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 :	on 20100	095			Repo Filed			CANDI	DATE		СОМІ	MITTEE	✓	LOBI	ВҮІЅТ	
Name of Filing C	ommittee, Candida	ate or L	obbyist:	-	DAVIS	S, TINA	A FF	RIENDS	OF							
Street Address:	505 GRANT AV	/E														
City:	CROYDON						St	tate:	PA			Zip Code: 19		021		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2.	30 E PRIN			POST-	3. X		AMENDM REPORT		Yes	No	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 E			OST-	6.		TERMINA REPORT		Yes	No	~
report type)	ANNUAL REPORT	7.	Year 2017					METHO		•		PAPER		~	DISKE	TTE
Name of Office S	ought by Candidat	e:			Ī		D	ATE O	F ELE	СТІС	ON	District Number	Office Code	Par	rty Code	County Code
							М	11	DAY		2017	-1		DEN		51
			I=	Ī.,			L	11		7	2017		<u> </u>		ONS FOR (CODES)
Summary of Expenditures		МО	DAY	YEAR		то	М	10	DAY		EAR	FC	R OFFIC	E USE	ONLY	
-		<u> </u>	5 2	20	017			6		5	2017					
	ught Forward From		•	- Caba	J J T	_	\$ 				801.27 752.60					
	ary Contributions A		• `	n Sched	uuie 1	<u> </u>	\$					-				
	Available (Sum Of					_	\$				553.87	-				
-	ditures (From Sche						\$				854.53	-				
	Balance (Subtract Kind Contributions				o II)		\$ <u> </u>			28,0	599.34	1				
	s And Obligations				e 11)		<u>\$</u>				0.00					
					TD 41			TION			0.00	<u> </u>				
DART I - If this is	s a Committee repo	ert troo	curor cian					TION	nort (andi	idato cir	an horo				
	that this report, incl	•	-										f my knov	wledge	and beli	ef , true
-	cribed before me this									:	Signature	e of Perso	n Submitt	ing Re	port	
	day of 					_										
My Commission Ex	Signatur	·e											ted Name			
riy commission Ex	MO	D/	AY	YR		_			Are	ea Co	de	Ema Daytim	il ie Teleph	one Nu	mber	
Part II- If this is	a report of a cand	idate's	authorized	Comm	ittee,	Candi	date	e shall s	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
I swear (or affirm) No 320) as amende	that to the best of m	y knowle	edge and beli	ief this	politic	al comi	mitte	ee has n	ot viola	ted a	ny provis	ions of th	e act of Ju	une 3,1	937 (P.L	. 1333,
Sworn to and subsc	ribed before me this										s	ignature o	of Candida	ate		
	day of 											Printe	d Name			
My Commission 5	Signature											Ema	il			
My Commission Exp												a				
	МО	D	AY	YR					Area	Code		D	aytime Te	elephor	ne Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
DAVIS, TINA FRIENDS OF	From:	<u>5/2/201</u>	<u>7</u> To:	6/5/2017
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)			\$	750.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	Period	(2)	\$	750.00
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)	\$	2.60
			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			\$	752.60

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 Candidat	e		Re	porting F	Period			
DAVIS, TINA FRIENDS OF			Fre	om:	<u>5/2/20</u>) <u>17</u> To:	1	6/5/2017
		•			DATE			AMOUNT
Full Name of Contributing Committee PA PT PAC				МО	DAY	YEAR		
Mailing Address 4028 WATTERS LI	N						\$	250.00
City GIBSONIA	State	Zip Code (Plus	4)	5	20	2017		
	PA	15044						
Full Name of Contributing Committee EXELON CORP PAC				МО	DAY	YEAR		
Mailing Address 101 CONSTITUTION	ON AVE, NW, STE 400	EAST					\$	250.00
City WASHINGTON	State	Zip Code (Plus	4)	5	20	2017		
	DC	20001						
Full Name of Contributing Committee PHYSICIANS ASSISTANTS PAC				МО	DAY	YEAR		
Mailing Address 200 N THIRD STR	EET SUITE 1500						\$	250.00
City HARRISBURG	State	Zip Code (Plus	4)	5	20	2017		
	PA	17101						

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

PAGE TOTAL 750.00

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 o	r Candidate		Rep Fro	oorting P	eriod	To	o:	
			l		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 Candi	date		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary 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.)

