Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

					1										
Filer Identificat	ion 201	.0095			Repor Filed E		CANDI	DATE	COM	MITTEE	\checkmark	LOBI	BYIST		
Name of Filing (Committee, Candi	date or L	obbyist:		Friends	of Tir	na Davis								
Street Address:	3012 WEST	AVE													
City:	BRISTOL						State:	PA		Zip Co	Zip Code: 19007-0000				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 DA PRIM		POST- 3	3.	AMENDN REPORT		Yes	V No)	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4. X	2ND FRIDA	AY PRE	E- 5.					TERMIN REPORT		Yes	No	>	
report type)	ANNUAL REPOR	T 7.					NG METHO CHECK O			PAPER		\checkmark	DISKE	TTE	
Name of Office S	Name of Office Sought by Candidate:						DATE O	F ELEC	TION	District Number	Office Code	Par	ty Code	County Code	
							мо	DAY	YEAR	141	STH	DEM	1	09	
REPRESENTATIVE IN THE GENERAL ASSEMBLY							11	8	3 2011	 	(SEE INS	STRUCTI	ONS FOR	CODES)	
	Receipts and	мо	DAY	YEAR	2		мо	DAY	YEAR	FC	OR OFFIC	E USE	ONLY		
Expenditures	s from:		1 1	. 2	011 T	0	9	2	7 2011						
A. Amount Bro	ught Forward Fro	om Last F	Report			\$			3,716.26						
B. Total Monet	ary Contributions	s And Red	ceipts (Fron	n Sche	dule I)	\$	\$ 0.00								
C. Total Funds	Available (Sum (Of Lines A	A and B)			\$;		3,716.26						
D. Total Expen	ditures (From Sc	hedule II	II)			\$	•		850.00						
E. Ending Cash	Balance (Subtra	ct Line D	From Line	C)		\$			2,866.26	4					
F. Value Of In-	Kind Contribution	ns Receiv	ved (From S	chedu	le II)	\$			0.00	4					
G. Unpaid Deb	ts And Obligation	s (From	Schedule I\	/)		\$			0.00		,				
				AFF	IDAVI	T SE	CTION								
PART I - If this i			-							-				•	
correct and compl) that this report, in ete.	cluding th	e attached so	neaule	s filed on	paper	or by elect	ronic med	lium, are to	the best o	of my knov	viedge	and bell	er, true	
Sworn to and subs	cribed before me th day of	nis	20						Signatur	e of Perso	n Submitt	ing Rep	oort		
		ure				_				Prir	ited Name				
My Commission E	-									Ema	il				
	мо	D	AY	YR		_		Area	Code	Daytin	ne Teleph	one Nu	mber		
Part II- If this is	a report of a ca	ndidate's	authorized	Comn	nittee, C	andid	ate shall	sign her	e.						
I swear (or affirm) No 320) as amend) that to the best of ed.	my knowl	edge and bel	ief this	opolitical	comm	iittee has n	ot violate	d any provis	sions of th	e act of Ju	ine 3,1	937 (P.L	1333,	
Sworn to and subso	cribed before me thi	S							S	Signature	of Candida	ite			
	day of					_				Printe	ed Name				
	. Signature	2				-									
My Commission Exp	oires 					_				Ema	···				
	мо	D	YAY	YR	L			Area C	ode	D	aytime Te	elephor	e Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** Friends of Tina Davis From: <u>1/1/2011</u> **To:** <u>9/27/2011</u> 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.

Name of Filing Committee or Candidate				porting				
Fr						То	:	
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City State Zip Code (Plus 4)								
							Γ	PAGE TOTAL

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 Froi	orting P	eriod	Το):		
					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	g Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Comm	nittee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C or	n Schedule I, Detaile	ed 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			AMOUNT	г
Full Name of Contributor				мо	DAY	YEA	R		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus 4)						
Employer Name				Occupat	tion				
Employer Mailing Address/Principal Pla Business	ce of		City		State			Zip Code (Plus	5 4)
Enter Grand Total of Part C on Sch	edule I, Detailed S	umn	narv Page, Sectio	on 3.		ĺ		PAGE TO	DTAL
	·····	-	, , , , , , , , , , , , , , , , , , , ,				\$		0.00

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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	od				
From				m: To:					
				D	ATE			AMOUNT	Г
Full Name				мо	DAY	YEAR			
Mailing Address	Mailing Address						\$	5	0.00
City	State	Zip Code (Plus 4)						
Receipt Description	·						•		
Enter Grand Total of Part E on Sched	ule I. Detailed Sum	mary Page	Section	4				PAGE TO	TAL
	are 1, Detailed Sum	iniai y Faye,	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		
Friends of Tina Davis	From:	<u>1/1/2011</u> To:	<u>9/27/2011</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 PAR	ſF)		
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, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate Ro			Reporting	g Period			
	From: To:						
				DATE		АМО	UNT
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 Detaile Section 2.			iled Sum	mary Pag	je,	PAGE	TOTAL
					4	6	0.00

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

Name of Filing Committee or Candidate					Rej	porting P	eriod			
					Fro	From: To:				
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor						Occupat	tion			
Employer Mailing Address/Principal Place of City State Business			State	Zip Code(Plus Descrip 4)			ption of	Contribution		

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed	PAGE TOTAL
Summary Page, Section 3.	0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candida	te		Reporti	ng Period			
Friends of Tina Davis			From	<u>1/</u>	<u>1/2011</u>	То:	<u>9/27/2011</u>
				DATE			AMOUNT
To Whom Paid BOBBY HENON CAMPAIGN OFFICE			мо	DAY	YEAR		
Mailing Address 7221 FRANKFORD	AVENUE		5	11	2011	\$	250.00
CityPHILADELPHIAStateZip Code (Plus 4)PA19135-1010				otion of Exp			CITY COUNCIL
To Whom Paid BUCKS VICTORY	мо	DAY	YEAR				
Mailing Address 10 EAST COURT STREET				11	2011	\$	250.00
CityDOYLESTOWNStateZip Code (Plus 4)PA18901				otion of Exp			VICTORY FUND
To Whom Paid BUCKS VICTORY			мо	DAY	YEAR		
Mailing Address 10 EAST COURT S	STREET		6	30	2011	\$	100.00
City DOYLESTOWN	State PA	Zip Code (Plus 4) 18901		tion of Exp			S VICTORY
To Whom Paid KATHY BOOCKVAR			мо	DAY	YEAR		
Mailing Address 76 PINE VALLEY F	OAD		6	30	2011	\$	250.00
CityDOYLESTOWNStateZip Code (Plus 4)PA18901-2114			POLITI	I Dition of Exp CAL CONTI ATE COUR	RIBUTIO		- PA
Enter Grand Total of Expenditure	s on Page 1, R	eport Cover Page, Item I	•			\$	PAGE TOTAL 850.00

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