Image# 201601169004510809

PAGE 1 / 12

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

								Office Us	e Only	
1.	NAME OF COMMITTEE (in full)	YPE OR PR	INT ▼		mple: If typir r the lines.	ng, type	12FE4M	15		
В	Building A Better PA									1
_										
L										
AD	DRESS (number and street)	1825 Stree	et NW							
ř	Check if different									
ľ	than previously reported. (ACC)	Washington	n 				DC	20006		
2.	FEC IDENTIFICATION NUI	MBER ▼	CI	TY 🛦		5	STATE 🛦		ZIP COE	DE 🛦
	C C00559781		_	IS THIS REPORT		IEW N) OR		AMENDED A)		
4.	TYPE OF REPORT (Choose One)	(b) Monthl Report		b 20 (M2)		May 20 (M5)	Au	ıg 20 (M8)		Nov 20 (M11) (Non-Election Year Only)
	(a) Quarterly Reports:	Due O		ır 20 (M3)		lun 20 (M6)	Se	ep 20 (M9)		Dec 20 (M12) (Non-Election Year Only)
	April 15		Ap	r 20 (M4)		lul 20 (M7)	O	et 20 (M10)		Jan 31 (YE)
	April 15 Quarterly Report (Q1) (c) 1	2-Day	П	Primary (12P)	Genera	al (12G)	П	Runoff (12R)
	July 15 Quarterly Report (Q2) P	RE-Election	=			1			, ,
	October 15 Quarterly Report (Q3		Report for the:	ш	Convention (120)	Specia	1 (125)		
	January 31 Year-End Report (YE		Electi	on on	M M /	D D /	Y	Y	in the State of	
	July 31 Mid-Year Report (Non-election Year Only) (MY)	Р	0-Day OST-Election		General (30G	i)	Runoff	(30R)		Special (30S)
	Termination Report (TER)		report for the.		M M /	D D /	Y Y Y	Υ	in the	
	()		Electi	on on					State of	
5.	Covering Period 07	/ D D D 01	2015	Y	through	12 M	/ D D D 31	201	5 Y	
l c	ertify that I have examined this	Report and	I to the best o	f my knov	wledge and b	pelief it is tru	e, correct a	ind complet	e.	
	pe or Print Name of Treasurer	Peter D Nic						· 		
Sig	nature of Treasurer Peter I	O Nichols			[Electronically	<i>Filed]</i> D	ate 01	/ 16	D /	2016
NΩ	TE: Submission of false, erroned	ous, or incom	plete information	on mav su	biect the ners	son sianina th	is Report to	the penaltic	es of 2 Li	I.S.C. &437a.
	Office Office	2.2, 3. 110011	- Inomatic		-,50t allo por	0.99 111		Τ.		
	Use Only								FORI ev. 12/20	

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Building A Better PA 2015 2015 Report Covering the Period: 12 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 2158.87 January 1, 2015 (b) Cash on Hand at 7342.87 Beginning of Reporting Period..... 154000.00 139000.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 146342.87 156158.87 6(a) and 6(c) for Column B)..... 146342.87 156158.87 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 0.00 0.00 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Building A Better PA	N Better PA
----------------------	-------------

Report Covering the Period: From: 07	01 2015	To: 12 31 2015
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	20000.00	20000 00
(i) Itemized (use Schedule A)	30000.00	30000.00
		0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add	30000.00	30000.00
Lines 11(a)(i) and (ii)▶	30000.00	3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees		
(such as PACs)	109000.00	124000.00
(d) Total Contributions (add Lines	, , , , , , , , , , , , , , , , , , , ,	
11(a)(iii), (b), and (c)) (Carry		4740000
Totals to Line 33, page 5)▶	139000.00	154000.00
2. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
8. All Loans Received	0.00	0.00
Loan Repayments Received	0.00	0.00
5. Offsets To Operating Expenditures	· ·	
(Refunds, Rebates, etc.)	0.00	
(Carry Totals to Line 37, page 5)	0.00	0.00
6. Refunds of Contributions Made		
to Federal Candidates and Other Political Committees	0.00	0.00
7. Other Federal Receipts	0.00	0.00
(Dividends, Interest, etc.)	0.00	0.00
. Transfers from Non-Federal and Levin Funds	0.00	
(a) Non-Federal Account		
(from Schedule H3)	0.00	0.00
=		
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
(b) Levin Funds (from Schedule H5)		
Total Fodoral Possints		
Total Federal Receipts (subtract Line 18(c) from Line 19)▶	139000.00	154000.0
(555,000 - 10,0) 110111 - 1110 10)	10000.00	10-1000.0

