig	gnature	e of Perso	n Submitt	ing Rep	oort		_
		re				_						Prin	ted Name				-
My Commission Ex	-	-										Ema	il				
	МО	DA	AY	YR					Area	a Code		Daytin	e Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's a	authorized	Comm	nittee, (	Cand	lida	te shall :	sign hei	re.							
No 320) as amend		ny knowle	edge and beli	ief this	politica	com	nmit	tee has n	ot violate	ed any	provis	ions of th	e act of Ju	ine 3,1	937 (P	.L. 133	3,
Sworn to and subso	ribed before me this day of		20								S	ignature (	of Candida	ite			_
<u> </u>						_						Printe	ed Name				-
My Commission Exp	Signature bires					_						Ema	il				-
	мо	DA	AY	YR		_			Area C	ode		D	aytime Te	elephon	e Num	ber	-

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** BETTER GOVT FOR PA From: <u>1/1/2010</u> **To:** 12/31/2010 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 0.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

# 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.

em:	DATE	То	:	
	DATE			
				AMOUNT
мо	DAY	YEAR		
			\$	0.00
			Г	PAGE TOTAL
M	10	10 DAY	10 DAY YEAR	

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

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 Candidat	e		Rep	orting P	eriod				
From: To:									
		-			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. \$ 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 Committe	e			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C on S	chedule I, Detai	led Summary Pa	age, Sectio	n 3.			\$	0.00

# 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	Reporting Period	
	From:	То:

			D	ATE		АМС	DUNT
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
Employer Name			Occupat	tion			
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip Code (	(Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detailed S	ummary Page, Sectio	on 3.		\$		<b>бе тота</b> L 0.00

I

## 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	Name of Filing Committee or Candidate			ing Perio	d				
Fro				From: To:					
				D	ATE			AMOUNT	1
Full Name				мо	DAY	YEAR	1		
Mailing Address							\$	5	0.00
City	State	Zip Code (	Plus 4)						
Receipt Description						•	•		
Enter Grand Total of Part E on Schedu	ule T. Detailed Summ	nary Page	Section	4				PAGE TO	TAL
		illi y i uge,	Section				\$		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 GOVT FOR PA	From:	<u>1/1/2010</u> <b>To:</b>	<u>12/31/2010</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	「 F)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, I		\$	0.00

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

## VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate R				Reporting Period					
	From:			То:					
				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 Schedule II, In-Kind Contributions Detail Section 2.			iled Sum	mary Pag	je,	PAGE	TOTAL		
					4	5	0.00		

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

Name of Filing Committee or Candidate				Rej	Reporting Period					
					Fro	From: To:				
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(	Plus 4)						
Employer of Contributor						Occupat	tion	I		
Employer Mailing Address/Principal Place of City State				State	Zip Code(Plus 4) Descripti			ption of	Contribution	

	1		I	I	
Enter Grand Total of Part G on Schedule II, Ir	n-Kind Contribu	tions Detailed	d		PAGE TOTAL
Summary Page, Section 3.					0.00

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	ſ		Reportin	ng Period			
BETTER GOVT FOR PA			From	<u>1/1</u>	<u>12/31/2010</u>		
				AMOUNT			
To Whom Paid FRIENDS OF HASTE & PRIES			мо	DAY	YEAR		
Mailing Address P.O. BOX 7365	11	26	2010	\$	500.00		
City STEELTON	Descrip	otion of Exp	penditure				
	РА	17113	CONTR	IBUTION			
To Whom Paid FRIENDS OF HASTE & PRIES			мо	DAY	YEAR		
Mailing Address P.O. BOX 7365			11	26	2010	\$	500.00
City STEELTON	State	Zip Code (Plus 4)	Descrip	tion of Exp	penditure	 ;	
	CONTR	IBUTION					
							PAGE TOTAL
Enter Grand Total of Expenditures	on Page 1, Re	port Cover Page, Item D	).			\$	1,000.00