### **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> 920	0098			Repo		<b>y</b> :	CA	NDI	DATE		СОМІ	MITTEE	<b>~</b>	LUBE	1131	
Name of Filing C	ommittee, Candi	date or L	obbyist:	•	FRIE	NDS	то	ELEC	T TI	NA TA	RTAC	SLIONE					
Street Address:																	
City:	PHILADELPH	IA					State: PA						Zip Co	<b>de:</b> 19	9149		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	AY PRE-	- 2.		30 DA PRIMA					AMENDN REPORT		Yes	No	<b>\</b>	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	AY PRE	5.		30 DA ELECT		P	OST-	6. <b>X</b>		TERMINA REPORT		Yes	No	<b>√</b>
report type)	ANNUAL REPOR	7.	<b>Year</b> 2015			١		IG ME					PAPER		$\checkmark$	DISKE	TTE
Name of Office S	ought by Candid	ate:						DAT	ΈO	F ELE	CTIC	N	District Number	Office Code	Pari	ty Code	County Code
SENATOR IN TH	HE GENERAL ASS	SEMBLY						МО		DAY	YI	EAR	2	STS	DEM	1	51
SENATOR IN TI	TE GENERAL ASS	DEMBET							11		3	2015		(SEE IN	STRUCTIO	ONS FOR C	ODES)
	Receipts and	МО	DAY	YEAR				МО		DAY	Y	EAR	FC	OR OFFI	CE USE	ONLY	
Expenditures	trom:		10 20	) 2(	015	T	<b>)</b>		11		23	2015					
A. Amount Bro	ught Forward Fro	m Last F	eport				\$				9,8	818.58					
B. Total Moneta	ary Contributions	And Rec	eipts (Fron	n Sche	dule 1	I)	\$				14,	00.00					
C. Total Funds	Available (Sum C	of Lines A	and B)				\$				23,	818.58					
D. Total Expend	ditures (From Sc	nedule II	1)				\$				6,2	298.40					
E. Ending Cash	Balance (Subtra	ct Line D	From Line	C)			\$				17,5	20.18					
F. Value Of In-	Kind Contribution	ns Receiv	ed (From S	chedu	le II)		\$					0.00					
G. Unpaid Debt	s And Obligation	s (From	Schedule I\	<b>/</b> )			\$				30,0	00.00					
				AFF	IDA	VIT	SE	CTI	NC								
PART I - If this is			_									_					
correct and comple	) that this report, in ete.	cluaing th	e attached sc	neaules	s filea	on p	aper	or by (	electi	ronic m	eaium	, are to	ine best o	or my kno	wieage a	and belie	er , true
Sworn to and subs	cribed before me th day of	is	20								5	Signature	of Perso	n Submit	ting Rep	ort	
	Signat	ure					•						Prin	ted Name	•		
My Commission Ex	xpires												Ema	il			
	МО	D	AY	YR						Ar	ea Co	de	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a car	ndidate's	authorized	l Comm	nittee	, Ca	ndid	ate s	hall	sign h	ere.						
No 320) as amende			edge and bel	ief this	politio	calo	comm	ittee l	ias n	ot viola	ted ar	y provis	ions of th	e act of J	une 3,19	937 (P.L.	1333,
Sworn to and subsc	ribed before me this day of	5	20									s	ignature	of Candid	ate		
													Printe	ed Name			
My Commission Exp	Signature ires												Ema	nil			-
	МО	D	AY	YR						Area	Code		D	aytime T	elephon	e Numbe	 er

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	g Period			
FRIENDS TO ELECT TINA TARTAGLIONE	From:	10/20/20	<u>15</u> То:	11/23/2015
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)			\$	14,000.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	14,000.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	) Period	(4)	\$	0.00
			1	
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			\$	14,000.00

#### **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 Candidate				Period			
		F	rom:		То	:	
		1		DATE			AMOUNT
Full Name of Contributing C	ommittee		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.

