Campaign Finance Report

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

| Filer Identificat Number : | ion 2010 | 095 | | | Repo Filed | | | CANDI | DATE | | СОМ | MITTEE | ✓ | LOBI | BYIST | | |
|---|----------------------------------|-----------|-----------------------|---------|---------------|--------|------------|------------|--------------|-----------|------------|----------------------|----------------|---------|---------|-----------|--------------|
| Name of Filing | Committee, Candid | ate or Lo | obbyist: | | | - | _ | RIENDS | 5 OF | | | | | | | | |
| Street Address: | 505 GRANT A | VE | | | | | | | | | | | | | | | |
| City: | CROYDON | | | | | | : | State: | PA | | | Zip Co | de: 19 | 021 | | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDA PRIMARY | Y PRE | - 2. | | DA) IMA | | POST- | OST- 3. | | AMENDMENT REPORT? | | Yes | N | 0 | \checkmark |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDA ELECTION | Y PRE | ≣- 5. | | | | POST- | 6. | | TERMIN/ REPORT | | Yes | N | 0 | \checkmark |
| report type) ANNUAL REPORT 7. X Year 2019 FILING METHOD () CHECK ONE | | | | | | | PAPER | | \checkmark | DISK | ETTE | | | | | | |
| Name of Office | L Sought by Candida | te: | | | | | | DATE O | F ELE | CTIC | N | District Number | Office Code | Par | ty Cod | e Cour | |
| | | | | | | | 1 | мо | DAY | YI | EAR | -1 | | DEN | 1 | 09 | - |
| | | | | | | | | 11 | | 5 | 2019 | | (SEE INS | TRUCTI | ONS FOR | CODES | 5) |
| | Receipts and | мо | DAY | YEAR | 2 | | | мо | DAY | Y | EAR | FC | OR OFFIC | E USE | ONLY | , | |
| Expenditures | s from: | 1 | 11 26 | 2 | 019 | то | Ī | 12 | 3 | 31 | 2019 | | | | | | |
| A. Amount Bro | ought Forward From | n Last R | eport | | | | \$ | | | 28, | 393.56 | | | | | | |
| B. Total Monet | ary Contributions | And Rec | eipts (From | 1 Sche | dule I) |) | \$ | | | 14,697.70 | | | | | | | |
| C. Total Funds | Available (Sum Of | Lines A | and B) | | | | \$ | | | 43,0 | 091.26 | | | | | | |
| D. Total Expen | ditures (From Sch | edule II | I) | | | | \$ | | | 3,3 | 380.00 | | | | | | |
| E. Ending Cash | n Balance (Subtrac | t Line D | From Line | C) | | | \$ | | | 39,7 | /11.26 | | | | | | |
| F. Value Of In- | Kind Contributions | Receiv | ed (From S | chedu | le II) | | \$ | | | | 0.00 | - | | | | | |
| G. Unpaid Deb | ts And Obligations | (From S | Schedule IV | /) | | | \$ | | | | 0.00 | | | | | | |
| | | | | AFF | IDAV | IT S | SEC | CTION | | | | | | | | | |
| PART I - If this i | s a Committee rep | ort, trea | surer sign | here. | If this | is a C | Can | didate re | eport, c | andi | date sig | gn here. | | | | | |
| I swear (or affirm correct and compl |) that this report, incl ete. | uding the | attached sc | hedule | s filed o | n pap | er o | r by elect | ronic me | edium | , are to f | the best o | f my knov | vledge | and be | lief , tr | ue |
| Sworn to and sub | scribed before me this day of | 5 | 20 | | | | | | | 9 | Signature | e of Perso | n Submitt | ing Rep | oort | | - |
| | Signatu | re | - | | | _ | | | | | | Prin | ted Name | | | | - |
| My Commission E | - | | | | | | | | | | | Ema | il | | | | _ |
| | мо | D/ | AY | YR | | | | | Are | ea Coo | le | Daytin | ne Teleph | one Nu | mber | | |
| Part II- If this is | a report of a can | lidate's | authorized | Comn | nittee, | Cand | lida | te shall | sign he | ere. | | | | | | | |
| I swear (or affirm) No 320) as amend |) that to the best of n ed. | ny knowle | edge and beli | ef this | o politica | l con | nmit | tee has n | ot viola | ted ar | ıy provis | ions of th | e act of Ju | ine 3,1 | 937 (P | L. 133 | з, |
| Sworn to and subse | cribed before me this day of | | 20 | | | | | | | | s | ignature (| of Candida | ite | | | - |
| | | | | | | | | | | | | Printe | ed Name | | | | - |
| My Commission Ex | Signature | | | | | | | | | | | Ema | il | | | | - |
| | | | | | | _ | | | | | | | | | | | _ |
| | МО | D | AY . | YR | 2 | | | | Area | Code | | D | aytime Te | lephon | e Num | ber | |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** DAVIS, TINA FRIENDS OF From: <u>11/26/2019</u> **To:** 12/31/2019 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor \$ 50.00 **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 200.00 **Contributions Received From Political Committees (Part A)** 4.70 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 204.70 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 5,300.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 5,300.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 9,143.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 14,697.70 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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 Candidate Re | | | Reporting | Reporting Period | | | | | | |
|---|--------------------|----------------------------------|-----------|--|------|----|------------|--|--|--|
| DAVIS, TINA FRIENDS OF Fro | | | From: | From: <u>11/26/2019</u> To: <u>12/31/2</u> | | | | | | |
| | | | | DATE | | | AMOUNT | | | |
| Full Name of Contributing Com FRIENDS OF MARY JO DALEY | mittee | | мо | DAY | YEAR | | | | | |
| Mailing Address 1294 MC | INTGOMERY AVE | | | | | \$ | 200.00 | | | |
| City NARBERTH | State PA | Zip Code (Plus 4 19072 |) 12 | 5 | 2019 | | | | | |
| | | | | | | Г | PAGE TOTAL | | | |