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

	II. Disbursements	Total This Period		
21.	Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Calendar Year-to-Date	
	(i) Federal Share	0.00	0.00	
	(ii) Non-Federal Share	0.00	0.00	
	(b) Other Federal Operating			
	Expenditures	6045.00	15861.00	
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))▶	6045.00	15861.00	
22.	Transfers to Affiliated/Other Party			
)3	CommitteesContributions to	0.00	0.00	
	Federal Candidates/Committees and Other Political Committees	3297.87	3297.87	
24.	Independent Expenditures	0.00	0.00	
25.	(use Schedule E) Coordinated Party Expenditures			
	(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00	
26.	Loan Repayments Made	137000.00	137000.00	
07	Loans Made	0.00	0.00	
28.	Refunds of Contributions To: (a) Individuals/Persons Other			
	Than Political Committees	0.00	0.00	
	(b) Political Party Committees	0.00	0.00	
	(c) Other Political Committees			
	(such as PACs)	0.00	0.00	
	(d) Total Contribution Refunds			
	(add Lines 28(a), (b), and (c))▶	0.00	0.00	
29.	Other Disbursements	0.00	0.00	
		7		
30.	Federal Election Activity (2 U.S.C. §431(20))			
	(a) Allocated Federal Election Activity (from Schedule H6)			
	(i) Federal Share	0.00	0.00	
	(ii) III ovinii Chara	0.00	0.00	
	(ii) "Levin" Share(b) Federal Election Activity Paid Entirely	0.00		
	With Federal Funds	0.00	0.00	
	(c) Total Federal Election Activity (add	0.00	0.00	
	Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00	
31.	Total Disbursements (add Lines 21(c), 22,			
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	146342.87	156158.87	
32.	Total Federal Disbursements			
	(subtract Line 21(a)(ii) and Line 30(a)(ii)			
	from Line 31)	146342.87	156158.87	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures		
3. Total Contributions (other than loans) (from Line 11(d), page 3)	139000.00	154000.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	139000.00	154000.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	6045.00	15861.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8. Net Operating Expenditures (subtract Line 37 from Line 36)	6045.00	15861.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 6 OF 12 Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Building A Better PA Full Name (Last, First, Middle Initial) Lancaster Mews Partners LP Date of Receipt Mailing Address One Crescent Drive 2015 11 02 City Zip Code State Transaction ID: SA11AI.4214 PΑ Philadelphia 19112 Amount of Each Receipt this Period FEC ID number of contributing C 15000.00 federal political committee. Receipt Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General 15000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Michael V Sencindiver Date of Receipt Mailing Address 717 Main Street 11 02 2015 City State Zip Code Transaction ID: SA11AI.4212 NJ Riverton 08077 Amount of Each Receipt this Period FEC ID number of contributing 15000.00 federal political committee. Receipt Name of Employer Occupation KMS Development Partners LLC Principal/President Receipt For: Aggregate Year-to-Date ▼ Primary General 15000.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 30000.00 SUBTOTAL of Receipts This Page (optional)..... 30000.00 TOTAL This Period (last page this line number only).....