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 Committe	e or Candidate	F	Reporting F	Period			
		F	From:	DATE	To	o:	AMOUNT
Full Name of Contributor			МО	DAY	YEAR		Allocki
Mailing Address City	State	Zip Code (Plus 4)				<b>\$</b>	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	lame of Filing Committee or Candidate Reporti				Period	g Period					
FRIEN	IDS TO ELECT TINA TARTAGLIONE	Ē		From:	10/2	20/2015	То:	11/23/2015			
					D/	<b>ATE</b>		AMOUNT			
Full N	ame of Contributing Committee				мо	DAY	YEAR				
PENN	NATIONAL INSURANCE INSERVO	PAC						<b>\$</b> 500.00			
Mailin	g Address				9	22	2015				
City	HARRISBURG	State		e (Plus 4)							
		PA	17101								
Full N	ame of Contributing Committee				МО	DAY	YEAR				
PA ST	ATE TROOPER ASSOC							<b>\$</b> 3,500.00			
Mailin	g Address				10	23	2015				
City	HARRISBURG	State	Zip Cod	e (Plus 4)							
		PA	17110								
Full N	ame of Contributing Committee				мо	DAY	YEAR				
PPFFA	A PAC FUND				МО	DAI	ILAK	\$ 500.00			
Mailin	g Address				10	23	2015				
City	HARRISBURG	State	Zip Cod	e (Plus 4)		23	2013				
		PA	17101								
Full N	ame of Contributing Committee	•	-		мо	DAY	YEAR				
PENN	SYLVANIA OPTOMETRIC PAC				MO	DAT	TEAR	\$ 500.00			
Mailin	g Address				10	23	2015	300.00			
City	HARRISBURG	State	Zip Cod	e (Plus 4)	] 10	25	2013				
		PA	17101								
Full N	ame of Contributing Committee		-		мо	DAY	VEAD				
PSEA	PACE				МО	DAY	YEAR	\$ 1,000.00			
Mailin	g Address				10	24	2015	1,000.00			
City	HARRISBURG	State	Zip Cod	e (Plus 4)	1 10	24	2013				
		PA	17105								
Full N	ame of Contributing Committee	•									
	TH PARTNERS OF PHILADELPHIA I	PAC			МО	DAY	YEAR	\$ 1,000.00			
Mailin	g Address				10	24	2015	1,000.00			
City	PHILADELPHIA	State	Zip Cod	e (Plus 4)	10	24	2015				
		PA	19107								