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

AGEIOTAL

\$

200.00

| Use this Part to ite | mize all other 0.01 to \$250.0 | 1 TO \$250.00 contribution 00 in the repo | s w ortir | ith an ng peri | aggrega iod. | | | rom | |
|---|-----------------------------------|---|--------------|-------------------|-----------------|------|----------------------|------------|--|
| Name of Filing Committee or Candidate Reporting Period | | | | | | | | | |
| DAVIS, TINA FRIENDS OF From: <u>11/26/2019</u> | | | | | | | o: <u>12/31/2019</u> | | |
| DATE AMOUNT | | | | | | | | | |
| Full Name of Contributor POLICE AND FIRE FEDERAL CREDIT UN | | мо | DAY | YEAR | | | | | |
| Mailing Address 901 ARCH STREET | | | | | | | \$ | 2.20 | |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 19107 | | 11 | 30 | 2019 | | | |
| Full Name of Contributor POLICE AND FIRE FEDERAL CREDIT UN | ION | | | мо | DAY | YEAR | | | |
| Mailing Address 901 ARCH STREET | | | | | | | \$ | 2.50 | |
| City PHILADELPHIA State Zip Code (Plus 4) 12 31 2019 PA 19107 1 12 1< | | | | | | | | | |
| | | | | | | | | PAGE TOTAL | |
| Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2. \$ 4.70 | | | | | | | | | |

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 | me of Filing Committee or Candidate Reporting | | | | | | | | |
|---|---|--------------------------|---------------------------|-------------|---------------|------|-------------------|------------|--|
| DAVIS, TINA FRIENDS OF | | | From: | <u>11/2</u> | <u>6/2019</u> | То: | <u>12/31/2019</u> | | |
| | | | | DA | TE | | Α | MOUNT | |
| Full Name of Contributing Committee GREENLEE PARTNERS STATE PAC | | | | мо | DAY | YEAR | | | |
| Mailing Address PO BOX 291 | | | | | | | \$ | 300.00 | |
| City HARRISBURG | State | Zip Cod | e (Plus 4) | 11 | 26 | 2019 | 9 | | |
| | РА | 17108 | | | | | | | |
| Full Name of Contributing Committee PLUMBERS UNION LOCAL PAC | | | | мо | DAY | YEAR | | | |
| Mailing Address 2791 SOUTHAMPTO | | | (D) | 12 | 3 | 2019 | \$ | 2,500.00 | |
| City PHILADELPHIA | State PA | 19154 | e (Plus 4) | | | | | | |
| Full Name of Contributing Committee PSEA-PACE FOR STATE ELECTIONS | | | | мо | DAY | YEAR | | | |
| Mailing Address 400 N THIRD ST | | | | | | | \$ | 500.00 | |
| City HARRISBURG | State PA | Zip Cod 17105- | e (Plus 4) 1724 | 12 | 27 | 2019 |) | | |
| Full Name of Contributing Committee CARPENTER LEGISLATIVE PROGRAM O | F GREATER PHILA | - | | мо | DAY | YEAR | | | |
| Mailing Address 650 RIDGE ROAD SU | JITE 200 | | | | | | \$ | 2,000.00 | |
| City PITTSBURG | State PA | Zip Cod 15205 | e (Plus 4) | 12 | 31 | 2019 |) | | |
| | | | | | | • | • | PAGE TOTAL | |
| nter Grand Total of Part C on Schedule I, Detailed Summary Page, Sectio | | | | | | | \$ | 5,300.00 | |

