

# Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

<b>Filer Identification Number :</b> 9200098		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>			
<b>Name of Filing Committee, Candidate or Lobbyist:</b> FRIENDS TO ELECT TINA TARTAGLIONE											
<b>Street Address:</b> PO BOX 28566											
<b>City:</b> PHILADELPHIA				<b>State:</b> PA		<b>Zip Code:</b> 19149					
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No <input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7. X	Year 2014	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>			
<b>Name of Office Sought by Candidate:</b>  SENATOR IN THE GENERAL ASSEMBLY					<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
					<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	2	STS	DEM	51
					11	4	2014	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>		
		11	25	2014		12	31	2014			
<b>A. Amount Brought Forward From Last Report</b>					\$		9,590.18				
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>					\$		3,000.00				
<b>C. Total Funds Available (Sum Of Lines A and B)</b>					\$		12,590.18				
<b>D. Total Expenditures (From Schedule III)</b>					\$		975.69				
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>					\$		11,614.49				
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>					\$		0.00				
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>					\$		30,000.00				

## AFFIDAVIT SECTION

**PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.**

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.**

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
**Detailed Summary Page**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS TO ELECT TINA TARTAGLIONE	From: <u>11/25/2014</u> To: <u>12/31/2014</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 0.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 0.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 2,000.00
<b>All Other Contributions (Part D)</b>	\$ 1,000.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 3,000.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)</b>	\$ 3,000.00
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## 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.

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS TO ELECT TINA TARTAGLIONE	<b>From:</b> <u>11/25/2014</u> <b>To:</b> <u>12/31/2014</u>

				DATE			AMOUNT		
Full Name of Contributing Committee					MO	DAY	YEAR	\$	2,000.00
HEALTH PARTNERS OF PHILADELPHIA PAC									
Mailing Address					12	12	2014		
901 MARKET ST SUITE 500									
City	PHILADELPHIA		State	PA		Zip Code (Plus 4)	19107		

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

<b>PAGE TOTAL</b>
\$ 2,000.00

**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.)**

<b>Name of Filing Committee or Candidate</b>  FRIENDS TO ELECT TINA TARTAGLIONE	<b>Reporting Period</b>  <b>From:</b> <u>11/25/2014</u> <b>To:</b> <u>12/31/2014</u>
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				DATE	AMOUNT
<b>Full Name of Contributor</b> JOHN & LORRAINE BROWN				<b>MO</b>	<b>DAY</b>
<b>Mailing Address</b> 107 SPRINGHOUSE LANE				12	5
<b>City</b> NEWTOWN SQUARE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19073		2014	\$ 1,000.00
<b>Employer Name</b> TRIAD STRATEGIES				<b>Occupation</b> ASSOCIATE	
<b>Employer Mailing Address/Principal Place of Business</b> 116 PINE ST5TH FLOOR			<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101

**Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.**

<b>PAGE TOTAL</b>
\$ 1,000.00

## 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: <span style="float: right;">To:</span>
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			DATE			AMOUNT
Full Name			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Receipt Description						

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
FRIENDS TO ELECT TINA TARTAGLIONE		From: <u>11/25/2014</u> To: <u>12/31/2014</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)		\$	0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)		\$	0.00
<b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period (3)		\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)		\$	0.00



**SCHEDULE II**  
**PART F**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OF \$50.01 TO \$250.00**

Name of Filing Committee or Candidate	Reporting Period  From: <span style="float: right;">To:</span>
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						<b>PAGE TOTAL</b>  \$ 0.00

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

Name of Filing Committee or Candidate	Reporting Period
	From: To:

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description 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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS TO ELECT TINA TARTAGLIONE	From <u>11/25/2014</u> To: <u>12/31/2014</u>

DATE				AMOUNT
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
AT&T MOBILITY				
<b>Mailing Address</b> PO BOX 537104	11	27	2014	\$ 94.04
<b>City</b> ATLANTA	<b>State</b> GA	<b>Zip Code (Plus 4)</b> 30353	<b>Description of Expenditure</b> IPAD MONTHLY FEE	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
BRIGID DOWLING				
<b>Mailing Address</b> 126 HAINES AVE	12	23	2014	\$ 200.00
<b>City</b> ELKINS PARK	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19027	<b>Description of Expenditure</b> CAMPAIGN FINANCE WORK	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
LOCAL 22 PHILADELPHIA FIREFIGHTERS				
<b>Mailing Address</b> 415 N 05TH ST 2ND FLOOR	12	23	2014	\$ 100.00
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19123	<b>Description of Expenditure</b> MEMORIAL FUND DONATION	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
63RD WARD DEMOCRATIC COMMITTEE				
<b>Mailing Address</b> 1259 STANWOOD ST C/O BRIAN EDDIS	12	23	2014	\$ 300.00
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19111	<b>Description of Expenditure</b> DONATION HOLIDAY PARTY	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
PNC BANK				
<b>Mailing Address</b> FRANKFORD AND KNORR STS	11	28	2014	\$ 85.51
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19149	<b>Description of Expenditure</b> SERVICE FEES	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
PNC BANK				
<b>Mailing Address</b> FRANKFORD AND KNORR STS	12	29	2014	\$ 173.02
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19149	<b>Description of Expenditure</b> CHECK ORDER COSTS	

<b>To Whom Paid</b> PNC BANK			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 23.12
<b>Mailing Address</b> FRANKFORD AND KNORR STS			12	31	2014	
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19149	<b>Description of Expenditure</b> ACCT MAINTENANCE FEES			
<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b> <b>\$</b> 975.69

**SCHEDULE IV**

**STATEMENT OF UNPAID DEBTS**

**Use this Section to itemize all unpaid debts and obligations  
which are outstanding at the end of the reporting period**

<b>Name of Filing Committee or Candidate</b>  FRIENDS TO ELECT TINA TARTAGLIONE	<b>Reporting Period</b>  <b>From:</b> <u>11/25/2014</u> <b>To:</b> <u>12/31/2014</u>
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				DATE		Outstanding Balance of Debt	
Name of Creditor				MO	DAY	YEAR	
UFCW LOCAL 1776							
Mailing Address				5	16	2014	\$
3031 WALTON RD SUITE 310 BLDG A							30,000.00
City		State	Zip Code (Plus 4)	Description of Debt			
PLYMOUTH MEETING		PA	19462	LOAN TO COMMITTEE			
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL
							\$ 30,000.00