

Campaign Finance Report

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

Filer Identification Number : 9200098		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: FRIENDS TO ELECT TINA TARTAGLIONE											
Street Address: PO BOX 28566											
City: PHILADELPHIA				State: PA		Zip Code: 19149					
TYPE OF REPORT (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. X	TERMINATION REPORT?	Yes	No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2015	FILING METHOD () CHECK ONE			PAPER <input checked="" type="checkbox"/>	DISKETTE			
Name of Office Sought by Candidate:					DATE OF ELECTION			District Number	Office Code	Party Code	County Code
SENATOR IN THE GENERAL ASSEMBLY					MO	DAY	YEAR	2	STS	DEM	51
					11	3	2015	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		10	20	2015		11	23	2015			
A. Amount Brought Forward From Last Report					\$ 9,818.58						
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 14,000.00						
C. Total Funds Available (Sum Of Lines A and B)					\$ 23,818.58						
D. Total Expenditures (From Schedule III)					\$ 6,298.40						
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 17,520.18						
F. Value Of In-Kind Contributions Received (From Schedule II)					\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)					\$ 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

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

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

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.)	\$ 14,000.00
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

PAGE TOTAL	
\$	0.00

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)					

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
FRIENDS TO ELECT TINA TARTAGLIONE	From: <u>10/20/2015</u> To: <u>11/23/2015</u>

				DATE		AMOUNT	
Full Name of Contributing Committee PENN NATIONAL INSURANCE INSERVO PAC				MO	DAY	YEAR	\$ 500.00
Mailing Address 2 NORTH 2ND ST 14TH FLOOR				9	22	2015	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101					
Full Name of Contributing Committee PA STATE TROOPER ASSOC				MO	DAY	YEAR	\$ 3,500.00
Mailing Address 3625 VARTAN WAY				10	23	2015	
City HARRISBURG	State PA	Zip Code (Plus 4) 17110					
Full Name of Contributing Committee PPFFA PAC FUND				MO	DAY	YEAR	\$ 500.00
Mailing Address 240 N THIRD ST SUITE 403				10	23	2015	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101					
Full Name of Contributing Committee PENNSYLVANIA OPTOMETRIC PAC				MO	DAY	YEAR	\$ 500.00
Mailing Address 218 NORTH ST				10	23	2015	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101					
Full Name of Contributing Committee PSEA PACE				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 400 N THIRD ST BOX 1724				10	24	2015	
City HARRISBURG	State PA	Zip Code (Plus 4) 17105					

Full Name of Contributing Committee HEALTH PARTNERS OF PHILADELPHIA PAC			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 901 MARKET ST SUITE 500			10	24	2015	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19107				

Full Name of Contributing Committee BAYADA HOME HEALTH CARE PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address 1315 WALNUT ST SUITE 600			10	24	2015	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19107				

Full Name of Contributing Committee STEAMFITTERS LOCAL 449			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 1517 WOODRUFF ST			10	29	2015	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15220				

Full Name of Contributing Committee STEAMFITTERS LOCAL 449			MO	DAY	YEAR	\$ 500.00
Mailing Address 1517 WOODRUFF ST			10	29	2015	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15220				

Full Name of Contributing Committee CITIZENS FOR A BETTER COMMONWEALTH			MO	DAY	YEAR	\$ 1,000.00
Mailing Address PO BOX 12090			10	30	2015	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108				

Full Name of Contributing Committee BRAVO PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address 20 N MARKET ST			10	30	2015	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101				

Full Name of Contributing Committee PHILADELPHIA ASSOCIATION OF RETAIL DRUGGISTS			MO	DAY	YEAR	\$ 500.00
Mailing Address 2200 MICHENER ST SUITE 10			10	30	2015	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19115				

Full Name of Contributing Committee AFSCME AFL-CIO COUNCIL 13			MO	DAY	YEAR	\$ 500.00
Mailing Address 4031 EXECUTIVE PARK DRIVE			10	30	2015	
City HARRISBURG	State PA	Zip Code (Plus 4) 17111				

Full Name of Contributing Committee HIGHMARK HEALTH PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address 1800 CENTER ST			10	30	2015	
City CAMP HILL	State PA	Zip Code (Plus 4) 170890089				

Full Name of Contributing Committee FRIENDS OF FARNESE			MO	DAY	YEAR	\$ 1,500.00
Mailing Address PO BOX 22596			11	21	2015	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19110				

Full Name of Contributing Committee THE PENNSYLVANIA INSURANCE PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address 1600 MARKET ST STE 1720			11	21	2015	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103				

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

PAGE TOTAL
\$ 14,000.00

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.)

