

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.	TERMINATION REPORT?	Yes	No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7. X	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
SENATOR IN THE GENERAL ASSEMBLY					MO	DAY	YEAR	2	STS	DEM	51
					11	6	2018	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		11	27	2018		12	31	2018			
A. Amount Brought Forward From Last Report					\$		80,000.70				
B. Total Monetary Contributions And Receipts (From Schedule I)					\$		1,000.00				
C. Total Funds Available (Sum Of Lines A and B)					\$		81,000.70				
D. Total Expenditures (From Schedule III)					\$		(2,691.61)				
E. Ending Cash Balance (Subtract Line D From Line C)					\$		78,309.09				
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

Signature

Printed Name

My Commission Expires

Email

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>11/27/2018</u> To: <u>12/31/2018</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)	\$ 1,000.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 1,000.00

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.)	\$ 1,000.00
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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>11/27/2018</u> To: <u>12/31/2018</u>

				DATE			AMOUNT		
Full Name of Contributing Committee					MO	DAY	YEAR	\$	1,000.00
PSEA PACE									
Mailing Address									
400 N THIRD ST PO BOX 1724					12	28	2018		
City	HARRISBURG		State	PA				Zip Code (Plus 4)	17105

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

PAGE TOTAL
\$ 1,000.00

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	
Mailing Address							\$ 0.00
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 From: To:
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			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>11/27/2018</u> To: <u>12/31/2018</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:
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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>11/27/2018</u> To: <u>12/31/2018</u>

				DATE	AMOUNT		
To Whom Paid LABORERS LOCAL 57 SCHOLARSHIP FUND				MO	DAY	YEAR	\$ 350.00
Mailing Address 500-506 N 6TH ST				11	28	2018	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19123	Description of Expenditure 1/2 PAGE AD				
To Whom Paid THERESA LYNCH				MO	DAY	YEAR	\$ 64.80
Mailing Address 726 MILLWOOD RD				11	28	2018	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19115	Description of Expenditure REIMBURSEMENT FOR 60 SANTA HATS FOR 7TH PDAC CHRISTMAS PARY				
To Whom Paid DR ANNE MULDOON				MO	DAY	YEAR	\$ 50.00
Mailing Address 6233 FRANKFORD AVE				12	4	2018	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19149	Description of Expenditure DONATION TOYS FOR TOTS				
To Whom Paid 26TH POLICE DISTRICT				MO	DAY	YEAR	\$ 200.00
Mailing Address 615 E GIRARD AVE				12	4	2018	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19125	Description of Expenditure DONATION ANNUAL THANKSGIVING DAY DRIVE				
To Whom Paid SPANISH AMERICAN PROFESSIONAL FIREFIGHTERS ASSOCIATION				MO	DAY	YEAR	\$ 200.00
Mailing Address 837 ANCHOR ST				12	4	2018	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19124	Description of Expenditure DONATION ANNUAL THANKSGIVING DAY DRIVE				

To Whom Paid BRIGID DOWLING			MO	DAY	YEAR	
Mailing Address 126 HAINES AVE			12	4	2018	
City ELKINS PARK	State PA	Zip Code (Plus 4) 19027	Description of Expenditure NOVEMBER CAMPAIGN FINANCE WORK			

To Whom Paid BRIGID DOWLING			MO	DAY	YEAR	
Mailing Address 126 HAINES AVE			12	26	2018	
City ELKINS PARK	State PA	Zip Code (Plus 4) 19027	Description of Expenditure REIMBURSEMENT FOR POSTAGE STAMPS, NOTARY FEE (REPORT), STETSON SECRET SANTA GIFTS SPONSOR, JAN CAMPAIGN FINANCE WORK			

To Whom Paid LEVIN PROMOTIONAL PRODUCTS			MO	DAY	YEAR	
Mailing Address 3301-C HOFFMAN ST			12	26	2018	
City HARRISBURG	State PA	Zip Code (Plus 4) 17110	Description of Expenditure EVENT GIVE AWAYS (SHIRTS)			

To Whom Paid PNC BANK			MO	DAY	YEAR	
Mailing Address PO BOX 609			11	28	2018	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15239	Description of Expenditure NOVEMBER STATEMENT SERVICE FEES			

To Whom Paid PNC BANK			MO	DAY	YEAR	
Mailing Address PO BOX 609			12	28	2018	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15239	Description of Expenditure DECEMBER STATEMENT SERVICE FEE			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 2,691.61

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>11/27/2018</u> To: <u>12/31/2018</u>			
DATE							Outstanding Balance of Debt
Name of Creditor UFCW LOCAL 1776				MO	DAY	YEAR	\$ 30,000.00
Mailing Address 3031 WALTON RD STE 330				5	6	2014	
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