Name of Filing Committee or Candidate				Rep	orting Pe	riod				
				Fror	n:		To	o:		
					D	ATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								\$		0.00
City	State	Zi	p Code (Plus	4)						
Employer Name		•			Occupa	tion	•	•		
Employer Mailing Address/Principal Pla Business	ce of		City			State		Zip C	ode (Plus	4)
Enter Grand Total of Part C on Scho	edule I, Detail	led Sumr	mary Page,	Section	on 3.			\$	PAGE TO	TAL 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.

Reporting Period

DAVIS, TINA FRIENDS OF		Fro	om:	5/2/201	<u>7</u> To:	6/5/2017	<u>7</u>
		·	D	ATE		AMOUNT	
Full Name PFFCU			МО	DAY	YEAR		
Mailing Address 901 ARCH STREET			_			\$	2.60
City PHILADELPHIA	State	Zip Code (Plus 4	4) 5	31	2017		

19107

Receipt Description BANK INTEREST

Name of Filing Committee or Candidate

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

PΑ

PAGE TOTAL \$ 2.60

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		
DAVIS, TINA FRIENDS OF	From:	<u>5/2/2017</u> To:	6/5/2017
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		Reporting	g Period			
			From:			To:	
				DATE			AMOUNT
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 S	chedule II, In-Kir	nd Contributions Deta	iled 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					Reporting	Period			
					From:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus	4)					
Employer of Contributor					Occupa	ation			
Employer Mailing Address/Principal Plad Business	ce of	City	Sta	ite	Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, I	n-Kind	Contributions	Deta	ailed				PAGE TOTAL
Summary Page, Section 3.									0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period				
DAVIS, TINA FRIENDS OF	From	5/2/2017	То:	6/5/2017	

	DATE			
				AMOUNT
МО	DAY	YEAR		
5	2	2017	\$	100.00
Descrip		penditure		
МО	DAY	YEAR		
5	2	2017	\$	195.00
Descrip				
МО	DAY	YEAR		
5	2	2017	\$	250.00
Descrip		penditure	l	
МО	DAY	YEAR		
5	3	2017	\$	34.00
Descrip				
МО	DAY	YEAR		
5	3	2017	\$	500.00
Descrip		penditure		
<u> </u>	Description MO Description MO Description DONAT Description DONAT MO Description DONAT MO Description DONAT MO Description DONAT MO Description DONAT Description DONAT MO Description DONAT Description DONAT Description DONAT Description DONAT Description DONAT D	Description of Exponential Donation MO DAY 5 2 Description of Exponential Donation MO DAY 5 2 Description of Exponential Donation MO DAY 5 3 Description of Exponential Donation MO DAY 5 3 Description of Exponential Donation MO DAY 5 3	Description of Expenditure DONATION MO DAY YEAR 5 2 2017 Description of Expenditure ONLINE EXPENSES MO DAY YEAR 5 2 2017 Description of Expenditure DONATION MO DAY YEAR 5 3 2017 Description of Expenditure PARKING FOR EMERGE MERGE M	Description of Expenditure DONATION MO DAY YEAR 5 2 2017 \$ Description of Expenditure ONLINE EXPENSES MO DAY YEAR 5 2 2017 \$ Description of Expenditure DONATION MO DAY YEAR 5 3 2017 \$ Description of Expenditure PARKING FOR EMERGE MEETING MO DAY YEAR 5 3 2017 \$ Description of Expenditure PARKING FOR EMERGE MEETING MO DAY YEAR 5 3 2017 \$ Description of Expenditure

