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 :	on 960	00334				port ed B		CA	NDII	DATE		СОМИ	1ITTEE		LOB	BYIST	√	
Name of Filing C	ommittee, Cand	idate or L	obbyist:		STI	NE,	TAMA	RA M	CKII	NNEY								
Street Address:	212 N. 3RD	ST. STE	203															
City:	HARRISBUR	G					State:			PA			Zip Code: 17101					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRII PRIMARY		-	2.	30 DA		Р	OST-	3.		AMENDME REPORT?	ENT	Yes	No)	√
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRICELECTION		E-	5.	30 DA		Р	OST-	6. X	(TERMINAT REPORT?	TION	Yes	No)	√
report type)	ANNUAL REPOR	T 7.	Year 200)1				NG ME					PAPER		√	DISKI	TTE	
Name of Office S	ought by Candid	late:	•		-			DAT	ΕO	F ELE	CTIC	ON	District Number	Office Code	Pai	ty Code	Cour	
								МО		DAY	Y	EAR			•			
									11		6	2001		(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	МО	DAY	YEAF	₹			МО		DAY	Y	'EAR	FOI	OFFIC	E USE	ONLY		
Expenditures	trom:		1	1	1	Т	0		11	:	26	2001						
A. Amount Bro	ught Forward Fr	om Last P	Report				\$					0.00						
B. Total Moneta	ary Contribution	s And Rec	eipts (Fro	m Sche	dule	e I)	\$					0.00						
C. Total Funds	Available (Sum	Of Lines A	and B)				\$					0.00						
D. Total Expend	ditures (From So	hedule II	II)				\$					950.00						
E. Ending Cash	Balance (Subtra	ct Line D	From Lin	e C)			\$				(9	50.00)						
F. Value Of In-	Kind Contributio	ns Receiv	ed (From	Schedu	ile II	I)	\$					0.00						
G. Unpaid Debt	s And Obligation	ıs (From S	Schedule	IV)			\$					0.00		·				
				AFF	FID/	AVI	T SE	CTIC	NC									
PART I - If this is		-	_									_						
I swear (or affirm) correct and comple		iciuaing th	e attacned	scneaule	s file	a on	paper	ог ву є	electr	ronic m	eaiun	n, are to t	ne best of	ту кпом	rieage	and bei	ier , tr	ue
Sworn to and subs	cribed before me the day of	nis	20									Signature	of Person	Submitt	ing Re	oort		
	Signa	ture					- -						Print	ed Name				-
My Commission Ex	rpires						_		•				Email					
	МО	D	AY	YR						Are	ea Co	de	Daytime	Telepho	one Nu	mber		
Part II- If this is	a report of a ca	ndidate's	authorize	ed Comr	nitte	ee, C	andid	ate sl	nalls	sign he	ere.							
I swear (or affirm) No 320) as amende		f my knowl	edge and b	elief this	s poli	itical	comm	ittee h	as no	ot viola	ted a	ny provis	ions of the	act of Ju	ine 3,1	937 (P.	133	3,
Sworn to and subsc	ribed before me th	is	20									s	ignature of	Candida	te			_
			_ 20				_						Printed	Name				-
	Signatur	e					_											_
My Commission Exp	ires												Email					
	МО	D	AY	YF	2		-			Area	Code		Da	ytime Te	lephor	ne Numl	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period		
STINE, TAMARA MCKINNEY	From:	To:	11/26/2001
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			
TOTAL for the Reporting	Period (1)	\$	0.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)			
Contributions Received From Political Committees (Part A)	-	\$	0.00
All Other Contributions (Part B)		\$	0.00
TOTAL for the Reporting	g 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
All Other Contributions (Part D)		\$	0.00
TOTAL for the Reporting	g Period (3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)			
TOTAL for the Reporting	g Period (4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa		\$	0.00

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 Candida	Reporting						
			From:		То	:	
		•		DATE			AMOUNT
Full Name of Contributing Committee			мо	DAY	YEAR		
Mailing Address	_	_				\$	0.00
City	State	Zip Code (Plus 4)					

|

0.00

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 Candidate		Rep	orting P	eriod			
			Froi	m:		To):	
		•			DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
			- 1					
Mailing Address							\$	0.00
Mailing Address City	State	Zip Code (Plus 4))				\$	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		P	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.00
Mailing Address							+	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Schee	dule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00

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			Rep	orting Pe	riod			
			Fror	n:		To	:	
				D	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							1	
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupa	tion			
Employer Mailing Address/Principal Pla	ce of Business	City		•	State		Zip C	ode (Plus 4)
Enter Grand Total of Part C on Scho	dule I, Detailed S	Summary Page,	, Sectio	on 3.		:	\$	PAGE TOTAL 0.00

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		Report	ing Perio	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (F	Plus 4)					
Receipt Description	•	•			•	I	<u> </u>	
Futor Cunnel Total of Bout	Fan Cabadula I Batailad	Commence Dame	Caatian	4				PAGE TOTAL
Enter Grand Total of Part	E ON Schedule 1, Detalled	Summary Page,	Section	4.			\$	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		
STINE, TAMARA MCKINNEY	From:	To:	11/26/2001
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (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,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	Reporting							
	From: To:							
				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 Sche Section 2.	dule II, In-Kind (Contributions Detai	iled Sum	mary Pag	je,		PAGE TOTAL	
						\$	(0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	•			Re	porting	g Period			
				Fro	om:		To:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor	•		•		Occu	pation			
Employer Mailing Address/Principal Pla	ice of Business	Cit	ty	Stat	e Zi	ip Code(Plus 4)	Descri	iptio	n of Contribution
Enter Grand Total of Part G on Sci	nedule II, In-K	ind	Contributions D	etaile	ed				PAGE TOTAL
Summary Page, Section 3.	,								0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or C	Candidate		Reporti	ng Period			
STINE, TAMARA MCKINNEY			From			То:	11/26/2001
				DATE			AMOUNT
To Whom Paid			мо	DAY	YEAR		
ELECT TOM TANGRETTI							
Mailing Address			10	22	2001	\$	250.00
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	POLITIC	CAL CONTR	IB.				
To Whom Paid			мо	DAY	YEAR		
COMMITTEE TO ELECT VINCE	HUGHES		МО	DAI	ILAN		
Mailing Address			11	14	2001	\$	500.00
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
			POL. CC	NT.			
To Whom Paid			мо	DAY	YEAR		
COMMONWEALTH FUTURE PAG	C		1-10				
Mailing Address			11	19	2001	\$	200.00
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	I	I					PAGE TOTAL
Enter Grand Total of Expen	ditures on Page 1, Re	port Cover Page, Item D).			\$	950.00