### **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 :	<b>on</b> 9600	334			Repor Filed		CAI	NDI	DATE		COM	AITTEE		LUB	БИТЗ	<b>)</b> 1	<b>✓</b>
Name of Filing C	ommittee, Candid	ate or L	obbyist:		STINE,	TAMA	RA M	CKI	NNEY		1						
Street Address:	212 N. 3RD S	T. STE	203														
City:	HARRISBURG						State	e:	PA			Zip Cod	de: 17	7101-	0000		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. <b>X</b>	2ND FRIDA PRIMARY	Y PRE-	2.	30 DA		P	POST-	3.		AMENDM REPORT		Yes		No	<b>/</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	5.	30 DA		P	POST-	6.		TERMINA REPORT		Yes		No	<b>\</b>
report type)	ANNUAL REPORT	7.	<b>Year</b> 2014				NG ME CHEC					PAPER		<b>\</b>	DIS	KET	TE
Name of Office S	- Sought by Candida	te:					DAT	ΕO	F ELE	CTIO	N	District Number	Office Code	Pa	rty Co		County Code
							МО		DAY	YE	EAR			•			
								11		4	2014		(SEE IN	STRUCT	IONS F	OR CC	DDES)
	Receipts and	МО	DAY	YEAR			МО		DAY	ΥI	EAR	FC	R OFFI	CE US	E ON	LY	
Expenditures	from:		1 1	20	014	ГО		3	(3)	31	2014						
A. Amount Bro	ught Forward Fron	n Last R	eport			\$					0.00						
B. Total Moneta	ary Contributions	And Rec	eipts (Fron	Sche	dule I)	\$					0.00						
C. Total Funds	Available (Sum Of	Lines A	and B)			\$					0.00						
D. Total Expend	ditures (From Sch	edule II	I)			\$				2,3	30.00						
E. Ending Cash	Balance (Subtract	Line D	From Line	C)		\$				(2,33	30.00)						
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedul	le II)	\$					0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	<b>'</b> )		\$					0.00			'			
					IDAV:												
I swear (or affirm)	that this report, incl	-	_						-		_		f my kno	wledge	and I	belief	f , true
correct and comple	ete. cribed before me this	ì									`` <b>-</b>	of Perso	- Chit-	tina Da			
-	day of		_ 20			_					ngnature	or Perso	ii Subiiiit	ung Ke	рогс		
	Signatu	re				_						Prin	ted Name	•			
My Commission Ex	·					_		•				Ema	il				
	МО		AY	YR						a Coc	le	Daytim	ie Teleph	one N	umbei	r	
	a report of a cand				•									2 .		/B.I	4222
No 320) as amende	ed.	iy knowie	euge and ben	er this	political	Comm	nttee n	as n	Ot Violat	eu an	iy provis	ions or th	e act or J	une 3,.	1937 (	(P.L.	1333,
Sworn to and subsc	ribed before me this day of		20								S	ignature (	of Candid	ate			
						_						Printe	d Name				
My Commission Exp	Signature ires					_ <del>_</del>						Ema	il				-
	МО	D	AY	YR		_			Area	Code		D	aytime T	elepho	ne Nu	ımbeı	 r

## SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Detailed Summary Luge	-			
Name of Filing Committee or Candidate	Reporting	Period		
STINE, TAMARA MCKINNEY	From:	1/1/201	<u>4</u> To:	3/31/2014
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 Page			\$	0.00

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	his Part to itemize onl with an aggregate val	-			•				
Name of Filing Comm	ittee or Candidate		Reporting Period						
			Fre	om:		То	:		
		1			DATE			AMOUNT	
Full Name of Contribution	ng Committee			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

## 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				Reporting Period From: To:					
			Fro	m:		10	):		
					DATE		AMOUNT		
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4)							

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

**PAGE TOTAL \$** 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 Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule 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.)

		М	orting Pe	100			
		Fron	n:		То	:	
			D/	<b>ATE</b>		АМ	OUNT
			МО	DAY	YEAR		
						\$	0.00
State	Zip Code (Plus	s <b>4</b> )					
			Occupat	ion			
e of	City			State		Zip Code	(Plus 4)
dule I, Detailed Su	ımmary Page,	Section	on 3.				0.00
	e of	e of City	State Zip Code (Plus 4)	State Zip Code (Plus 4) Occupat	State Zip Code (Plus 4)  Occupation  Other State	State Zip Code (Plus 4)  Occupation  Occupation  Other State  Occupation  Output  Outp	DATE AM  MO DAY YEAR  \$ State Zip Code (Plus 4)  Occupation  City State Zip Code

# 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		Repor	ting Perio	od			
			From:			To:		
				D	ATE		АМС	DUNT
Full Name				МО	DAY	YEAR		
Mailing Address							<b>\$</b>	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description		•		•	•	•	•	
Enter Grand Total of Part E	on Schedule T. Detailer	d Summary Page	Section	4			PAG	E TOTAL
	on concadio 1, betanet	a cammur, ruge,	200.011	••			\$	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:	<u>1/1/2014</u> <b>To:</b>	3/31/2014
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 Candid	ate		Reportin	g Period			
			From:			To:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>\$</b>	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on S	chedule II, In-Kir	nd Contributions Deta	iled Sun	nmary Pag	ge,		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	eporting F	Period			
				Fr	om:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus 4	)					
Employer of Contributor					Occupa	tion			
Employer Mailing Address/Principal Plac Business	ee of Ci	ity	State	•	Zip 4)	Code(Plus	Descri	ption o	of Contribution
Enter Grand Total of Part G on Scho Summary Page, Section 3.	edule II, In-l	Kind (	Contributions [	etail	led				PAGE TOTAL 0.00

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	ndidate		Reportii	ng Period			
STINE, TAMARA MCKINNEY			From	<u>1/</u>	1/2014	То:	3/31/2014
				DATE			AMOUNT
To Whom Paid			мо	DAY	YEAR		
Markosek for State Leg							
Mailing Address unknown			1	27	2014	\$	500.00
City unknown	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	·	
	PA	17101		l contribut			
<b>To Whom Paid</b> Citzens for Hughes			мо	DAY	YEAR		
-						1	
Mailing Address unknown			1	27	2014	\$	1,000.00
<b>City</b> unknown	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA 17101						
To Whom Paid			мо	DAY	YEAR		
PA Cable PAC							
Mailing Address unknown			3	12	2014	\$	80.00
City unknown	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	17101	politica	l contribut	ion		
<b>To Whom Paid</b> Tomlinson for State Senate			мо	DAY	YEAR		
Mailing Address unknown			3	11	2014	\$	500.00
<b>City</b> unknown	State	Zip Code (Plus 4)	Descrip	tion of Exp	ı Denditure	<u>                                     </u>	
G	PA	17101	1	l contribut			
<b>To Whom Paid</b> Hampden Twp Republican Assoc	iation		мо	DAY	YEAR		
Mailing Address unknown			3	24	2014	\$	250.00
City unknown	State	Zip Code (Plus 4)	Descrin	tion of Exp	) Denditure	:	
2	PA	17101		l contribut			
	·	·					PAGE TOTAL
Enter Grand Total of Expendi	A D 1 D-	wast Carrey Dage Thous	_				