To Whom Paid TEAM FRANKIE FOUNDATION Mailing Address 37 ORCHARD LANE 5 4 2017	
Mailing Address 37 ODGUADD LANG	
37 ORCHARD LANE 5 4 2017 \$	100.00
City LEVITTOWN State Zip Code (Plus 4) Description of Expenditure DONATION	
To Whom Paid FRIENDS OF JUDGE MCLAUGHLIN MO DAY YEAR	
Mailing Address MERCER COUNTY 5 5 2017 \$	500.00
City SHARON State PA Zip Code (Plus 4) Description of Expenditure	
To Whom Paid DONDRE JACKSON MO DAY YEAR	
Mailing Address UNK 5 8 2017 \$	100.00
City UNK State Zip Code (Plus 4) Description of Expenditure	
PA 99999 SHREDDING	
To Whom Paid PA 99999 SHREDDING MO DAY YEAR	100.00
To Whom Paid WAA Mo DAY YEAR Mailing Address	100.00
To Whom Paid WAA Mailing Address 100 S BROAD STREET SUITE 1341 State Zip Code (Plus 4) Description of Expenditure	100.00
To Whom Paid WAA Mailing Address 100 S BROAD STREET SUITE 1341 City PHILADELPHIA State PA 19110 To Whom Paid To Whom Paid NO DAY YEAR 2 Ip Code (Plus 4) Description of Expenditure DONATION To Whom Paid	200.00
To Whom Paid WAA Mailing Address 100 S BROAD STREET SUITE 1341 State PA 2ip Code (Plus 4) 19110 To Whom Paid MORRISVILLE DEMOCRATS MO DAY YEAR **State PA 19110 **To Whom Paid MORRISVILLE DEMOCRATS **MO DAY YEAR **MO DAY YEAR **To Whom Paid MORRISVILLE DEMOCRATS	
To Whom Paid WAA Mailing Address 100 S BROAD STREET SUITE 1341 City PHILADELPHIA State PA 19110 To Whom Paid MORRISVILLE DEMOCRATS MO DAY YEAR 2017 \$ City DOYLESTOWN State PA 2017 19110 Description of Expenditure DONATION ** ** ** ** ** ** ** ** **	
PA 99999 SHREDDING To Whom Paid WAA PA PA PA PA PA PA P	

To Whom Paid WILLIAM PENN FIRE COMPANY	МО	DAY	YEAR		
Mailing Address 123 MAIN STREET	5	10	2017	\$	200.00
City HULMEVILLE State Zip Code (Plus 4) PA 19047	Descrip DONAT	otion of Exp	penditure		
To Whom Paid BUCKS COUNTY RESCUE	МО	DAY	YEAR		
Mailing Address 143 KING STREET	5	11	2017	\$	200.00
City BRISTOL State Zip Code (Plus 4) PA 19007	Description of Expenditure DONATION				
To Whom Paid AHTN	МО	DAY	YEAR		
Mailing Address PO BOX 184	5	15	2017	\$	100.00
City FAIRLESS HILLS State Zip Code (Plus 4)	Description of Expenditure DONATION				
PA 19030					
			YEAR		
To Whom Paid	DONAT	ION		\$	1,500.00
To Whom Paid BCDC	MO 5	DAY 15 ption of Exp	YEAR 2017	\$	1,500.00
To Whom Paid BCDC Mailing Address 123 N BROAD STREET SUITE B City DOYLESTOWN State Zip Code (Plus 4)	MO 5	DAY 15 ption of Exp	YEAR 2017	\$	1,500.00
To Whom Paid BCDC Mailing Address 123 N BROAD STREET SUITE B City DOYLESTOWN State Zip Code (Plus 4) PA 18901 To Whom Paid	MO 5 Description	DAY 15 btion of Exp	YEAR 2017 penditure	\$	1,500.00 30.53
To Whom Paid BCDC Mailing Address 123 N BROAD STREET SUITE B City DOYLESTOWN State Zip Code (Plus 4) 18901 To Whom Paid DUNKIN DONUTS	MO 5 Description MO 5 Description MO 5 Description	DAY 15 Dition of Explicition DAY	YEAR 2017 Penditure YEAR 2017	\$	
To Whom Paid BCDC Mailing Address 123 N BROAD STREET SUITE B City DOYLESTOWN State PA 18901 To Whom Paid DUNKIN DONUTS Mailing Address CROYDON State Zip Code (Plus 4) 18901	MO 5 Description MO 5 Description MO 5 Description	DAY 15 Dition of Exp ION DAY 17	YEAR 2017 Penditure YEAR 2017	\$	
To Whom Paid BCDC Mailing Address 123 N BROAD STREET SUITE B City DOYLESTOWN State PA 18901 To Whom Paid DUNKIN DONUTS Mailing Address CROYDON City CROYDON State Zip Code (Plus 4) 18901 To Whom Paid DUNKIN DONUTS	MO 5 Description MO 5 Description MO 5 Description DONUT	DAY 15 DAY DAY 17 DION of Exp S FOR MEI	YEAR 2017 Denditure YEAR 2017 Denditure ETING	\$	