Full Name of Contributing Committee  BAYADA HOME HEALTH CARE PAC  MO DAY YE		
	/EAR	
		\$ 500.00
Mailing Address	2015	
City PHILADELPHIA State Zip Code (Plus 4)	2013	
PA 19107		
Full Name of Contributing Committee MO DAY YE.	/EAR	
STEAMFITTERS LOCAL 449		<b>\$</b> 1,000.00
Mailing Address	2015	
City PITTSBURGH State Zip Code (Plus 4)		
PA 15220		
Full Name of Contributing Committee MO DAY YE.	/EAR	
STEAMFITTERS LOCAL 449		<b>\$</b> 500.00
Mailing Address	2015	
City PITTSBURGH State Zip Code (Plus 4)		
PA 15220		
Full Name of Contributing Committee	/EAR	
CITIZENS FOR A BETTER COMMONWEALTH		<b>\$</b> 1,000.00
Mailing Address	2015	
City HARRISBURG State Zip Code (Plus 4)	2013	
PA 17108		
Full Name of Contributing Committee	/EAD	
Full Name of Contributing Committee	/EAR	\$ 500.00
Full Name of Contributing Committee BRAVO PAC Mailing Address		\$ 500.00
Full Name of Contributing Committee  BRAVO PAC  Mailing Address	<b>YEAR</b> 2015	\$ 500.00
Full Name of Contributing Committee BRAVO PAC  Mailing Address  10 30 20		\$ 500.00
Full Name of Contributing Committee BRAVO PAC  Mailing Address City HARRISBURG State PA 17101  Full Name of Contributing Committee	2015	\$ 500.00
Full Name of Contributing Committee BRAVO PAC  Mailing Address City HARRISBURG State PA 17101  Full Name of Contributing Committee	2015 /EAR	
Full Name of Contributing Committee BRAVO PAC  Mailing Address City HARRISBURG State PA 17101  Full Name of Contributing Committee PHILADELPHIA ASSOCIATION OF RETAIL DRUGGISTS  MO DAY YE MO DAY NO DAY YE MO DAY YE MO DAY YE MO DAY NO DAY YE MO DAY YE MO DAY YE MO DAY NO DAY YE MO DAY YE MO DAY NO DAY YE MO DAY NO DAY YE MO DAY NO DAY N	2015 /EAR	\$ 500.00 \$ 500.00
Full Name of Contributing Committee BRAVO PAC  Mailing Address City HARRISBURG State PA 17101  Full Name of Contributing Committee PHILADELPHIA ASSOCIATION OF RETAIL DRUGGISTS  Mo DAY YE MO DAY NO DAY YE MO DAY YE MO DAY YE MO DAY NO DAY YE MO DAY YE MO DAY NO DAY	2015 /EAR	
Full Name of Contributing Committee BRAVO PAC  Mailing Address City HARRISBURG State PA 17101  Full Name of Contributing Committee PHILADELPHIA ASSOCIATION OF RETAIL DRUGGISTS  Mailing Address  10 30 20 31 32 32 33 30 30 30 30 30 30 30	2015 /EAR	
Full Name of Contributing Committee BRAVO PAC  Mailing Address City HARRISBURG State Zip Code (Plus 4) PA 17101  Full Name of Contributing Committee PHILADELPHIA ASSOCIATION OF RETAIL DRUGGISTS  Mailing Address City PHILADELPHIA State Zip Code (Plus 4) PA 19115  Full Name of Contributing Committee PA 19115	2015 /EAR 2015	
Full Name of Contributing Committee BRAVO PAC  Mailing Address City HARRISBURG State Zip Code (Plus 4) PA 17101  Full Name of Contributing Committee PHILADELPHIA ASSOCIATION OF RETAIL DRUGGISTS  Mailing Address City PHILADELPHIA State Zip Code (Plus 4) PA 19115  Full Name of Contributing Committee PA 19115	2015 /EAR 2015	\$ 500.00
Full Name of Contributing Committee BRAVO PAC  Mailing Address  City HARRISBURG  State Zip Code (Plus 4) PA 17101  Full Name of Contributing Committee PHILADELPHIA ASSOCIATION OF RETAIL DRUGGISTS  Mailing Address  City PHILADELPHIA  State Zip Code (Plus 4) PA 19115  Full Name of Contributing Committee PA 19115  Full Name of Contributing Committee AFSCME AFL-CIO COUNCIL 13  Mailing Address	2015 /EAR 2015	
Full Name of Contributing Committee BRAVO PAC  Mailing Address  City HARRISBURG  State Zip Code (Plus 4) PA 17101  Full Name of Contributing Committee PHILADELPHIA ASSOCIATION OF RETAIL DRUGGISTS  Mailing Address  City PHILADELPHIA  State Zip Code (Plus 4) PA 19115  Full Name of Contributing Committee PA State Zip Code (Plus 4) PA 19115  Full Name of Contributing Committee AFSCME AFL-CIO COUNCIL 13	2015 /EAR 2015	\$ 500.00
Full Name of Contributing Committee BRAVO PAC  Mailing Address  City HARRISBURG  State Zip Code (Plus 4) 17101  Full Name of Contributing Committee PHILADELPHIA ASSOCIATION OF RETAIL DRUGGISTS  Mailing Address  City PHILADELPHIA  State Zip Code (Plus 4) 19115  Full Name of Contributing Committee PA 19115  Full Name of Contributing Committee AFSCME AFL-CIO COUNCIL 13  Mailing Address  10 30 20  AND AND AND AND AND AND AND AND AND AN	2015 /EAR 2015	\$ 500.00
Full Name of Contributing Committee BRAVO PAC  Mailing Address City HARRISBURG State Zip Code (Plus 4) 17101  Full Name of Contributing Committee PHILADELPHIA ASSOCIATION OF RETAIL DRUGGISTS  Mailing Address City PHILADELPHIA State Zip Code (Plus 4) 19115  Full Name of Contributing Committee AFSCME AFL-CIO COUNCIL 13  Mailing Address City HARRISBURG State Zip Code (Plus 4) 19115  Full Name of Contributing Committee AFSCME AFL-CIO COUNCIL 13  Mailing Address City HARRISBURG State Zip Code (Plus 4) 17111  Full Name of Contributing Committee	2015 /EAR 2015	\$ 500.00
Full Name of Contributing Committee BRAVO PAC  Mailing Address City HARRISBURG State Zip Code (Plus 4) 17101  Full Name of Contributing Committee PHILADELPHIA ASSOCIATION OF RETAIL DRUGGISTS  Mailing Address City PHILADELPHIA State Zip Code (Plus 4) 19115  Full Name of Contributing Committee AFSCME AFL-CIO COUNCIL 13  Mailing Address City HARRISBURG State Zip Code (Plus 4) 19115  Full Name of Contributing Committee AFSCME AFL-CIO COUNCIL 13  Mailing Address City HARRISBURG State Zip Code (Plus 4) 17111  Full Name of Contributing Committee	2015 /EAR 2015 /EAR	\$ 500.00
Full Name of Contributing Committee BRAVO PAC  Mailing Address  City HARRISBURG  State PA 17101  Full Name of Contributing Committee PHILADELPHIA ASSOCIATION OF RETAIL DRUGGISTS  Mailing Address  City PHILADELPHIA  State Zip Code (Plus 4) 19115  Full Name of Contributing Committee PA 19115  Full Name of Contributing Committee AFSCME AFL-CIO COUNCIL 13  Mailing Address  City HARRISBURG  State Zip Code (Plus 4) 19115  Full Name of Contributing Committee AFSCME AFL-CIO COUNCIL 13  Mailing Address  City HARRISBURG  State Zip Code (Plus 4) 17111  Full Name of Contributing Committee HIGHMARK HEALTH PAC  Mo DAY YE  Mailing Address	2015 /EAR 2015	\$ 500.00 \$ 500.00
Full Name of Contributing Committee BRAVO PAC  Mailing Address  City HARRISBURG  State PA 17101  Full Name of Contributing Committee PHILADELPHIA ASSOCIATION OF RETAIL DRUGGISTS  Mailing Address  City PHILADELPHIA State PA 19115  Full Name of Contributing Committee PASCME AFL-CIO COUNCIL 13  Mailing Address  City HARRISBURG  State Zip Code (Plus 4) 19115  Full Name of Contributing Committee AFSCME AFL-CIO COUNCIL 13  Mailing Address  City HARRISBURG  State Zip Code (Plus 4) 17111  Full Name of Contributing Committee HIGHMARK HEALTH PAC  Mo DAY YE  Mailing Address	2015 /EAR 2015 /EAR	\$ 500.00 \$ 500.00

