

Commonwealth of Pennsylvania - Campaign Finance Report

(Note: This report must be clear and legible. It should be typed)

Filer Identification Number	2008059	Report Filed By (Mark X)	Candidate	<input type="checkbox"/>	Committee	<input checked="" type="checkbox"/>	Lobbyist	<input type="checkbox"/>
Name of Filing Committee, Candidate or Lobbyist	Better Government For PA							
Street Address	813 Chambers Street							
City	Bressler	State	PA	Zip Code	17113			

Type of Report (Place x under report type)								
1-6 th Tuesday Pre-Primary	2-2 nd Friday Pre-Primary	3-30 Day Post Primary	4-6 th Tuesday Pre-Election	5-2 nd Friday Pre-Election	6-30 Day Post Election	7- Annual	Special 2 nd Friday Pre-Election	Special 30 Day Post-Election
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date Of Election (MM/DD/YYYY)	5/19/15	Year	2015		Amendment Report	<input type="checkbox"/>	Termination Report	<input type="checkbox"/>

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
	1/1/15	5/4/15	
A. Amount Brought Forward From Last Report	\$	9494.70	County Copy Department of State Bureau of C.E.L. 2855 MAY - 7 PM 1:00 RECEIVED
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	14,250.00	
C. Total Funds Available (Sum of Lines A and B)	\$	23,744.70	
D. Total Expenditures (From Schedule III)	\$	7,092.77	
E. Ending Cash Balance (Subtract Line D from Line C)	\$	16,651.93	
F. Value of In-Kind Contributions Received (From Schedule II)	\$	0	
G. Unpaid Debts and Obligations (From Schedule IV)	\$	0	

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 on paper, is to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this 7 day of May 20 15

Richie A. Martz COMMONWEALTH OF PENNSYLVANIA
 Signature NOTARIAL SEAL
 RICHEL A. MARTZ, Notary Public
 City of Harrisburg, Dauphin County
 My Commission Expires May 13, 2015

David Feidt
 Signature of Person Submitting report
 Printed Name

My Commission expires _____ MO _____ DAY _____ YR.

717 Area Code 514-8632 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

My Commission expires _____ MO _____ DAY _____ YR.

 Signature of Candidate
 Printed Name

 Area Code _____ Daytime Telephone Number

RECEIVED

SCHEDULE I
Contributions and Receipts
 Detailed Summary Page

Filer Identification Number	2008059		
1. Unitemized Contributions and Receipts-\$50.00 or Less per Contributor			
Total for the reporting period		(1)	\$ 100. ⁰⁰
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)			
Contributions Received from Political Committees (Part A)		\$	0
All Other Contributions (Part B)		\$	100. ⁰⁰
Total for the reporting period		(2)	\$ 100. ⁰⁰
3. Contributions Over \$250.00 (From Part C and Part D)			
Contributions Received from Political Committees (Part C)		\$	7000. ⁰⁰
All Other Contributions (Part D)		\$	7050. ⁰⁰
Total for the reporting period		(3)	\$ 14,050. ⁰⁰
4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)			
Total for the reporting period		(4)	\$ 0
Total Monetary Contributions and Receipts during this reporting period <i>(Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B)</i>		\$	14,250. ⁰⁰

PART B

All Other Contributions

\$50.01 TO \$250

Use this Part to itemize all other contributions with an aggregate value from \$50.01 TO \$250 in the reporting period.

(Exclude contributions from political committees reported in Part A.)

Filer Identification Number:	2008059
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Full Name of Contributor					Date [MM/DD/YYYY]	\$	100.00
Tim Barker					4/9/15		
House #	291	Street Address	Silver Spar Drive		Date [MM/DD/YYYY]	\$	
City	York	State	PA	Zip Code	17402	Date [MM/DD/YYYY]	\$
Full Name of Contributor					Date [MM/DD/YYYY]	\$	
House #		Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Full Name of Contributor					Date [MM/DD/YYYY]	\$	
House #		Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Full Name of Contributor					Date [MM/DD/YYYY]	\$	
House #		Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Full Name of Contributor					Date [MM/DD/YYYY]	\$	
House #		Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Full Name of Contributor					Date [MM/DD/YYYY]	\$	
House #		Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$

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 over \$250.00 in the reporting period.

