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 : | ion 9600 | 334 | | | Repoi Filed | | CAND | IDATE | | СОМ | MITTEE | | LOBI | BYIST | \checkmark | | | | | |
|---|----------------------------------|-----------|----------------------|---------|----------------|--------------|--------------------|------------|------------------|--------------------|------------------------|-------------|--------------|----------------|--------------|--|--|--|--|--|
| Name of Filing C | Committee, Candid | ate or Lo | obbyist: | - | Tamara | a Stin | e | | | | | | | | | | | | | |
| Street Address: | 215 Pine Stre | et,Suite | 203 | | | | _ | | | | | | | | | | | | | |
| City: | Harrisburg | | | | | | State: | PA | | | Zip Code: 17101 | | | | | | | | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDA PRIMARY | Y PRE- | - 2. | 30 D PRIM | | POST- | DST- 3. X | | | IENT ? | Yes | No | , 🔨 | | | | | |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. | | | | 30 D ELEC | AY TION | POST- 6. | | | TERMINA REPORT | | Yes | No | · 🗸 | | | | | |
| report type) | ANNUAL REPORT | 7. | Year 2013 | | | | NG METH CHECK O | | | | PAPER | | \checkmark | DISKE | TTE | | | | | |
| Name of Office Sought by Candidate: | | | | | | DATE (| OF ELEC | CTIC | ON | District Number | Office Code | Par | ty Code | County Code | | | | | | |
| | | | | | | мо | DAY | Y | EAR | | | | | 10000 | | | | | | |
| | | | | | | | 11 | L | 5 | 2013 | | (SEE INS | TRUCTI | ONS FOR | CODES) | | | | | |
| | Receipts and | мо | DAY | YEAR | | | мо | DAY | Y | EAR | FO | R OFFIC | e use | ONLY | • | | | | | |
| Expenditures | s from: | | 5 7 | 20 | 013 | Ю | e | 5 1 | 0 | 2013 | | | | | | | | | | |
| A. Amount Bro | ught Forward From | n Last R | eport | - | | \$ | ; | | | 0.00 | 1 | | | | | | | | | |
| B. Total Monet | ary Contributions | And Rec | eipts (Fron | n Sche | dule I) | \$ | 5 | | | 0.00 | | | | | | | | | | |
| C. Total Funds Available (Sum Of Lines A and B) | | | | | | \$ | 5 | | | 0.00 | | | | | | | | | | |
| D. Total Expen | ditures (From Scho | edule II | I) | | | \$ | 5 | | 1, | 150.00 | | | | | | | | | | |
| E. Ending Cash | Balance (Subtract | t Line D | From Line | C) | | 4 | 5 | | (1,1 | 50.00) | | | | | | | | | | |
| F. Value Of In- | Kind Contributions | s Receive | ed (From S | chedu | le II) | 4 | 5 | | | 0.00 | | | | | | | | | | |
| G. Unpaid Deb | ts And Obligations | (From S | Schedule IV | ') | | 4 | 5 | | | 0.00 | | , | | | | | | | | |
| | | | | AFF | IDAV | it se | CTION | | | | | | | | | | | | | |
| PART I - If this is | s a Committee rep | ort, trea | surer sign | here. 1 | lf this i | s a Ca | ndidate r | eport, c | andi | idate sig | gn here. | | | | | | | | | |
| I swear (or affirm correct and compl |) that this report, incl ete. | uding the | attached sc | hedules | s filed or | paper | or by elec | tronic me | ediun | n, are to i | the best o | f my know | ledge | and beli | ef , true | | | | | |
| Sworn to and subs | scribed before me this day of | 5 | 20 | | | | | | : | Signature | e of Perso | n Submitti | ing Rep | oort | | | | | | |
| | | | | | | _ | | | | | Prin | ted Name | | | | | | | | |
| My Commission E | Signatu | re | | | | | | | | | Ema | | | | | | | | | |
| | MO | DA | AY | YR | | _ | | Are | a Co | de | | e Telepho | one Nu | mber | | | | | | |
| Part II- If this is | a report of a cand | didate's | authorized | Comm | nittee, (| Candio | late shall | sign he | ere. | | | | | | | | | | | |
| I swear (or affirm) No 320) as amende |) that to the best of n ed. | ny knowle | edge and beli | ef this | politica | comn | nittee has i | not violat | ed a | ny provis | ions of the | e act of Ju | ne 3,1 | 937 (P.I | 1333, | | | | | |
| Sworn to and subso | ribed before me this | | | | | | | | | s | ignature o | of Candida | te | | | | | | | |
| | day of | | | | | _ | | | | | Printe | d Name | | | | | | | | |
| | Signature | | | | | _ | | | | | | | | | | | | | | |
| My Commission Exp | bires | | | | | | | | | | Ema | 11 | | | | | | | | |
| | мо | D/ | AY | YR | | _ | | Area | Code | | Da | aytime Te | lephon | e Numb | er | | | | | |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** From: <u>5/7/2013</u> **To:** 6/10/2013 Tamara Stine 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 | | | | Reporting Period | | | | | | |
|--|-------|------------------|----|------------------|------|------|----|------------|--|--|
| | | | | From: To: | | | : | | | |
| | | | | | DATE | | | AMOUNT | | |
| Full Name of Contributing Committee | | | | мо | DAY | YEAR | | | | |
| Mailing Address | | | | | | | \$ | 0.00 | | |
| City | State | Zip Code (Plus 4 | 4) | | | | | | | |
| | | | | | | | | PAGE TOTAL | | |
| | | | | | | | | | | |
| inter 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 Candidate Reporting Period | | | | | | | | | | |
| | | | From: To | | |): | | | | |
| | | | | | 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 | Reporting Period | | | | | | |
|--|-------|---------|------------|------------------|-----|------|------|------------|--|--|
| | | | | То: | | | | | | |
| | | | | DA | TE | | | 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 Schedule I, Detailed Summary Page, Section 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: | | | | n: To: | | | | | |
| | | | | D | IOUNT | | | | |
| Full Name of Contributor | | | | мо | DAY | YEAR | \$ | 0.00 | |
| Mailing Address | | | | | | | | | |
| City | State | Zip Code (Pl | ıs 4) | | | | | | |
| Employer Name | | | | Occupation | | | | | |
| Employer Mailing Address/Principal Place of Business City | | | | • | State | | Zip Code | e (Plus 4) | |
| Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3. | | | | | | | P# | AGE TOTAL 0.00 | |

