

# City of Reading

## Candidate Political Committee Form

The reporting of candidate political committees is required by the City of Reading Code of Ethics, Section 12 Campaign Contributions & Reporting Requirements. Section 12 describes the limitations placed on candidates and the reporting requirements of candidates. Section 12 also requires that the formation of a candidate political committee be reported to the City Clerk's office.

If you are unsure about the need to file the Candidate Political Committee Form, please contact the City Clerk's office at 610-655-6204. This form must be filed with the City Clerk's office upon its completion.

Name and Address of Committee: Friends of Jim McHale

Name of Candidate: Jim McHale

Bank Account Information of Committee: Customers Bank

Treasurer's Name: Steve King

Date Formed: \_\_\_\_\_

Report Prepared By:

James R McHale

Name: 3/17/2015

Date: \_\_\_\_\_

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BY: ...mak...

# City of Reading

## Campaign Finance Disclosure Statement

City of Reading Code of Ethics Section 12 Campaign Contributions & Reporting Requirements mandates that candidates submit a Campaign Disclosure Statement "whenever a Candidate, treasurer of a Candidate Political Committee, or other representative of a Candidate Political Committee files a required report of receipts and expenditures with the Berks County Board of Elections and/or Secretary of the Commonwealth as required by the Pennsylvania Election Code (25 P.S. §§3241, et seq.), or other applicable laws or regulations, such person shall at the same time file with the City Clerk, a copy of all information set forth in such report(s), in that format mandated by the Board of Ethics. Such filing with the City Clerk shall be accompanied by a written statement, signed by the person making the filing that subscribes and swears to the information set forth in such filing."

Please attach a copy of the Campaign Finance Disclosure Statement as submitted to the Berks County Board of Elections.

I verify that the information in this Campaign Finance Disclosure Statement and attached report of receipts and expenditures are true and correct.

James R McHale  
Printed Name

[Signature]  
Signature

3/17/2015  
Date

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# STATEMENT OF FINANCIAL INTERESTS

PLEASE PRINT NEATLY

01 LAST NAME FIRST NAME MI SUFFIX

M C H A L E J A M E S R

02 ADDRESS office (business or governmental) or home City State Zip Code Area Code Phone

1512 Barn St Reading PA 19604 (484) 487-7120

NOTE: IF YOU ARE INCLUDING ATTACHMENTS, DO NOT INCLUDE ANYTHING THAT BEARS YOUR SOCIAL SECURITY NUMBER OR FINANCIAL ACCOUNT NUMBERS.

03 STATUS Check applicable block or blocks, more than one block may be marked. (See instructions on page 2)

A  Candidate (including write-in) C  Public Official (Current) D  Public Employee (Current) E  Check this block if you are filling as a solicitor  Check this block if you are amending an original filing

B  Nominee C  Public Official (Former) D  Public Employee (Former)

04 PUBLIC POSITION OR PUBLIC OFFICE (administrator, member, Commissioner, job title, etc.)  seeking  hold  held

A MAYOR  seeking  hold  held

B

05 GOVERNMENTAL ENTITY in which you are/were an Official, Employee, Candidate or Nominee (e.g., dept, agency, authority, borough, board, commission, county, school district, twp, etc.)

A

B

06 OCCUPATION OR PROFESSION (This may be the same as block 4) 07 YEAR Indicate calendar year for which form is being filed. SEE INSTRUCTIONS.

Real Estate Salesperson 2014

08 REAL ESTATE INTERESTS (See instructions on page 2) If NONE, check this box.

09 CREDITORS (See instructions on page 2). Creditor (Name and Address) If NONE, check this box.

Name: Barclay Card Address: 100 South West Street Wilmington DE 19801 Interest Rate

10 DIRECT OR INDIRECT SOURCES OF INCOME including (but not limited to) all employment. (See instructions on pg. 2) ONLY IF NONE, check this block.