Full Name of Contributing Committee FRIENDS OF FARNESE	МО	DAY	YEAR	<b>. .</b> 1 500 00		
						<b>\$</b> 1,500.00
Mailing Address				21	2015	
City PHILADELPHIA Star	ate	Zip Code (Plus 4)	11			
PA	Λ	19110				
Full Name of Contributing Committee						
Full Name of Contributing Committee	•		мо	DAY	ΥFΔR	
Full Name of Contributing Committee THE PENNSYLVANIA INSURANCE PAC			МО	DAY	YEAR	\$ 500.00
_						\$ 500.00
THE PENNSYLVANIA INSURANCE PAC	ate	Zip Code (Plus 4)	<b>MO</b>	<b>DAY</b> 21	<b>YEAR</b> 2015	\$ 500.00

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

**PAGE TOTAL**\$ 14,000.00

### 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	ame of Filing Committee or Candidate				Reporting Period					
			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:		
		•		C	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	us 4)					
Receipt Description	•	•			•	•	•	
Futor Curred Total of Bout	Fan Cabadula I. Datailad	Summer Base S	<b>!</b> !	4				PAGE TOTAL
Enter Grand Total of Part	E ON Schedule 1, Detalled	Summary Page, Se	ection	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	
FRIENDS TO ELECT TINA TARTAGLIONE	From:	<u>10/20/2015</u> <b>To:</b>	11/23/2015
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR	1	
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 Candidate Re				Reporting Period				
			From:			To:		
		•		DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						<b>7</b> \$	0.00	
City	State	Zip Code (Plus 4)						
Description of Contribution:	•	-	•	•		•		
Enter Grand Total of Part F on S	chedule II, In-Ki	nd Contributions Detai	led Sum	mary 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	lame of Filing Committee or Candidate					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	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi <sub>l</sub>	p Code(Plus 4)	Descr	iptio	on of Contribut	ion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE TO	TAL
Summary Page, Section 3.										0.00

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period					
FRIENDS TO ELECT TINA TARTAGLIONE	From	10/20/2015	То:	11/23/2015		