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the	FOR LINE NUMBER: PAGE 7 OF 12 (check only one)
_			Detailed Summary Page	13 14 15 16 17
	y information copied from such Reports and St for commercial purposes, other than using the			
	NAME OF COMMITTEE (In Full) Building A Better PA			
A.	Full Name (Last, First, Middle Initial) Working Philadelphians PAC Mailing Address 305 Queen Street			Date of Receipt
		11 24 2015		
	City Philadelphia	State PA	Zip Code 19147	Transaction ID : SA11C.4217 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C co	0592949	109000.00
	Name of Employer Occupation		l	Receipt
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 109000.00	
— В.	Full Name (Last, First, Middle Initial)			Date of Receipt
	Mailing Address	M = M / D = D / Y = Y = Y		
	City	State	Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer	Occupation	1	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	
<u> </u>	Full Name (Last, First, Middle Initial)			Date of Receipt
	Mailing Address	M = M / D = D / Y = Y = Y		
	City	State	Zip Code	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		
	Name of Employer	Occupation	1	
	Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼	
s	UBTOTAL of Receipts This Page (optional)			109000.00

TOTAL This Period (last page this line number only).....

109000.00

	CHEDULE B (FEC Form 3X)	Lloo oon	varata ashadula(s)	FOR LINE I	_		PAG	E 8	OF	12
IT	EMIZED DISBURSEMENTS		category of the	(check only		□ 00	□ 04			1.00
			Summary Page	X 21b 27	22 28a	23 28b	24 28c	25		26 30b
Δr	ny information copied from such Reports and Statem	l nente may	not be sold or use						utions	
	for commercial purposes, other than using the nam									•
$\overline{\ }$	NAME OF COMMITTEE (In Full)									
	Building A Better PA									
<u>/_</u>										
^	Full Name (Last, First, Middle Initial)				Data of I	Disburseme	ant.			
Α.	Bank of America									
	Mailing Address 301 Carnegie Center				11	25	/ Y	2015	Y	
	•	State	Zip Code		Transa	ction ID : S	SR21R 4	219		
	Purpose of Disbursement	NJ	08540		Transa					
	Bank Fee			001	Amount (of Each Di	shursem	ent this	Perio	nd
	Candidate Name				7					
	Building A Better PA			Category/ Type		7	-	1	5.00	
		nent For:	2015							
		Primary	General							
		Other (spe								
	State: District:		Annual							
В.	Full Name (Last, First, Middle Initial) Bank of America				Date of I	Disburseme	ent			
٠.	Bank of America				M M	/ D D	/ Y	Y Y	V	
	Mailing Address 301 Carnegie Center				12	04		2015		
	,	State NJ	Zip Code		Transa	ction ID : S	SB21B.4	221		
	Purpose of Disbursement	INU	08540							
	Bank Fee			001	Amount of	of Each Di	sbursem	ent this	Perio	od
	Candidate Name			Category/						
	Building A Better PA			Type		7	7	;	30.00	
		nent For:								
		Primary	General							
	State: District:	Other (spe	Annual							
	Full Name (Last, First, Middle Initial)									
C.	Common Sense Consulting				Date of I	Disburseme	ent			
					M M	/ D D	/ Y	YY	I Y	
	Mailing Address PO Box 21				07	24		2015		
	City	State	Zip Code							
	-	NJ	08525		Transa	ction ID : S	SB21B.4	211		
	Purpose of Disbursement									
	Administrative Services			001	Amount of	of Each Di	sbursem	ent this	Perio	od
	Candidate Name			Category/				100	00.00	
	Building A Better PA Office Sought: House Disbursem	nent For:	2015	Туре		7	7			_
		Primary	General							
		Other (spe								
	State: District:		Annual							
							-	40:	F 00	\neg
S	SUBTOTAL of Disbursements This Page (optional)			············ •		7	7	104	5.00	
_	OTAL This Period (last page this line number only).									
	with a residual contract padd this line humber of the contract					- AND			ORG	

