

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: TARTAGLIONE, CHRISTINE FRIENDS TO ELECT												
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 2019	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
						MO	DAY	YEAR	DEM 51			
						11	5	2019	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		11	26	2019		12	31	2019				
A. Amount Brought Forward From Last Report						\$ 95,922.82						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 3,500.00						
C. Total Funds Available (Sum Of Lines A and B)						\$ 99,422.82						
D. Total Expenditures (From Schedule III)						\$ 8,948.13						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 90,474.69						
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

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
TARTAGLIONE, CHRISTINE FRIENDS TO ELECT	From: <u>11/26/2019</u> To: <u>12/31/2019</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)	\$ 3,000.00
All Other Contributions (Part D)	\$ 500.00
TOTAL for the Reporting Period (3)	\$ 3,500.00

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.)	\$ 3,500.00
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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 TARTAGLIONE, CHRISTINE FRIENDS TO ELECT	Reporting Period From: <u>11/26/2019</u> To: <u>12/31/2019</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee THE AFFORDABLE EDUCATION PAC				MO	DAY	YEAR	\$ 1,000.00
Mailing Address PO BOX 220				12	3	2019	
City SOLEBURY	State PA	Zip Code (Plus 4) 18963					
Full Name of Contributing Committee DUANE MORRIS GOVT COM				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 30 SOUTH 17TH ST				12	3	2019	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103-4196					
Full Name of Contributing Committee LAWPAC				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 212 N THIRD ST SUITE 101				12	3	2019	
City HARRISBURGH	State PA	Zip Code (Plus 4) 17101					

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

PAGE TOTAL
\$ 3,000.00

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 TARTAGLIONE, CHRISTINE FRIENDS TO ELECT	Reporting Period From: <u>11/26/2019</u> To: <u>12/31/2019</u>
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				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	
KEVIN AND JANET OBRIEN							
Mailing Address 530 BROOKVIEW LN				12	11	2019	\$ 500.00
City HAVERTOWN	State PA	Zip Code (Plus 4) 19083					
Employer Name JAQUINS LIQUORS				Occupation OWNER			
Employer Mailing Address/Principal Place of Business 2633 TRENTON AVE			City PHILADELPHIA	State PA	Zip Code (Plus 4) 19125		

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

PAGE TOTAL
\$ 500.00

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	
TARTAGLIONE, CHRISTINE FRIENDS TO ELECT		From: <u>11/26/2019</u> To: <u>12/31/2019</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
TARTAGLIONE, CHRISTINE FRIENDS TO ELECT	From <u>11/26/2019</u> To: <u>12/31/2019</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
THE PHILADELPHIA PROTESTANT HOME				
Mailing Address 6401 MARTINS MILL RD	12	11	2019	\$ 250.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19111	Description of Expenditure DONATION	
To Whom Paid	MO	DAY	YEAR	
PHILADELPHIA PUBLIC RECORD				
Mailing Address 21 SOUTH 11TH ST STE 205	12	31	2019	\$ 275.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19107	Description of Expenditure 1/4 PG AD ANN HOLIDAY ISSUES	
To Whom Paid	MO	DAY	YEAR	
JUNIATA NEWS				
Mailing Address PO BOX 15336	12	31	2019	\$ 135.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19111	Description of Expenditure HOLIDAY GREETING AD	
To Whom Paid	MO	DAY	YEAR	
Congreso de Latinos Unidos				
Mailing Address 216 W Somerset St	11	27	2019	\$ 700.00
City Phialdelphia	State PA	Zip Code (Plus 4) 19133	Description of Expenditure 2 TICKETS TO ANNUAL GALA	
To Whom Paid	MO	DAY	YEAR	
PNC BANK				
Mailing Address PO BOX 609	11	30	2019	\$ 2,938.08
City PITTSBURGH	State PA	Zip Code (Plus 4) 15230	Description of Expenditure ACH DEDUCTIONS - AMERICAN EXPRESS	

To Whom Paid PNC BANK			MO	DAY	YEAR	\$ 64.18
Mailing Address PO BOX 609			11	30	2019	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15230	Description of Expenditure ACH DEDUCTIONS ACT BLUE			

To Whom Paid PNC BANK			MO	DAY	YEAR	\$ 36.41
Mailing Address PO BOX 609			11	30	2019	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15230	Description of Expenditure PNC BANK OTHER DEDUCTIONS			