					DATE			AMOUNT			
To W	nom Paid			МО	DAY	YEAR					
RIEH'	S FLORIST			1-10		1 = 1 \					
Mailing Address				9	23	2015	\$	77.00			
City	PHILADELPHIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•				
		PA	19123	FLORAL ARRANGEMENT							
To Wh	nom Paid			МО	DAY	YEAR					
HERO	THRILL SHOW INC			МО	DAT	ILAK					
Mailin	g Address			9	23	2015	\$	50.00			
City	PHILADELPHIA	State	Zip Code (Plus 4)	Description of Expenditure							
		PA	19124	5 TICKE	5 TICKETS TO 2015 THRILL SHOW						
To W	nom Paid			МО	DAY	YEAR					
PHILA	DELPHIA PUBLIC RECORD	)		NO	DAI	ILAK					
Mailin	g Address			9	23	2015	\$	175.00			
City	PHILADELPHIA	State	Zip Code (Plus 4)	Description of Expenditure							
		PA	19148	1/4 PAGE AD 28TH ANNUAL LABOR DAY PARADE							
To W	nom Paid			МО	DAY	YEAR					
PHILA	DELPHIA WATER ICE			МО	DAT	TEAK					
Mailin	g Address			9	23	2015	\$	620.90			
City	PHILADELPHIA	State	Zip Code (Plus 4)	Description of Expenditure							
		PA	19136	COMMUNITY BLOCK PARTIES DONATION							
To W	nom Paid			МО	DAY	YEAR					
AT&aı	mp;T MOBILITY			NO	DAI	ILAK					
Mailin	g Address			9	23	2015	\$	47.50			
City	ATLANTA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	<u> </u>				
GA 30353				SENATORS IPAD SERVICE							
To Wh	nom Paid			МО	DAY	YEAR					
PHILA	DELPHIA WATER ICE			NO	DAI	ILAK					
	g Address			9	23	2015	\$	28.90			
Mailin	•				1		l				
Mailin City	PHILADELPHIA	State	Zip Code (Plus 4)	Descrip	l tion of Exp	 enditure					

	nom Paid			мо	DAY	YEAR				
STAPLES								00.00		
Mailing Address				9	23	2015	\$	80.00		
City PHILADELPHIA State Zip Code (Plus 4)				Description of Expenditure						
PA 19149				SUPPLIES						
To Wh	nom Paid			мо	DAY	YEAR				
	DELPHIA WATER ICE									
Mailin	g Address			9	23	2015	\$	286.00		
City	PHILADELPHIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
		PA	19136	СОММИ	NITY BLOO	CK PARTIE	S DONAT	IONS		
_	nom Paid IS SQUARE NEIGHBORHOOD PI	ROJECT		мо	DAY	YEAR				
Mailin	g Address			9	23	2015	\$	32.00		
City	PHILADELPHIA	State	Zip Code (Plus 4)	Descrip	l tion of Exp	 enditure				
_		PA	19122	2 TICKE	TS FESTI\	/AL HARV	EST CELE	BRATION		
To Wh	nom Paid	•	-							
24TH	POLICE DISTRICT ADVISORY C	OUNCIL		МО	DAY	YEAR				
Mailin	g Address			9	23	2015	\$	150.00		
City	PHILADELPHIA	State	Zip Code (Plus 4)	Descrip	l tion of Exp	enditure				
		PA	19126	HOLE S	PONSOR A	NNUAL G	OLF OUTI	NG		
To Wh	nom Paid			МО	DAY	YEAR				
PORT	RICHMOND VIETNAM ERA MEM	ORIAL COMMITTEE		МО	DAT	TEAR				
Mailin	g Address			9	23	2015	\$	100.00		
City	PHILADELPHIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
		PA	19134	FULL PAGE AD MEMORIAL MARKER FUNDRAISER						
To Wh	nom Paid			мо	DAY	YEAR				
BOYS	COUT TROOP 290 COMMITTEE			140		TEAK				
Mailin	g Address			9	23	2015	\$	50.00		
City	PHILADELPHIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
		PA	19111	DONATION PASTA DINNER						
To W	nom Paid			МО	DAY	YEAR				
BRIGI	D DOWLING			MO	DAT	TEAK				
Mailin	g Address			9	23	2015	\$	200.00		
City ELKINS PARK State Zip Code (Plus 4)				Descrip	tion of Exp	enditure				
PA 19027				CAMPAIGN EXPENSE WORK						
To Whom Paid				МО	DAY	YEAR				
DEMOCRATIC CAMPAIGN COMMITTEE OF PHILADELPHIA				MO	DAT	ILAK				
Mailin	g Address			10	18	2015	\$	300.00		
City PHILADELPHIA State Zip Code (Plus 4)			Descrip	tion of Exp	enditure					
		PA	19123	SEMI ANNUAL DINNER EVENT						