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 I | Period | |
|---------------------------------------|-------------|--------|--------|
| | From: | | То: |
| | | DATE | AMOUNT |

| | | | | 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 Cano | lidate | | Report | ing Perio | d | | | | |
|----------------------------------|------------------------------|----------------------------|---------|-----------|------------------|--------------|---------------------|------------|--|
| DAVIS, TINA FRIENDS OF | | | From: | | <u>11/26/201</u> | <u>9</u> To: | : <u>12/31/2019</u> | | |
| | | | | D | ATE | | | AMOUNT | |
| Full Name PNC BANK | | | | мо | DAY | YEAR | | | |
| Mailing Address 83 BUCK ROA | Mailing Address 83 BUCK ROAD | | | | | | \$ | 9,143.00 | |
| City HOLLAND | State PA | Zip Code (18966 | Plus 4) | 12 | 27 | 2019 | 9 | | |
| Receipt Description TRANSF | ER FROM "TINA | DAVIS FOR SENA | TE" | | | | | | |
| Enter Grand Total of Part E on S | chedule I. Detailed | Summary Page | Section | 4 | | | | PAGE TOTAL | |
| | circulte 1, Detailed | Summary ruge, | Section | | | | \$ | 9,143.00 | |

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 Perio | od | |
|---|-----------------|-----------------------|-------------------|
| DAVIS, TINA FRIENDS OF | From: | <u>11/26/2019</u> то: | <u>12/31/2019</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 PAR | TF) | | |
| 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, 1 | | \$ | 0.00 |

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

| Name of Filing Committee or Candidate Re | | | Reporting | g Period | | | |
|--|-----------|-------------------|-----------|----------|------|------|-------|
| | From: To: | | | | | | |
| | | | | DATE | | АМО | UNT |
| 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 Schedule II, In-Kind Contributions Deta Section 2. | | | | mary Pag | je, | PAGE | TOTAL |
| | | | | | 4 | 6 | 0.00 |

0.00

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

| ame of Filing Committee or Candidate | | | | Re | porting P | eriod | | | | |
|--|-------|--|--------------|-------|-----------|-----------|--------|----------|----------------|------------|
| | | | | | Fro | om: | | То: | | |
| | | | | | | | DATE | | | AMOUNT |
| Full Name of Contributor | | | | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | | \$ | 0.00 | |
| City | State | | Zip Code(Plu | ıs 4) | | | | | | |
| Employer of Contributor | I | | 1 | | | Occupat | tion | | | |
| Employer Mailing Address/Principal Place of City State Business | | | | | Zip 4) | Code(Plus | Descri | ption of | f Contribution | |
| | | | | _ | | | | | | PAGE TOTAL |

| _ 1 | Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3. | PAG |
|-----|--|-----|

SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate | ame of Filing Committee or Candidate | | | | | Reporting Period | | | | | |
|--|--------------------------------------|-----------------------------------|-------------------------|--|---------------|------------------|-------------------|--|--|--|--|
| DAVIS, TINA FRIENDS OF | | | From | <u>11/20</u> | <u>5/2019</u> | То: | <u>12/31/2019</u> | | | | |
| | | | | DATE | | | AMOUNT | | | | |
| To Whom Paid BRISTOL TOWNSHIP SENIORS | | | мо | DAY | YEAR | | | | | | |
| Mailing Address 2501 BATH ROAD | | | 12 | 12 7 2019 \$ 25 | | | | | | | |
| City BRISTOL | State PA | Zip Code (Plus 4) 19007 | | Description of Expenditure DONATION | | | | | | | |
| To Whom Paid KIWANIS | | | мо | DAY | YEAR | | | | | | |
| Mailing Address PO BOX 141 | | | 12 | 6 | 2019 | \$ | 100.00 | | | | |
| City DOYLESTOWN State Zip Code (Plus 4) PA 18901 | | | Descrip DONAT | | | | | | | | |
| To Whom Paid PRINCETON STRATEGIES | | | мо | DAY | YEAR | | | | | | |
| Mailing Address 1500 WALNUT ST S | TE 800 | | 12 | 11 | 2019 | \$ | 1,500.00 | | | | |
| City PHILADELPHIA | State PA | Zip Code (Plus 4) 19102 | | ition of Exp IGN CONS | | | | | | | |
| To Whom Paid ST THOMAS AQUINAS CHURCH | | | мо | DAY | YEAR | | | | | | |
| Mailing Address 601 BRISTOL PIKE | | | 12 | 11 | 2019 | \$ | 100.00 | | | | |
| City CROYDON | State PA | Zip Code (Plus 4) 19021 | Descrip DONAT | ition of Exp ION | benditure | | | | | | |
| To Whom Paid BRYAN ALLEN | | | мо | DAY | YEAR | | | | | | |
| Mailing Address 2627 WOODSVIEW | ROAD | | 12 | 12 | 2019 | \$ | 15.00 | | | | |
| City BENSALEM | State PA | Zip Code (Plus 4) 19020 | | ition of Exp SE REIMBU | | | | | | | |