To Whom Paid PNC BANK			MO	DAY	YEAR	\$ 1,710.62
Mailing Address PO BOX 609			12	31	2019	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15230	Description of Expenditure ACH DEDUCTIONS AMERICAN EXPRESS			

To Whom Paid PNC BANK			MO	DAY	YEAR	\$ 0.50
Mailing Address PO BOX 609			12	31	2019	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15230	Description of Expenditure ACH FUND DISTRIBUTION CHARGE			

To Whom Paid PNC BANK			MO	DAY	YEAR	\$ 27.54
Mailing Address PO BOX 609			12	31	2019	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15230	Description of Expenditure PNC BANK ANALYSIS CHARGES			

To Whom Paid BNAI ZION FOUNDATION			MO	DAY	YEAR	\$ 250.00
Mailing Address 1430 BROADWAY SUITE 1804			12	11	2019	
City NEW YORK	State NY	Zip Code (Plus 4) 10018	Description of Expenditure 1/4 PAGE AD BENEFIT FOR CHILDREN AND YOUTH			

To Whom Paid WOMEN'S LAW PROJECT			MO	DAY	YEAR	\$ 250.00
Mailing Address 125 SOUTH 9TH ST			11	28	2019	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19107	Description of Expenditure DONATION			

To Whom Paid LLOYD C WILSON AUXILLARY POST 224			MO	DAY	YEAR	\$ 250.00
Mailing Address 2006 ORTHODOX ST			11	28	2019	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19124	Description of Expenditure DONATION THANKSGIVING DINNER			

To Whom Paid 26TH POLICE DISTRICT			MO	DAY	YEAR	\$ 200.00
Mailing Address 615 E GIRARD AVE			11	28	2019	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19125	Description of Expenditure DONATION ANNUAL CHILDRENS CHRISTMAS PARTY			

To Whom Paid OXFORD CIRCLE ATHLETIC ASSOCIATION			MO	DAY	YEAR	\$ 500.00
Mailing Address 5051 SUMMERDALE AVE			11	28	2019	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19124	Description of Expenditure DONATION CHAMPIONSHIP GAMES			

To Whom Paid Frankford Chargers Sports & Mentor Assoc.			MO	DAY	YEAR	\$ 250.00
Mailing Address 4800 Ditman St			11	28	2019	
City Philadelphia	State PA	Zip Code (Plus 4) 19124	Description of Expenditure DONATION NATL CHEER COMPETITION			

To Whom Paid 15TH POLICE DISTRICT			MO	DAY	YEAR	\$ 200.00
Mailing Address PO BOX 19530			11	28	2019	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19124	Description of Expenditure DONATION CHILDREN'S CHRISTMAS PARTY			

To Whom Paid LOCAL 401 SUPPLEMENTAL WELFARE FUND			MO	DAY	YEAR	
Mailing Address 11600 NORCOM RD			11	28	2019	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19154	Description of Expenditure TABLE SPONSOR CHRISTMAS BENEFIT			

To Whom Paid THERESA LYNCH			MO	DAY	YEAR	
Mailing Address 726 MILLWOOD RD			12	11	2019	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19115	Description of Expenditure REIMBURSEMENT FOR CHRISTMAS ELF HATS FOR HOLIDAY PARTY			

To Whom Paid Brigid Dowling			MO	DAY	YEAR	
Mailing Address 126 Haines Ave			12	31	2019	
City Elkins Park	State PA	Zip Code (Plus 4) 19027	Description of Expenditure JAN CAMPAIGN FINANCE WORK AND OVERNIGHT MAIL REIMBURSEMENT			

To Whom Paid MONIQUE NICHOLSON			MO	DAY	YEAR	
Mailing Address 1212 BRIDGE ST			11	27	2019	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19149	Description of Expenditure DONATION			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 8,948.13

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				Reporting Period			
TARTAGLIONE, CHRISTINE FRIENDS TO ELECT				From: <u>11/26/2019</u> To: <u>12/31/2019</u>			

				Outstanding Balance of Debt			
				DATE			
Name of Creditor				MO	DAY	YEAR	<div></div>
UFCW LOCAL 1776							
Mailing Address							<div></div>
3031-A WALTON RD STE 201				5	6	2014	<div>\$</div> <div>30,000.00</div>
City	State	Zip Code (Plus 4)		Description of Debt			
PLYMOUTH MEETING	PA	19462-0000		LOAN TO COMITTEE			

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.	PAGE TOTAL <div>\$</div> <div>30,000.00</div>
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