								OL 13			
To Wi	nom Paid			МО	DAY	YEAR					
PHILADELPHIA WATER ICE											
Mailing Address					26	2015	\$	28.60			
City PHILADELPHIA State Zip Code (Plus 4)					Description of Expenditure						
PA 19136				COMMUNITY BLOCK PARTY DONATION							
To Wi	nom Paid			мо	DAY	YEAR					
PHILA	ADELPHIA UNEMPLOYMENT F	PROJECT		1-10		ILAK					
Mailin	ng Address			10	26	2015	\$	300.00			
City PHILADELPHIA State Zip Code (Plus 4)			Descript	tion of Exp	enditure						
		PA	19102	1/2 PAG	SE AD 40TH	H ANNIVE	RSARY CE	LEBRATION			
	nom Paid NDS OF CIONE PLAYGROUNE	)		МО	DAY	YEAR					
	g Address			10	26	2015	\$	500.00			
City	PHILADELPHIA	State	Zip Code (Plus 4)	Descript	l tion of Exp	enditure					
City	PHILADELPHIA	PA	19125				L5 CIONE F	AMTI V			
		117	15125	FESTIVA		1501( 20)	IS CIONE I	ALIE!			
To Wi	nom Paid			мо	DAY	YEAR					
LARR'	Y MENSCH										
Mailing Address					4	2015	\$	2,500.00			
City	PHILADELPHIA	State	Zip Code (Plus 4)	Description of Expenditure							
		PA	19124	CAMPAIGN WORK							
To Wi	nom Paid			мо	DAY	YEAR					
AT&a	mp;T MOBILITY			МО	DAT	TEAR					
Mailin	g Address			11	4	2015	\$	47.50			
City	ATLANTA	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure					
		GA	30353	SENATO	RS IPAD S	SERVICE					
To W	nom Paid			МО	DAY	YEAR					
PHILA	A POSH			1-10		ILAK					
Mailin	g Address			11	4	2015	\$	150.00			
City	PHILADELPHIA	State	Zip Code (Plus 4)	Description of Expenditure							
		PA	19104	2 TICKETS 31ST ANNUAL AWARDS RECEPTION							
To Wi	nom Paid			NO.	DAY	YEAR					
ADRII	ENNE BROWN			МО	DAY	TEAK					
Mailin	g Address			11	4	2015	\$	100.00			
City PHILADELPHIA State Zip Code (Plus 4)				Descript	tion of Exp	enditure					
PA 19124				DONATION - CAMPBELL AME CHURCH							
To Whom Paid				МС	DAY	VEAD					
UNICO DISTRICT 1201 HELATH & DISTRICT 1201 HE				МО	DAY	YEAR					
Mailin	g Address			11	4	2015	\$	100.00			
City	PHILADELPHIA	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure					
		PA	19123	1/2 PAG	E AD SALI	JTE TO L	ABOR				
FA   15123				1 ,	<b>-</b> .		- '				

To Whom Paid			мо	DAY	YEAR			
PHILADELPHIA PUBLIC RECORD			140		ILAK			
Mailing Address			11	4	2015	\$	175.00	
City PHILADELPHIA State Zip Code (Plus 4)			Description of Expenditure					
PA 19148			1/4 PAG	SE AD				
To Whom Paid				DAY	YEAR			
BRIGID DOWLING			МО		ILAK			
Mailing Address			11	6	2015	\$	200.00	
City ELKINS PARK	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	CAMPAIGN FINANCE WORK							
							PAGE TOTAL	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	6,298.40	

## STATEMENT OF UNPAID DEBTS

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

Name of Filing Committee or Candidate			Reporting Period						
FRIENDS TO ELECT TINA TARTAGLIONE From				10/20/2015 <b>To</b> :			11/23/2015		
					DATE			Outstanding Balance of Debt	
Name of Creditor UFCW LOCAL 1776					DAY	YEAR			
Mailing Address				5	16	2015	\$	30,000.00	
City PLYMOUTH MEETING	City PLYMOUTH MEETING State Zip Code (Plus 4) Description of Debt								
PA 19462 LOAN TO COMMITTEE									
								PAGE TOTAL	
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							\$	30,000.00	