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 Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 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	Reporting Period
	<div style="display: flex; justify-content: space-between;"> From: To: </div>

			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.

PAGE TOTAL
\$ 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	
FRIENDS TO ELECT TINA TARTAGLIONE		From: <u>10/20/2015</u> To: <u>11/23/2015</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period (1)		\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period (2)		\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
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: To:
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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.						PAGE TOTAL \$ 0.00

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

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
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

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

DATE				AMOUNT		
To Whom Paid RIEH'S FLORIST			MO	DAY	YEAR	\$ 77.00
Mailing Address 1020 N 05TH ST			9	23	2015	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19123	Description of Expenditure FLORAL ARRANGEMENT			
To Whom Paid HERO THRILL SHOW INC			MO	DAY	YEAR	\$ 50.00
Mailing Address 1658 FOULKROD ST C/O ENGINE 70			9	23	2015	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19124	Description of Expenditure 5 TICKETS TO 2015 THRILL SHOW			
To Whom Paid PHILADELPHIA PUBLIC RECORD			MO	DAY	YEAR	\$ 175.00
Mailing Address 1323 S BROAD ST			9	23	2015	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19148	Description of Expenditure 1/4 PAGE AD 28TH ANNUAL LABOR DAY PARADE			
To Whom Paid PHILADELPHIA WATER ICE			MO	DAY	YEAR	\$ 620.90
Mailing Address 8354 STATE RD			9	23	2015	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19136	Description of Expenditure COMMUNITY BLOCK PARTIES DONATION			
To Whom Paid AT&T MOBILITY			MO	DAY	YEAR	\$ 47.50
Mailing Address PO BOX 537104			9	23	2015	
City ATLANTA	State GA	Zip Code (Plus 4) 30353	Description of Expenditure SENATORS IPAD SERVICE			

To Whom Paid PHILADELPHIA WATER ICE			MO	DAY	YEAR	\$ 28.90
Mailing Address 8354 STATE RD			9	23	2015	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19136	Description of Expenditure COMMUNITY BLOCK PARTIES DONATION			

To Whom Paid STAPLES			MO	DAY	YEAR	\$ 80.00
Mailing Address ROOSEVELT BLVD AND COTTMAN AVE			9	23	2015	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19149	Description of Expenditure SUPPLIES			

To Whom Paid PHILADELPHIA WATER ICE			MO	DAY	YEAR	\$ 286.00
Mailing Address 8354 STATE RD			9	23	2015	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19136	Description of Expenditure COMMUNITY BLOCK PARTIES DONATIONS			

To Whom Paid NORRIS SQUARE NEIGHBORHOOD PROJECT			MO	DAY	YEAR	\$ 32.00
Mailing Address 2141 N HOWARD ST			9	23	2015	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19122	Description of Expenditure 2 TICKETS FESTIVAL HARVEST CELEBRATION			

To Whom Paid 24TH POLICE DISTRICT ADVISORY COUNCIL			MO	DAY	YEAR	\$ 150.00
Mailing Address 3901 WHITAKER AVE			9	23	2015	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19126	Description of Expenditure HOLE SPONSOR ANNUAL GOLF OUTING			

To Whom Paid PORT RICHMOND VIETNAM ERA MEMORIAL COMMITTEE			MO	DAY	YEAR	\$ 100.00
Mailing Address 3119 ARAMINGO AVE C/O MIKE WALSH			9	23	2015	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19134	Description of Expenditure FULL PAGE AD MEMORIAL MARKER FUNDRAISER			

To Whom Paid BOYSCOUT TROOP 290 COMMITTEE			MO	DAY	YEAR	\$ 50.00
Mailing Address 818 STANWOOD ST C/O JOANNA EISENMANN			9	23	2015	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19111	Description of Expenditure DONATION PASTA DINNER			