Filer Identification Number:	2008059
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Full Name of Contributing Committee	Friends of Haste + Pries				Date [MM/DD/YYYY]	\$	3000.00
House #	P.O. Box 7365				Date [MM/DD/YYYY]	\$	
City	Steelton	State	PA	Zip Code	17113	Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee	Friends of Haste + Pries				Date [MM/DD/YYYY]	\$	4,000.00
House #	P.O. Box 7365				Date [MM/DD/YYYY]	\$	
City	Steelton	State	PA	Zip Code	17113	Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	
House #					Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	
House #					Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	
House #					Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Full Name of Contributing Committee					Date [MM/DD/YYYY]	\$	
House #					Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$

PART D

All Other Contributions

Over \$250.00

Use this Part to itemize all other contributions with an aggregate value over \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part C)

Filer Identification Number:		2008059					
Full Name of Contributor		Michael Solomon			Date [MM/DD/YYYY]	\$	1000.00
House #	Street Address				Date [MM/DD/YYYY]	\$	
1616	Galen Road						
City	State	Zip Code			Date [MM/DD/YYYY]	\$	
Harrisburg	PA	17110					
Employer Name		Cohen Seglias Pallas Greenhall +			Occupation	Attorney	
Employer Mailing Address / Principal Place of Business		240 N. 3rd Street			Firmen Harrisburg, PA 17101		
Full Name of Contributor		Corky Goldstein			Date [MM/DD/YYYY]	\$	300.00
House #	Street Address				Date [MM/DD/YYYY]	\$	
2900	Parkside Lane						
City	State	Zip Code			Date [MM/DD/YYYY]	\$	
Harrisburg	PA	17110					
Employer Name		Mooney + Associates			Occupation	Attorney	
Employer Mailing Address / Principal Place of Business		105 N. Front St.			Harrisburg, PA 17101		
Full Name of Contributor		J. Alex Hartzler			Date [MM/DD/YYYY]	\$	1750.00
House #	Street Address				Date [MM/DD/YYYY]	\$	
2921	N. 2nd Street						
City	State	Zip Code			Date [MM/DD/YYYY]	\$	
Harrisburg	PA	17110					
Employer Name		WCI Partners			Occupation	President	
Employer Mailing Address / Principal Place of Business		220 Muench Street			Harrisburg, PA 17102		
Full Name of Contributor		Steve Shirk			Date [MM/DD/YYYY]	\$	1000.00
House #	Street Address				Date [MM/DD/YYYY]	\$	
161	Lexington Court						
City	State	Zip Code			Date [MM/DD/YYYY]	\$	
Harrisburg	PA	17112					
Employer Name		Capital Business Systems			Occupation	President	
Employer Mailing Address / Principal Place of Business		2708 Commerce Drive			Harrisburg, PA 17110		

PART D

All Other Contributions

Over \$250.00

Use this Part to itemize all other contributions with an aggregate value over \$250.00 in the reporting period.
(Exclude contributions from political committees reported in Part C)

Filer Identification Number	2008059
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Full Name of Contributor	Tom McHaffie				Date [MM/DD/YYYY]	4/28/15	\$	3000.00
House #	921	Street Address	Ebeneszer Rd.		Date [MM/DD/YYYY]		\$	
City	Middletown	State	PA	Zip Code	17057	Date [MM/DD/YYYY]	\$	
Employer Name	Breski Beverage				Occupation	President		
Employer Mailing Address/ Principal Place of Business	1170 Eisenhower Blvd., Harrisburg, PA 17111							
Full Name of Contributor					Date [MM/DD/YYYY]		\$	
House #		Street Address			Date [MM/DD/YYYY]		\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$	
Employer Name					Occupation			
Employer Mailing Address/ Principal Place of Business								
Full Name of Contributor					Date [MM/DD/YYYY]		\$	
House #		Street Address			Date [MM/DD/YYYY]		\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$	
Employer Name					Occupation			
Employer Mailing Address/ Principal Place of Business								
Full Name of Contributor					Date [MM/DD/YYYY]		\$	
House #		Street Address			Date [MM/DD/YYYY]		\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$	
Employer Name					Occupation			
Employer Mailing Address/ Principal Place of Business								

