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		CANDI	DATE	СОМ	MITTEE		LOB	BYIST	✓	
Name of Filing C	Committee, Candid	ate or Lo	bbyist:	-	Tamara	a Stin	9								
Street Address:	215 Pine Stre	et,Suite	203							_					
City:	Harrisburg						State:	PA		Zip Code: 17101					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		2ND FRIDA PRIMARY	Y PRE-	- 2.	30 D PRIM				AMENDMENT REPORT?		Yes	No	\checkmark	
(place X to the right of	6TH TUESDAY PRE-ELECTION		2ND FRIDA ELECTION	Y PRE	- 5.	30 D. ELEC	AY I TION	POST-	0ST- 6. X		TERMINATION REPORT?		No	\checkmark	
report type)	ANNUAL REPORT	7.	Year 2013				NG METH			PAPER		\checkmark	DISKE	TTE	
Name of Office S	L Sought by Candida	te:					DATE O	F ELEC	TION	District Number	Office Code	Par	ty Code	County Code	
							мо	DAY	YEAR		10000				
							11		5 2013	·	(SEE INSTRUCTIONS FOR CODES)				
	Receipts and	мо	DAY	YEAR			мо	DAY	YEAR	FC	R OFFIC	e use	ONLY		
Expenditures	s from:	1	0 22	20	013	Ю	11	2	5 2013	3					
A. Amount Bro	ught Forward Fron	n Last Re	eport			\$			0.00						
B. Total Monetary Contributions And Receipts (From Schedule I)							5		0.00)					
C. Total Funds	Available (Sum Of	Lines A	and B)			\$	5		0.00						
D. Total Expen	ditures (From Sch	edule III)			\$	5		1,390.00						
E. Ending Cash	Balance (Subtrac	t Line D F	rom Line	C)		\$		(1,390.00)						
F. Value Of In-	Kind Contributions	s Receive	d (From S	chedul	le II)	\$	5		0.00	_					
G. Unpaid Deb	ts And Obligations	(From S	chedule IV	')		\$	5		0.00						
				AFF	IDAV	IT SE	CTION								
PART I - If this is	s a Committee rep	ort, treas	surer sign	here. I	lf this i	s a Ca	ndidate r	eport, ca	andidate si	gn here.					
I swear (or affirm correct and compl) that this report, incl ete.	uding the	attached sc	hedules	s filed or	i paper	or by elect	ronic me	dium, are to	the best o	f my know	/ledge	and beli	ef , true	
Sworn to and subs	scribed before me this day of	5	20						Signatur	e of Perso	n Submitt	ing Rep	oort		
	Signatu					_				Prin	ted Name				
My Commission E	-									Ema	il				
	мо	DA	Y	YR				Area	a Code	Daytin	e Teleph	one Nu	mber		
Part II- If this is	a report of a cand	didate's a	uthorized	Comm	nittee, (Candic	late shall	sign he	re.						
I swear (or affirm) No 320) as amendo) that to the best of n ed.	ny knowled	dge and beli	ef this	politica	comn	nittee has n	ot violate	ed any provi	sions of th	e act of Ju	ine 3,1	937 (P.L	. 1333,	
Sworn to and subso	cribed before me this day of		20						5	Signature	of Candida	te			
			20			_				Printe	d Name				
	Signature					_				Ema					
My Commission Exp	oires					_				cma	••				
	мо	DA	Y	YR		_		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** From: <u>10/22/2013</u> To: Tamara Stine 11/25/2013 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:	i cirioù	То			
			From:		10	•		
				DATE			AMOUNT	
Full Name of Contributing) Committee		мо	DAY	YEAR			
Mailing Address						\$	0.00	
City	State	Zip Code (Plus 4)						
						Г	PAGE TOTAL	
Enter Grand Total of Pa	art A on Schedule I, Detail	ed Summary Page, Sec	tion 2.			\$	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. (Exclude contributions from political committees reported in Part A)								
Name of Filing Committee or Candidat	e		Rep Fror	orting P	eriod	Τα):	
					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 S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	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 Period					
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Comm	ittee			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		АМС	DUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Princi Business	pal Place of		City		State		Zip Code ((Plus 4)
Enter Grand Total of Part C o	n Schedule I, Detai	led Sumr	nary Page, Secti	on 3.			PAG	GE TOTAL
	-,						5	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	Name of Filing Committee or Candidate			Reporting Period						
From:				m: To:						
				D	ATE			AMOUNT	Г	
Full Name				мо	DAY	YEAR				
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 Perio	od	
Tamara Stine	From:	<u>10/22/2013</u> То:	<u>11/25/2013</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	TF)		
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					
Fr						То:		
				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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	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					Reporting Period					
					Fro	rom: 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 Stat Business			State		Zip 4)	Code(Plus	Descri	ption of	f 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 Candid	Name of Filing Committee or Candidate				Reporting Period				
Tamara Stine			From	<u>10/22</u>	2/2013	То:	<u>11/25/2013</u>		
				DATE			AMOUNT		
To Whom Paid Kathy Silcox for MD			мо	DAY	YEAR				
Mailing Address unknown			10	28	2013	\$	140.00		
City unknown	StateZip Code (Plus 4)PA17050			Description of Expenditure political contribution					
To Whom Paid Cumberland Co Republican Committee				DAY	YEAR				
Mailing Address unknown			10	28	2013	\$	250.00		
CityCarliseStateZip Code (Plus 4)PA17050			Description of Expenditure political contribution						
To Whom Paid Freinds of Larry Farnese			мо	DAY	YEAR				
Mailing Address unknown			11	6	2013	\$	500.00		
City unknown	State PA	Zip Code (Plus 4) 17050	Description of Expenditure political contribution						
To Whom Paid Freinds of Kim Ward	·		мо	DAY	YEAR				
Mailing Address unknown			11	12	2013	\$	250.00		
City unknown	State PA	Zip Code (Plus 4) 17050		ition of Exp l contribut		1			
To Whom Paid Freinds of Jim Cawley			мо	DAY	YEAR				
Mailing Address unknown			11	19	2013	\$	250.00		
City unknown	State PA	Zip Code (Plus 4) 17050		ition of Exp l contribut		2			
Enter Grand Total of Expenditure	es on Page 1. R	eport Cover Page. Item I	D.				PAGE TOTAL		
						\$	1,390.00		