| To Whom Paid FRIENDS OF TOM TOSTI | | | | | DAY | YEAR | | |
|--|---|-------------------------|-----------------------------------|---|--|--|----|-----------------|
| Mailing Address 3031 WALTON ROAD BLDG C STE 200 | | | | | 12 | 2019 | \$ | 250.00 |
| City PLYMOUT | TH MEETING | State PA | Zip Code (Plus 4) 19462 | Descrip DONAT | i ition of Exp ION | penditure | | |
| To Whom Paid FRIENDS OF CATHY SPAHR | | | | | DAY | YEAR | | |
| Mailing Address | 2624 PENNLYN DR | IVE | | 12 | 17 | 2019 | \$ | 250.00 |
| City CHICHES | STER | State PA | Zip Code (Plus 4) 19061 | Descrip DONAT | ntion of Exp ION | benditure | | |
| To Whom Paid BUCKS VICTORY | | | | | DAY | YEAR | | |
| Mailing Address | 44 E COURT STREE | ET | | 12 | 18 | 2019 | \$ | 50.00 |
| City DOYLEST | ΓΟWN | State PA | Zip Code (Plus 4) 18901 | Description of Expenditure DONATION | | | | |
| To Whom Paid LA STINGERZ | | | | | | | | |
| | | | | мо | DAY | YEAR | | |
| | AMELIA TURN | | | мо 12 | DAY 18 | YEAR 2019 | \$ | 100.00 |
| LA STINGERZ | | State PA | Zip Code (Plus 4) 19054 | 12 | 18 otion of Exp | 2019 | \$ | 100.00 |
| LA STINGERZ Mailing Address City LEVITTO To Whom Paid | | PA | | 12 Descrip | 18 otion of Exp | 2019 | \$ | 100.00 |
| LA STINGERZ Mailing Address City LEVITTO To Whom Paid | WN | PA | | 12 Descrip DONAT | 18 ption of Exp ION | 2019 Denditure | \$ | 100.00 45.00 |
| LA STINGERZ Mailing Address City LEVITTO To Whom Paid LOWER BUCKS C | WN CHAMBER OF COMMER 409 HOOD BLVD | PA | | 12 Descrip DONAT MO 12 | 18 Ion of Exp ION DAY 30 | 2019 Denditure YEAR 2019 | | |
| LA STINGERZ Mailing Address City LEVITTO To Whom Paid LOWER BUCKS C Mailing Address | WN CHAMBER OF COMMER 409 HOOD BLVD S HILLS | PA RCE State | 19054 Zip Code (Plus 4) | 12 Descrip DONAT MO 12 Descrip | 18 Ion of Exp ION DAY 30 | 2019 Denditure YEAR 2019 | | |
| LA STINGERZ Mailing Address City LEVITTO To Whom Paid LOWER BUCKS C Mailing Address City FAIRLES: To Whom Paid | WN CHAMBER OF COMMER 409 HOOD BLVD S HILLS | PA CE State PA | 19054 Zip Code (Plus 4) | 12 Descrip DONAT MO 12 Descrip EXPENS | 18 otion of Exp ION DAY 30 otion of Exp SE | 2019 penditure YEAR 2019 penditure | | |

| To Whom Paid LEVITTOWN FAIRLESS HILL RESCUE | | | | | DAY | YEAR | | |
|--|-----------------|----------------|-----------------------------------|-------------------------|-----|------|----|-------------------------------|
| Mailing Address 7405 NEW FALLS ROAD | | | | 12 | 31 | 2019 | \$ | 100.00 |
| City LEVITTOWN | St | PA | Zip Code (Plus 4) 19055 | Descrip DONAT | | | | |
| | | | | | | | | |
| Future Over a Tabal of I | | David David | Course Do no Ithorn D | | | | | PAGE TOTAL |
| Enter Grand Total of I | Expenditures on | Page 1, Report | Cover Page, Item D | - | | | \$ | PAGE TOTAL 3,380.00 |
| Enter Grand Total of I | Expenditures on | Page 1, Report | Cover Page, Item D | | | | \$ | |
| Enter Grand Total of I | Expenditures on | Page 1, Report | Cover Page, Item D | | | | \$ | |
| Enter Grand Total of I | Expenditures on | Page 1, Report | Cover Page, Item D | | | | \$ | |