SCHEDULE III
Statement of Expenditures

Filer Identification Number: 2008059

To Whom Paid		Lower Paxton Republican Comm.			Date [MM/DD/YYYY]	\$	500.00
House #	3973	Street Address	Chestnut Street		Description of Expenditure		
City	Harrisburg	State	PA	Zip Code	1709 DONATION		
To Whom Paid		Derry Twp. Republican Comm.			Date [MM/DD/YYYY]	\$	300.00
House #		Street Address	P.O. Box 78		Description of Expenditure		
City	Hershey	State	PA	Zip Code	17033 Donation		
To Whom Paid		Friends of Judge Jessica Brewbaker			Date [MM/DD/YYYY]	\$	300.00
House #		Street Address	P.O. Box 444		Description of Expenditure		
City	Carlisle	State	PA	Zip Code	17013 Donation		
To Whom Paid		Michael Musser			Date [MM/DD/YYYY]	\$	351.59
House #	813	Street Address	Chambers Street		Description of Expenditure		
City	Bressler	State	PA	Zip Code	17113 Reimbursement		
To Whom Paid		Joe Lahr			Date [MM/DD/YYYY]	\$	100.00
House #	1037	Street Address	S. 18th Street		Description of Expenditure		
City	Harrisburg	State	PA	Zip Code	17104 Consulting		
To Whom Paid		Steve Silcox			Date [MM/DD/YYYY]	\$	500.00
House #	96	Street Address	Beard Rd.		Description of Expenditure		
City	Enola	State	PA	Zip Code	17025 Voter ID		
To Whom Paid		Steve Silcox			Date [MM/DD/YYYY]	\$	650.00
House #	96	Street Address	Beard Rd.		Description of Expenditure		
City	Enola	State	PA	Zip Code	17025 Voter ID		
To Whom Paid		Steve Silcox			Date [MM/DD/YYYY]	\$	550.00
House #	96	Street Address	Beard Rd.		Description of Expenditure		
City	Enola	State	PA	Zip Code	17025 Voter ID		

SCHEDULE III
Statement of Expenditures

Filer Identification Number:	2008059
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To Whom Paid		Steve Silcox			Date [MM/DD/YYYY]	\$	350.00
House #	96	Street Address	Beard Rd.		Description of Expenditure		
City	Enola	State	PA	Zip Code	17025 Voter ID		
To Whom Paid		Friends of Kelly Henshaw			Date [MM/DD/YYYY]	\$	100.00
House #	233	Street Address	Bellevue Rd.		Description of Expenditure		
City	Red Lion	State	PA	Zip Code	17356 Donation		
To Whom Paid		Friends of Judge Jessica Brewbaker			Date [MM/DD/YYYY]	\$	100.00
House #		Street Address	P.O. Box 444		Description of Expenditure		
City	Carlisle	State	PA	Zip Code	17013 Donation		
To Whom Paid		Lawnton Legion			Date [MM/DD/YYYY]	\$	582.00
House #	4700	Street Address	Derry Street		Description of Expenditure		
City	Harrisburg	State	PA	Zip Code	17111 Fundraiser Expenses		
To Whom Paid		Capital Area Promotions			Date [MM/DD/YYYY]	\$	2531.10
House #	912	Street Address	Sunnyhill Lane		Description of Expenditure		
City	Harrisburg	State	PA	Zip Code	17111 Yard Signs		
To Whom Paid		Armstrong Printery			Date [MM/DD/YYYY]	\$	178.08
House #	2940	Street Address	Jefferson St.		Description of Expenditure		
City	Harrisburg	State	PA	Zip Code	17110 Printing - Palm cards		
To Whom Paid					Date [MM/DD/YYYY]	\$	
House #		Street Address			Description of Expenditure		
City		State		Zip Code			
To Whom Paid					Date [MM/DD/YYYY]	\$	
House #		Street Address			Description of Expenditure		
City		State		Zip Code			