

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 :		2010095		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: DAVIS, TINA FRIENDS OF												
Street Address: 505 GRANT AVE												
City: CROYDON						State: PA			Zip Code: 19021			
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 2018	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
REPRESENTATIVE IN THE GENERAL ASSEMBLY						MO	DAY	YEAR	141	STH	DEM	09
						11	6	2018	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		10	23	2018		11	26	2018				
A. Amount Brought Forward From Last Report						\$		8,272.27				
B. Total Monetary Contributions And Receipts (From Schedule I)						\$		4,500.72				
C. Total Funds Available (Sum Of Lines A and B)						\$		12,772.99				
D. Total Expenditures (From Schedule III)						\$		8,969.00				
E. Ending Cash Balance (Subtract Line D From Line C)						\$		3,803.99				
F. Value Of In-Kind Contributions Received (From Schedule II)						\$		0.00				
G. Unpaid Debts And Obligations (From Schedule IV)						\$		0.00				

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
DAVIS, TINA FRIENDS OF	From: <u>10/23/2018</u> To: <u>11/26/2018</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)	\$ 4,500.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 4,500.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 0.72

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.)	\$ 4,500.72
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PART B

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 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)		

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 Candidate DAVIS, TINA FRIENDS OF	Reporting Period From: <u>10/23/2018</u> To: <u>11/26/2018</u>
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				DATE	AMOUNT		
Full Name of Contributing Committee MAGELLAN HEALTH CARE				MO	DAY	YEAR	\$ 500.00
Mailing Address 1 WEST BROAD STREET SUITE 100				11	23	2018	
City BETHLEHEM	State PA	Zip Code (Plus 4) 18018					
Full Name of Contributing Committee STEAMFITTERS LOCAL UNION 449 PAC				MO	DAY	YEAR	\$ 2,000.00
Mailing Address 1517 WOODRUFF ST				11	2	2018	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15220					
Full Name of Contributing Committee UNION LABOR PAC				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 600 NORTH SECOND STREET				10	27	2018	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101					
Full Name of Contributing Committee LAWPAC				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 212 NORTH THIRD STREET SUITE 101				10	25	2018	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101					

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

PAGE TOTAL	
\$	4,500.00

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 DAVIS, TINA FRIENDS OF	Reporting Period From: <u>10/23/2018</u> To: <u>11/26/2018</u>
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				DATE	AMOUNT	
Full Name			MO	DAY	YEAR	
PFFCU						
Mailing Address 901 ARCH STREET			11	16	2018	\$ 0.72
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103				
Receipt Description BANK INTEREST						

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

PAGE TOTAL
\$ 0.72

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>10/23/2018</u> To: <u>11/26/2018</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:

			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 III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
DAVIS, TINA FRIENDS OF	From <u>10/23/2018</u> To: <u>11/26/2018</u>

DATE				AMOUNT
To Whom Paid EMERGE PA	MO	DAY	YEAR	
Mailing Address PO BOX 60078	10	23	2018	\$ 250.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19102	Description of Expenditure DONATION	
To Whom Paid PFFCU	MO	DAY	YEAR	
Mailing Address 901 ARCH STREET	10	23	2018	\$ 19.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103	Description of Expenditure NSF FEE	
To Whom Paid FIRE AND IRON MC	MO	DAY	YEAR	
Mailing Address STATION 139	10	29	2018	\$ 100.00
City LEVITTOWN	State PA	Zip Code (Plus 4) 19055	Description of Expenditure DONATION	
To Whom Paid MONROE FOUNDATION	MO	DAY	YEAR	
Mailing Address PO BOX 1395	11	5	2018	\$ 100.00
City LEVITTOWN	State PA	Zip Code (Plus 4) 19058	Description of Expenditure DONATION	
To Whom Paid LSDC	MO	DAY	YEAR	
Mailing Address 2460 JOHN FRIES HWY	11	13	2018	\$ 250.00
City QUAKERTOWN	State PA	Zip Code (Plus 4) 18951	Description of Expenditure DONATION	

To Whom Paid TINA DAVIS FOR SENATE			MO	DAY	YEAR	
			10	29	2018	
Mailing Address PO BOX 233						\$ 8,000.00
City CROYDON	State PA	Zip Code (Plus 4) 19021	Description of Expenditure TRANSFER TO SENATE CAMPAIGN			

To Whom Paid BRISTOL TOWNSHIP SENIOR CITIZEN CENTER			MO	DAY	YEAR	
			11	14	2018	
Mailing Address 2501 BATH ROAD						\$ 250.00
City BRISTOL	State PA	Zip Code (Plus 4) 19007	Description of Expenditure DONATION			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 8,969.00