Name: Sherman Development Group 50 N 5th St Reading PA 19601  
Remain of Reading 1290 Broadcast Rd Wyomissing PA 19610  
Berks Catholic High School 955 S. Wyomissing Blvd Reading PA 19611  
Metals Your Way 141 S. 7th St Reading PA 19602

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11 GIFTS (See instructions on page 2) If NONE, check this box.

Source of Gift Value of Gift

Address of Source of Gift Circumstances (including description) of Gift

12 TRANSPORTATION, LODGING, HOSPITALITY (See instructions on page 2) If NONE, check this box.

Source (Name and Address) Value

13 OFFICE, DIRECTORSHIP, OR EMPLOYMENT IN ANY BUSINESS (See instructions on page 2) If NONE, check this box.

Business Entity (Name and Address) Position Held

Name: Address:

14 FINANCIAL INTEREST IN ANY LEGAL ENTITY IN BUSINESS FOR PROFIT (See instructions on page 2) If NONE, check this box.

Name and Address of Business Interest Held

McHale Development Group, LLC 100%  
440 N 3rd St LLC 70%

15 BUSINESS INTERESTS TRANSFERRED TO IMMEDIATE FAMILY MEMBER (See instructions on page 2) If NONE, check this box.

Business (Name and Address) Interest Held Relationship Date Transferred

Transferee (Name and Address)

The undersigned hereby affirms that the foregoing information is true and correct to the best of said person's knowledge, information and belief; said affirmation being made subject to the penalties prescribed by 18 Pa.C.S. § 4904 (unsworn falsification to authorities) and the Public Official and Employee Ethics Act, 65 Pa.C.S. § 1109(b).

Signature [Signature] Enter Current Date 3/3/2015

THIS FORM IS CONSIDERED DEFICIENT IF ANY BLOCK ABOVE IS NOT COMPLETED. MAKE A COPY FOR YOUR RECORDS.

<b>CANDIDATE'S AFFIDAVIT</b>	<b>BERKS COUNTY BOARD OF ELECTIONS</b> 633 Court Street Reading, PA 19601	OFFICE USE ONLY
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Type or Print Firmly in Ink

Name: McHale Last Name      James First Name      R Middle Name or Initial      Suffix

Residential Address: 1512 Bern St Street Address

City: Reading State: PA Zip Code: 19604

Municipality (City, Boro, or Township): Reading

Mailing Address (if different from residential): \_\_\_\_\_ Street Address

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Voting Precinct Name (Including Ward & Division, if applicable): 17-8

Office for which you are seeking nomination: Mayor District Number (if applicable): \_\_\_\_\_

Email address: Jim@McHaleForMayor.com

Name as it is to appear on the Ballot: Jim McHale

**CANDIDATE AFFIDAVIT** - I do swear (or affirm) that my residence, my election district and the title of the office for which I desire to be a candidate are as specified above, that I am eligible for said office, that I will not knowingly violate any election law or any law regulating and limiting nomination and election expenses, and prohibiting corrupt practices in connection therewith; that I am aware of the provisions of Section 1626 of the Pennsylvania Election Code requiring pre-election and post-election reporting of campaign contributions and expenditures; and that unless I am a candidate for the office of school board in a district where that office is elective or the office of magisterial district judge, my name has not been presented as a candidate by nomination petitions of any other party for the same office; that I am not a candidate for an office which I already hold, the term of which is not set to expire in the same year as the office subject to this affidavit.

Sworn to and subscribed before me this

15 day of March 2015

[Signature]

Signature of Notary

My commission expires 3-28-15

I swear (or affirm) to the above part(s) as required by the law(s) applicable to the office I am seeking.

[Signature]

Signature of Candidate

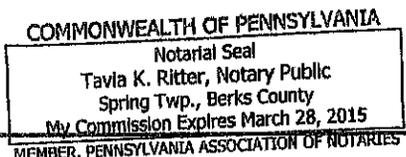
484.467.7120

Telephone Number

Reading

City, Borough or Township

SEAL



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OFFICE      DISTRICT      POLITICAL PARTY      NUMBER OF PETITIONS

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COMMENTS: \_\_\_\_\_

CHECKER	INPUT	VERIFY
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