SCHEDULE B (FEC Form 3X)			-	PAGE 9 OF 12	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(orlook orliy		00	
	Detailed Summary Page	X 21b 27		23 24 25 26 28b 28c 29 30l	
Any information copied from such Reports and Staten	nents may not be sold or us	sed by any perso	on for the purpo	ose of soliciting contributions	
or for commercial purposes, other than using the name					
NAME OF COMMITTEE (In Full)					
Building A Better PA					
/ Full Name (Last, First, Middle Initial)					
A. Common Sense Consulting			Date of Disb	ursement	
			M = M /	D D / Y Y Y Y	
Mailing Address PO Box 21			11	15 2015	
City	State Zip Code				
Hopewell	NJ 08525		Transaction	n ID : SB21B.4216	
Purpose of Disbursement					
Administrative Services		001	Amount of E	ach Disbursement this Period	
Candidate Name		Category/		1000.00	
Building A Better PA	want Fam. 2015	Type		1000.00	
Office Sought: House Disburser Senate	ment For: 2015 Primary General				
	Other (specify)				
State: District:	Annual				
Full Name (Last, First, Middle Initial)					
B. Common Sense Consulting			Date of Disb	ursement	
		M = M /	D D / Y Y Y Y Y		
Mailing Address PO Box 21	Mailing Address PO Box 21				
City	City State Zip Code				
Hopewell	NJ 08525		Transactio	n ID : SB21B.4222	
Purpose of Disbursement					
Administrative Services		001	Amount of E	ach Disbursement this Period	
Candidate Name		Category/		4000.00	
Building A Better PA Office Sought: House Disburser	ment For: 2015	Туре	7	7	
	Primary General				
	Other (specify)				
State: District:	Annual				
Full Name (Last, First, Middle Initial)					
C.			Date of Disb	ursement	
			M = M /	D D / Y Y Y Y Y	
Mailing Address	Mailing Address				
City	City State Zip Code				
Down of Dish	,				
Purpose of Disbursement	Purpose of Disbursement				
Candidate Name		Amount of E	ach Disbursement this Period		
Sandidate Hame		Category/ Type			
Office Sought: House Disburser	ment For:	.,,,,,			
Senate	Primary General				
President	Other (specify) ▼				
State: District:					
				F000 00	
SUBTOTAL of Disbursements This Page (optional)		·····•		5000.00	
TOTAL This Davied (last need this line number and his				6045.00	
TOTAL This Period (last page this line number only)			1 1 1 1		

SCHEDULE B (FEC Form 3X)	Han annual orbits (A	FOR LINE	NUMBER:	PAGE 10 OF 12		
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(Gricon Grilly	,			
	Detailed Summary Page	21b 27	22 X 23 28a 28b	24 25 26 28c 29 30		
Any information copied from such Reports and Stater or for commercial purposes, other than using the name	nents may not be sold or us	sed by any perso	on for the purpose	of soliciting contributions		
NAME OF COMMITTEE (In Full)	le and address of any point	cai committee to	Solicit Continuations	s nom such commutee.		
Building A Better PA						
Full Name (Last, First, Middle Initial)						
A. Brighter Pennsylvania PAC			Date of Disburse			
Mailing Address 102 Tasker Street				2015		
City	State Zip Code		Transaction ID	1 · CD22 /227		
Philadelphia	PA 19148		Transaction in) . 3D23.4221		
Purpose of Disbursement Contribution		011	Amount of Each	Disbursement this Period		
Candidate Name		Category/		2207.97		
Building A Better PA		Type		3297.87		
	ment For: 2015					
Senate Procident	Other (energity) —					
State: President State:	Other (specify) ▼ Annual					
Full Name (Last, First, Middle Initial)	7 till dai					
B.			Date of Disburse	ement		
			M M / D			
Mailing Address						
City	State Zip Code					
Purpose of Disbursement			A	Dishawaanant this David		
Candidate Name			Amount of Each	Disbursement this Period		
Candidate Name		Category/ Type				
Office Sought: House Disburser	ment For:					
Senate	Primary General					
	Other (specify) ▼					
State: District: Full Name (Last, First, Middle Initial)						
C.			Date of Disburse	ement		
Mailing Address			M M / D	D / Y Y Y Y		
City	State Zip Code					
Purpose of Disbursement	Т					
Tarpose of Bissardoment		Amount of Each	Disbursement this Period			
Candidate Name	Candidate Name					
Office Sought: House Disburser	ment For:	Туре				
	Primary General					
President	Other (specify)					
State: District:	· · · · · · · · · · · · · · · · · · ·					
SUBTOTAL of Disbursements This Page (optional)				3297.87		
		<u> </u>		2227.2		
TOTAL This Period (last page this line number only)			1	3297.87		

