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 9600	334			Repoi Filed		С	ANDI	DATE		СОМІ	MITTEE		LOB	BYIST	 ✓
Name of Filing C	Committee, Candid	ate or Lo	bbyist:		STINE,	TAM	1ARA	MCKI	NNEY							-
Street Address:	212 N. 3RD S	ST. STE 2	203													
City:	HARRISBURG						Sta	te:	PA			Zip Co	de: 17	101-0	000	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.					DAY MARY	F	POST- 3.			AMENDM REPORT		Yes	No	, 🔨
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.		DAY CTION		POST- 6.			TERMIN/ REPORT		Yes	No	· 🗸
report type)	ANNUAL REPORT	7.	Year 2018				.ING N) CHE					PAPER		\checkmark	DISKE	TTE
Name of Office S	L Sought by Candida	te:					DA	TE O	F ELEC	CTIO	N	District Number	Office Code	Par	ty Code	County
	··· · ····						мо)	DAY	YE	AR	Number	code			leone
								11		6	2018		(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR			мо)	DAY	YE	AR	FC	R OFFIC	e use	ONLY	
Expenditures	from:		3 27	20	018	ГО		4	3	0	2018					
A. Amount Bro	ught Forward From	n Last Re	port	•	ľ		\$				0.00	1				
B. Total Monet	ary Contributions	And Rece	ipts (From	Schee	dule I)		\$				0.00					
C. Total Funds	Available (Sum Of	f Lines A	and B)				\$				0.00					
D. Total Expen	ditures (From Sch	edule III)				\$			1,2	50.00					
E. Ending Cash	Balance (Subtrac	t Line D I	rom Line	C)			\$		((1,25	50.00)					
F. Value Of In-	Kind Contributions	s Receive	d (From S	chedul	le II)		\$				0.00	-				
G. Unpaid Deb	ts And Obligations	(From S	chedule IV	')			\$				0.00					
				AFF	IDAV	IT S	ECT	ION								
	s a Committee rep	•	-						• •		-	-				
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	attached scl	hedules	filed or	n pape	er or by	y elect	ronic me	dium,	, are to t	the best o	f my know	ledge	and beli	ef , true
Sworn to and subs	cribed before me this day of	5	20							s	ignature	e of Perso	n Submitt	ing Rep	oort	
	Signatu	re				_						Prin	ted Name			
My Commission Ex	2	-										Ema	il			
	мо	DA	Y	YR					Are	a Cod	e	Daytim	e Teleph	one Nu	mber	
Part II- If this is	a report of a can	didate's a	uthorized	Comm	nittee, (Cand	idate	shall	sign he	re.						
I swear (or affirm) No 320) as amende	that to the best of ned.	ny knowle	dge and beli	ef this	politica	l com	mittee	has n	ot violat	ed an	y provis	ions of th	e act of Ju	ine 3,1	937 (P.I	1333,
Sworn to and subso	ribed before me this										s	ignature o	of Candida	te		
	day of		20									Printe	d Name			
	Signature					_						Ear-				
My Commission Exp	pires											Ema				
	мо	DA	Y	YR		_			Area (Code		D	aytime Te	lephor	ne Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Detailed Summary Page	3			
Name of Filing Committee or Candidate	Reporting	g Period		
STINE, TAMARA MCKINNEY	<u>3/27/201</u>	<u>8</u> To:	<u>4/30/2018</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)			\$	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 Pa			\$	0.00
			\$	0.00

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 Commit	tee or Candidate		Reporting	Period			
			From:	i cirioù	То		
			From:		10	•	
				DATE			AMOUNT
Full Name of Contributing) Committee		мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
						Г	PAGE TOTAL
Enter Grand Total of Pa	art A on Schedule I, Detail	ed Summary Page, Sec	tion 2.			\$	0.00

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

\$

Use this Part to ite	emize all other 0.01 to \$250.0	1 TO \$250.00 r contribution 00 in the repo	s w ortir	ith an 1g per	aggreg iod.			rom
Name of Filing Committee or Candidat	e			orting P	eriod	_		
			Fro	m:		Тс):	
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						
								PAGE TOTAL
Enter Grand Total of Part A on S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	<u>.</u>		\$	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 Commit	ttee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C on	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	0.00

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:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

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:			То:			
			I	D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$	i	0.00
City	State	Zip Code (Plus 4)						
Receipt Description	I				1				
Enter Grand Total of Part E o	- Schodulo I. Dotailoc	l Summary Page	Section	4				PAGE TOT	AL
	i Schedule 1, Detailet	summary raye,	Section				\$		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>3/27/2018</u> То:	<u>4/30/2018</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	ſF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, I		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate R				Reporting Period					
	From:			То:					
				DATE		АМС	DUNT		
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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL		
					4	5	0.00		

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

Name of Filing Committee or Candidate					Reporting Period					
					Fro	om:		То:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor	•		•			Occupat	ion			
Employer Mailing Address/Principal Plac Business	e of	City		State		Zip 4)	Code(Plus	Descri	ption of	f Contribution

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed	PAGE TOTAL
Summary Page, Section 3.	0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period					
STINE, TAMARA MCKINNEY			From	<u>3/27/2018</u>		То:	<u>4/30/2018</u>	
				DATE		AMOUNT		
To Whom Paid Supporters Of Zimmerman			мо	DAY	YEAR			
Mailing Address unknown			4	14	2018	\$	250.00	
City Harrisburg	State	Zip Code (Plus 4)	Description of Expenditure					
PA 17110 political contribu					ion			
To Whom Paid Supporters Of Zimmerman			мо	DAY	YEAR			
Mailing Address unknown			4	24	2018	\$	1,000.00	
City Harrisburg	State	Zip Code (Plus 4)	Descrip	Description of Expenditure				
	PA	17110	political contribution					
							PAGE TOTAL	
Enter Grand Total of Expenditure	s on Page 1,	Report Cover Page, Item I) .			\$	1,250.00	