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 9600	334			Rep File	oort		CAN	IDII	DATE		COMMITTEE						
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		Tam	nara	Stine							·				
Street Address:	215 Pine Stre	et,Suite	203															
City:	Harrisburg -							State	:	PA			Zip Cod	le: 17	7101			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA' PRIMARY	Y PRE	- 2	2.	30 DA PRIMA		Р	OST-	3.		AMENDM REPORT?		Yes	No	~	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA' ELECTION	y pre	Ē	5.	30 DA ELECT		Р	OST-	6. X		TERMINA REPORT?		Yes	No	~	
report type)	ANNUAL REPORT	7.	Year 2013					CHECK					PAPER		V	DISKE	TTE	
Name of Office S	Sought by Candida	te:	-					DATE	E O	F ELE	СТІС	N	District Office Party Number Code			ty Code	County	,
	,							МО		DAY	YI	AR	Number	Code			code	
									11		5	2013		(SEE IN	STRUCTI	ONS FOR (CODES)	
	Receipts and	МО	DAY	YEAR	ł			МО		DAY	YI	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	from:	1	10 22	2	013	T	0		11	2	25	2013						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$					0.00						
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule	I)	\$					0.00						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$					0.00						
D. Total Expen	ditures (From Scho	edule II	I)				\$				1,3	390.00						
E. Ending Cash	Balance (Subtract	Line D	From Line (C)			\$				(1,39	90.00)						
F. Value Of In-	Kind Contributions	Receive	ed (From Se	chedu	le II)	\$					0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$					0.00			•			
				AFF	IDA	١٧٧	ΓSE	CTIO	N									
PART I - If this is	s a Committee rep	ort, trea	surer sign l	here. :	If thi	is is	a Can	didat	e re	port, c	andi	date sig	ın here.					
I swear (or affirm) correct and comple) that this report, incl ete.	uding the	attached scl	nedule	s filed	d on	paper (or by e	lectr	onic m	edium	, are to t	he best of	f my kno	wledge	and beli	ef , true	1
Sworn to and subs	cribed before me this day of	:	20								S	ignature	of Persoi	n Submit	ting Re	ort		
			_				- -						Print	ted Name	e			
My Commission Ex	Signatu opires	re							-				Emai	il				
	МО	DA	AY	YR			-			Are	ea Cod	le	Daytim	e Telepi	none Nu	mber		
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nitte	e, C	andida	ate sh	alls	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and beli	ef this	polit	ical	comm	ittee ha	as no	ot viola	ted an	y provisi	ions of the	e act of J	une 3,1	937 (P.L	. 1333,	
Sworn to and subsc	ribed before me this											Si	ignature o	of Candid	ate			
	day of		_ 20				-						Duinto	d Name				١
	Cianatura						-						Printe	d Name				
My Commission Exp	Signature ires								•				Emai	il				
	МО	D/	AY	YR	l		•			Area	Code		Da	aytime T	elephor	e Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
Tamara Stine	From:	10/22/201	<u>13</u> To:	11/25/2013
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	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	Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add an 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 Candidat	e		Reporting	Period			
		1	From:		То	:	
		•		DATE			AMOUNT
Full Name of Contributing Committee			мо	DAY	YEAR		
Mailing Address		_				\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

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.

Name of Filing Comm	ittee or Candidate		Rep	orting F	Period			
			Froi	m:		To) :	
		I			DATE			AMOUNT
Full Name of Contributo	r			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						
	<u>.</u>							PAGE TOTAL
								PAGE TOT/

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		A	MOUNT
Full Name of Contributing Committee				МО	DAY	YEAR	\$	0.00
Mailing Address							7 *	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	lule 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							7	
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupa	tion			
Employer Mailing Address/Principal Pla	ce of Business	City		•	State		Zip Co	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 Peri	od			
			From:			To:		
		'			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	'						<u> </u>	
	- C		. .:	_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	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 Peri	od	
Tamara Stine	From:	10/22/2013 To :	11/25/2013
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	R	
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 Car				Reporting Period					
			From:			To	:		
				DATE			AMOUNT		
Full Name of Contributor			МО	DAY	YEAR				
Mailing Address						7 \$		0.00	
City	State	Zip Code (Plus 4)							
Description of Contribution:	•		•	•		•			
					-				
Enter Grand Total of Part F o	n Schedule II, In-Ki	nd Contributions Detai	ailed Summary Page,			PAGE TOTAL		•	
Section 2.						\$	(0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address									\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	ation				
Employer Mailing Address/Principal Plac	e of Business	City	′	Stat	e Zip	Code(Plus 4)	Desci	ript	ion of Contribution	on
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	ontributions De	etaile	ed				PAGE TO	ΓAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting				
Tamara Stine	From	10/22/2013	То:	11/25/2013	

				DATE			AMOUNT	
To Whom Paid			МО	DAY	YEAR			
Kathy Silcox for MD			1-10		1 = 1 111			
Mailing Address unknown			10	28	2013	\$	140.00	
City unknown	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	17050	political contribution					
To Whom Paid			мо	DAY	YEAR			
Cumberland Co Republican Co	mmittee		1-10					
Mailing Address unknown			10	28	2013	\$	250.00	
City Carlise	State	Zip Code (Plus 4)	Description of Expenditure					
PA 17050				contributi	on			
To Whom Paid				DAY	YEAR			
Freinds of Larry Farnese								
Mailing Address unknown	ddress unknown				2013	\$	500.00	
City unknown	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•		
	PA	17050	political	contributi	on			
To Whom Paid			мо	DAY	YEAR			
Freinds of Kim Ward					1 = 1			
Mailing Address unknown			11	12	2013	\$	250.00	
City unknown	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•		
	PA	17050	political	contributi	on			
To Whom Paid			мо	DAY	YEAR			
Freinds of Jim Cawley			140		ILAK			
Mailing Address unknown			11	19	2013	\$	250.00	
City unknown	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	17050	political	contributi	on			
							PAGE TOTAL	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	1,390.00	