SCHEDULE B (FEC Form 3X)	Llea caparata achadula(-)	FOR LINE		PAGE 11 OF 12
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only		
	Detailed Summary Page	21b 27	22 23 28a 28b	24 25 X 26 30b
Any information copied from such Reports and Staten	nents may not be sold or use	ed by any perso	on for the purpose	of soliciting contributions
or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)				
Building A Better PA				
Full Name (Last, First, Middle Initial)				
A. International Brotherhood of Electrical W	orkers (IBEW) Local 98	3 COPE	Date of Disburs	ement
			M M / D	D / Y Y Y Y
Mailing Address 1719 Spring Garden Street			12	2015
City	State Zip Code			
Philadelphia	PA 19130		Transaction II	D : SB26.4220
Purpose of Disbursement				
Loan Repayment		009	Amount of Each	Disbursement this Period
Candidate Name		Category/		137000.00
Building A Better PA Office Sought: House Disbursen	nent For: 2015	Туре		.5. 500.00
	Primary General			
	Other (specify)			
State: District:	Annual			
Full Name (Last, First, Middle Initial)				
В.			Date of Disburs	ement
Mailing Adalyses			M = M / D	D / Y Y Y Y
Mailing Address				
City	State Zip Code			
Purpose of Disbursement			Amount of Each	Disbursement this Period
Candidate Name			Amount of Each	i Dispursement this Period
		Category/ Type		
Office Sought: House Disbursen	nent For:	71	,	,
	Primary General			
	Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) C.			Date of Disburs	ement
				D / Y Y Y Y
Mailing Address				
0:	7' 0 1			
City	State Zip Code			
Purpose of Disbursement				
				Disbursement this Period
Candidate Name		Category/		
000		Туре	7	
Office Sought: House Disbursen Senate	nent For: Primary General			
	Other (specify)			
State: District:	(cpcc) V			
SUBTOTAL of Disbursements This Page (optional)				137000.00
		·		127000 00
TOTAL This Period (last page this line number only)		·····		137000.00

SCHEDULE C (FEC Form 3X)

Use separate schedule(s) for each category of the Detailed Summary Page

PAGE 12 OF 12 FOR LINE 13 OF FORM 3X

		Dotailed Carrillary 1 c	.90
AME OF COMMITTEE (In Full)		Tr	ansaction ID : SC/10.4154
Building A Better PA			
LOAN SOURCE Full Name (Last, F	irst Middle Initial)		Election:
International Brotherhood of Electrical W			Primary
	,		General
Mailing Address 1719 Spring Garden S	Street		Other (specify)
The opining cards in			
City Philadelphia	State _{PA} ZIP	Code 19130	
Original Amount of Loan	Cumulative Paymen	t To Date B	alance Outstanding at Close of This Period
137000.0	10	137000.00	0.00
13700.0	,	137000.00	0.00
TERMS	.		
Date Incurred	Date I	V V V	
05 06 2014		On Demand	% (apr) Yes X No
			11 (17)
List All Endorsers or Guarantors (if	• /		
1. Full Name (Last, First, Middle Init	tial)	Name of Employer	
Mailing Address		Occupation	
Walling Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed	
		Outstanding:	
2. Full Name (Last, First, Middle Initi	al)	Name of Employer	
M. T. A. I.I.			
Mailing Address		Occupation	
		Amount	
City	State ZIP Code	Guaranteed	
		Outstanding:	
3. Full Name (Last, First, Middle Initi	al)	Name of Employer	
Mailing Address		Occupation	
City	State ZIP Code	Amount Guaranteed	
	211 0000	Outstanding:	7
4. Full Name (Last, First, Middle Initi	al)	Name of Employer	
Mailing Address		Occupation	
City	State 7ID Code	Amount	
City	State ZIP Code	Guaranteed Outstanding:	
SUBTOTALS This Period This Page (or	otional)		0.00
CE TALE THIS FORGET THIS Fage (OF	,		
OTALS This Period (last page in this I	ine only)		0.00
Carry outstanding balance only to LINE	E 3, Schedule D, for this line	e. If no Schedule D, carry fo	orward to appropriate line of Summary.