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 | | | Reporting Period | | | | | | |
|---------------------------------------|----------------------|------------|------------------|--------|-----|------|----|---------|------|
| | | | From: | m: To: | | | | | |
| | | | | D | ATE | | | AMOUNT | |
| Full Name | | | | мо | DAY | YEAR | \$ | | 0.00 |
| Mailing Address | | | | | | | | | |
| City | State | Zip Code (| Plus 4) | | | | | | |
| Receipt Description | · | • | | | | | • | | |
| | | _ | | | | | | PAGE TO | TAL |
| Enter Grand Total of Part E on Sched | ule 1, Detailed Sumn | nary 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 | | | | | | | | | | |
|---|-------------------------|----------------------------|------------------|--|--|--|--|--|--|--|--|
| Tamara Stine | From: | <u>5/7/2013</u> To: | <u>6/10/2013</u> | | | | | | | | |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR | | | | | | | | | | | |
| TOTAL for the Reporting Pe | riod (1) | \$ | 0.00 | | | | | | | | |
| 2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR | T F) | | | | | | | | | | |
| 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 R | | | Reporting | Period | Period | | | | | |
|--|----------|-------------------|-----------|--------|-----------|-------------|-----|------|--|--|
| F | | | | From: | | | То: | | | |
| | DATE | | | AMOUNT | | | | | | |
| Full Name of Contributor | | | | DAY | YEAR | | | | | |
| Mailing Address | | _ | | | | 7 \$ | | 0.00 | | |
| City | State | Zip Code (Plus 4) | | | | | | | | |
| Description of Contribution: | | | 1 | | | | | | | |
| Enter Grand Total of Part F on Sched Section 2. | iled Sum | mary Pag | je, | | PAGE TOTA | AL. | | | | |
| | | | | | | \$ | | 0.00 | | |

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

| Name of Filing Committee or Candidate | | | | Reporting Period | | | | | | |
|--|-------|------------------|-------|------------------|--------------|---------------------------|-----------------------|--|--|--|
| | | | | From: | | | | | | |
| | | | | | DATE | | AMOUNT | | | |
| Full Name of Contributor | | | | мо | DAY | YEAR | | | | |
| Mailing Address | | | | | | | \$ 0.00 | | | |
| City | State | Zip Code(Plus 4) | | | | | | | | |
| Employer of Contributor | | | | Occupa | ation | | | | | |
| Employer Mailing Address/Principal Place of Business City | | | State | e Zip | Code(Plus 4) | Descri | ption of Contribution | | | |
| Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3. | | | | | | PAGE TOTAL 0.00 | | | | |

SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Ca | Indidate | | Reporti | ng Period | | | | | | |
|--------------------------------------|----------------------|--------------------------|----------------------------|----------------------------|----------|-----|------------------|--|--|--|
| Tamara Stine | | | From <u>5/7/2013</u> | | | То: | <u>6/10/2013</u> | | | |
| | | | | DATE | | | AMOUNT | | | |
| To Whom Paid | | | мо | DAY | YEAR | | | | | |
| Vic Stabile for Judge | | | | | • | | | | | |
| Mailing Address unknown | | | | 13 | 2013 | \$ | 150.00 | | | |
| City unknown State Zip Code (Plus 4) | | | | Description of Expenditure | | | | | | |
| PA 17101 | | | | political contribution | | | | | | |
| To Whom Paid | | | мо | DAY | YEAR | | | | | |
| Glen Grell for House Committee | 2 | | | | | | | | | |
| Mailing Address unknown | | | 6 | 4 | 2013 | \$ | 500.00 | | | |
| City unknown | State | Zip Code (Plus 4) | Description of Expenditure | | | | | | | |
| | PA | 17101 | political contribution | | | | | | | |
| To Whom Paid | | | мо | DAY | YEAR | | | | | |
| Voters for Vance | | | | | | | | | | |
| Mailing Address unknown | | | 6 | 4 | 2013 | \$ | 500.00 | | | |
| City unknown | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | | | | |
| PA 17101 | | | political contribution | | | | | | | |
| | | | _ | | | | PAGE TOTAL | | | |
| Enter Grand Total of Expend | itures on Page 1, Re | eport Cover Page, Item I |). | | | \$ | 1,150.00 | | | |