To Whom Paid SANDRA PANNELL	МО	DAY	YEAR			
Mailing Address 498 W STATE STREET	5	17	2017	\$	14	40.00
City TRENTON State Zip Code (Plus 4) PA 08618	Descrip DONAT	otion of Exp	penditure			
To Whom Paid CELESTE VENERI	МО	DAY	YEAR			
Mailing Address 102 KINGFIELD ROAD	5	22	2017	\$	30	00.00
City PHILADELPHIA PA 2ip Code (Plus 4) PA 19115	Description of Expenditure CAMPAIGN REPORTING					
To Whom Paid WBCB 1490	МО	DAY	YEAR			
Mailing Address 200 MAGNOLIA DRIVE	5	30	2017	\$	6	50.00
City LEVITTOWN State Zip Code (Plus 4)	Description of Expenditure DONATION					
PA 19054	Descrip		Jenuiture.			
LEVITIONIN	Descrip		YEAR			
To Whom Paid	DONAT	TON		\$	15	50.00
To Whom Paid HOTDOGS FOR ARTURO	MO 5	DAY 31 otion of Exp	YEAR 2017	\$	15	50.00
To Whom Paid HOTDOGS FOR ARTURO Mailing Address 901 BELLEVUE AVENUE City CROYDON State Zip Code (Plus 4)	MO 5	DAY 31 otion of Exp	YEAR 2017	\$	15	50.00
To Whom Paid HOTDOGS FOR ARTURO Mailing Address 901 BELLEVUE AVENUE City CROYDON State Zip Code (Plus 4) PA 19021 To Whom Paid	MO 5 Descrip	DAY 31 otion of Exp	YEAR 2017 penditure	\$		50.00 95.00
To Whom Paid HOTDOGS FOR ARTURO Mailing Address 901 BELLEVUE AVENUE City CROYDON State Zip Code (Plus 4) PA 19021 To Whom Paid NGP VAN OR EVERY ACTION DC	MO 5 Description MO 6 Description	DAY 31 Otion of Exp	YEAR 2017 Penditure YEAR 2017 Penditure	\$		
To Whom Paid HOTDOGS FOR ARTURO Mailing Address 901 BELLEVUE AVENUE City CROYDON State 2 ip Code (Plus 4) PA 19021 To Whom Paid NGP VAN OR EVERY ACTION DC Mailing Address 1101 15TH STREET NW STE 500 City WASHINGTON State Zip Code (Plus 4)	MO 5 Description MO 6 Description	DAY 31 otion of Exp ION DAY 2 otion of Exp	YEAR 2017 Penditure YEAR 2017 Penditure	\$		
To Whom Paid HOTDOGS FOR ARTURO Mailing Address 901 BELLEVUE AVENUE City CROYDON State 2ip Code (Plus 4) 19021 To Whom Paid NGP VAN OR EVERY ACTION DC Mailing Address 1101 15TH STREET NW STE 500 City WASHINGTON State DC 20005 To Whom Paid	MO 5 Description MO 6 Description MO ONLINE	DAY 31 Dition of Experience DAY 2 Dation of Experience EXPENSE	YEAR 2017 Penditure 2017 Penditure	\$	19	

To Whom Paid BUCKS COUNTY DEMOCRATIC COMM	мо	DAY	YEAR				
Mailing Address 123 N BROAD STRE	5	11	2017	\$	100.00		
City DOYLESTOWN	State PA	Zip Code (Plus 4) 18901	Descrip DONAT				
To Whom Paid MINNIE'S MEDICAL FUND (GOFUNDME)				DAY	YEAR		
Mailing Address WILSONVILLE			5	30	2017	\$	100.00
City WILSONVILLE	State OR	Zip Code (Plus 4) 97070	Descrip DONAT	otion of Exp			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL	
Enter Grand Total of Expenditures	•			\$	6,854.53		