To Whom Paid BRIGID DOWLING			MO	DAY	YEAR	\$ 200.00
Mailing Address 126 HAINES AVE			9	23	2015	
City ELKINS PARK	State PA	Zip Code (Plus 4) 19027	Description of Expenditure CAMPAIGN EXPENSE WORK			

To Whom Paid DEMOCRATIC CAMPAIGN COMMITTEE OF PHILADELPHIA			MO	DAY	YEAR	\$ 300.00
Mailing Address 219 SPRINGGARDEN ST			10	18	2015	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19123	Description of Expenditure SEMI ANNUAL DINNER EVENT			

To Whom Paid PHILADELPHIA WATER ICE			MO	DAY	YEAR	\$ 28.60
Mailing Address 8354 STATE RD			10	26	2015	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19136	Description of Expenditure COMMUNITY BLOCK PARTY DONATION			

To Whom Paid PHILADELPHIA UNEMPLOYMENT PROJECT			MO	DAY	YEAR	\$ 300.00
Mailing Address 112 N BROAD ST 11TH FLOOR			10	26	2015	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19102	Description of Expenditure 1/2 PAGE AD 40TH ANNIVERSARY CELEBRATION			

To Whom Paid FRIENDS OF CIONE PLAYGROUND			MO	DAY	YEAR	\$ 500.00
Mailing Address 2325 E HUNTINGDON ST C/O SUE WYNNE			10	26	2015	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19125	Description of Expenditure GOLD LEVEL SPONSOR 2015 CIONE FAMILY FESTIVAL			

To Whom Paid LARRY MENSCH			MO	DAY	YEAR	\$ 2,500.00
Mailing Address 1233 PRATT ST			11	4	2015	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19124	Description of Expenditure CAMPAIGN WORK			

To Whom Paid AT&T MOBILITY			MO	DAY	YEAR	\$ 47.50
Mailing Address PO BOX 537104			11	4	2015	
City ATLANTA	State GA	Zip Code (Plus 4) 30353	Description of Expenditure SENATORS IPAD SERVICE			

To Whom Paid PHILA POSH			MO	DAY	YEAR	\$ 150.00
Mailing Address 3001 WALNUT ST 5TH FLOOR C/O BONNIE LOGUE			11	4	2015	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19104	Description of Expenditure 2 TICKETS 31ST ANNUAL AWARDS RECEPTION			

To Whom Paid ADRIENNE BROWN			MO	DAY	YEAR	\$ 100.00
Mailing Address 5023 JACKSON ST			11	4	2015	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19124	Description of Expenditure DONATION - CAMPBELL AME CHURCH			

To Whom Paid UNICO DISTRICT 1201 HELATH & WELFARE			MO	DAY	YEAR	\$ 100.00
Mailing Address 455 N 5TH ST C/O DENNIS BIONDE			11	4	2015	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19123	Description of Expenditure 1/2 PAGE AD SALUTE TO LABOR			

To Whom Paid PHILADELPHIA PUBLIC RECORD			MO	DAY	YEAR	\$ 175.00
Mailing Address 1323 S BROAD ST			11	4	2015	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19148	Description of Expenditure 1/4 PAGE AD			

To Whom Paid BRIGID DOWLING			MO	DAY	YEAR	
Mailing Address 126 HAINES AVE			11	6	2015	
City ELKINS PARK	State PA	Zip Code (Plus 4) 19027	Description of Expenditure CAMPAIGN FINANCE WORK			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 6,298.40

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**

Name of Filing Committee or Candidate FRIENDS TO ELECT TINA TARTAGLIONE				Reporting Period From: <u>10/20/2015</u> To: <u>11/23/2015</u>			
							Outstanding Balance of Debt
				DATE			
Name of Creditor UFCW LOCAL 1776				MO	DAY	YEAR	
Mailing Address 3031 WALTON RD STE 310				5	16	2015	\$ 30,000.00
City PLYMOUTH MEETING	State PA		Zip Code (Plus 4) 19462		Description of Debt LOAN TO COMMITTEE		
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL \$ 30,000.00