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 960	00334				port ed B		CAI	NDI	DATE		COMM	1ITTEE		LOB	BYIST	\	
Name of Filing C	ommittee, Cand	date or L	obbyist:		STI	NE,	TAMA	RA M	CKII	NNEY								
Street Address:	212 N. 3RD	ST. STE	203															
City:	HARRISBUR	G						State	e:	PA			Zip Code	e: 17	101			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIE PRIMARY		-	2.	30 DA		Р	OST-	3.		AMENDME REPORT?	NT	Yes	No)	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIE		E-	5. X	30 DA		Р	OST-	6.		TERMINAT REPORT?	TION	Yes	No)	\checkmark
report type)	ANNUAL REPOR	T 7.	Year 200)4				NG ME		_			PAPER		√	DISK	TTE	
Name of Office S	Sought by Candid	ate:	•		•			DAT	ΕO	F ELE	СТІС	ON	District Number	Office Code	Pai	ty Code	Cour	
								МО		DAY	YI	EAR						
									11		2	2004		(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	МО	DAY	YEAF	₹			МО		DAY	Y	EAR	FOF	ROFFIC	E USE	ONLY		
Expenditures	trom:		1	1	1	Т	0		10		18	2004						
A. Amount Bro	ught Forward Fr	om Last R	Report				\$					0.00						
B. Total Moneta	ary Contribution	s And Rec	eipts (Fro	m Sche	edule	e I)	\$					0.00						
C. Total Funds	Available (Sum (Of Lines A	and B)				\$					0.00						
D. Total Expend	ditures (From Sc	hedule II	Ι)				\$				16,9	975.00						
E. Ending Cash	Balance (Subtra	ct Line D	From Lin	e C)			\$			(16,9	75.00)						
F. Value Of In-	Kind Contributio	ns Receiv	ed (From	Schedu	ile II	I)	\$					0.00						
G. Unpaid Debt	s And Obligation	s (From S	Schedule	IV)			\$					0.00		,				
				AFF	FIDA	AVI	T SE	CTIC	N									
PART I - If this is	a Committee re	port, trea	asurer sig	n here.	If th	nis is	a Car	ndidat	e re	port, c	andi	date sig	ın here.					
I swear (or affirm) correct and comple	that this report, ir ete.	cluding the	e attached	schedule	s file	d on	paper	or by e	lectr	onic m	edium	ı, are to t	he best of	my know	/ledge	and bel	ef , tr	ue,
Sworn to and subs	cribed before me tl day of	nis	20						,		5	Signature	of Person	Submitt	ing Re	oort		
	Signa	ture					- -						Printe	ed Name				-
My Commission Ex	_								•				Email					_
	МО	D	AY	YR						Are	ea Coo	de	Daytime	Teleph	one Nu	mber		
Part II- If this is	a report of a ca	ndidate's	authorize	ed Comr	nitte	ee, C	andid	ate sh	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende		my knowl	edge and b	elief this	s poli	itical	comm	ittee h	as no	ot viola	ted ar	ny provisi	ions of the	act of Ju	ine 3,1	937 (P.I	133	3,
Sworn to and subsc		s										Si	ignature of	Candida	te			-
	day of						-						Printed	l Name				-
	Signature						-							-				_
My Commission Exp	ires												Email					
	мо	D	AY	YF	2		-			Area	Code		Day	ytime Te	lephor	ne Numb	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period		
STINE, TAMARA MCKINNEY	From:	To:	10/18/2004
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			
TOTAL for the Reporting	g 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	g 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	g Period (3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)			
TOTAL for the Reporting	g Period (4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa		\$	0.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate valu	-			-			
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fro	om:		То	:	
		L			DATE			AMOUNT
Full Name of Contribut	ing Committee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	•	•				-		DAGE TOTAL

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

PAGE TOTAL	
\$ 0.00	

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 of Candidate				Reporting Period From: To:				
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
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 Candi	date		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	0.00

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			Rep	orting Pe	riod			
			Fror	n:		To) :	
				D	ATE		А	MOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupa	tion		•	
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Coo	de (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary Page	Section	on 3.			\$	PAGE TOTAL 0.00

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 Car	ndidate		Report	ing Perio	od			
			From:			To:		
				D	ATE		A	MOUNT
Full Name				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	·						
Enter Grand Total of Part E on	Schedule T. Detailed	d Summary Page	Section	4			P	AGE TOTAL
	2, 200 0000		22300				\$	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:	To:	10/18/2004
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (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,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candid	ate		Reporting	g Period			
			From:			То:	
				DATE			AMOUNT
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 S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	ле Г		PAGE TOTAL
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	,		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:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus	4)					
Employer of Contributor					Occupa	ation			
Employer Mailing Address/Principal Plad Business	ce of	City	Sta	ite	Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, I	n-Kind	Contributions	Deta	ailed				PAGE TOTAL
Summary Page, Section 3.									0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candida	te		Poporti	ng Period			
Name of Fining Committee of Canada	ie.		Keportii	ng Perioa			
STINE, TAMARA MCKINNEY			From			То:	10/18/2004
				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
ELECT TOM TANGRETTI			1-10				
Mailing Address			9	14	2004	\$	300.00
City	State	Zip Code (Plus 4)		otion of Exp			
To Whom Paid PA FOR KUKOVICH			МО	DAY	YEAR		
Mailing Address			9	22	2004	\$	500.00
City	State	Zip Code (Plus 4)	Descrip	otion of Exp	oenditure		
To Whom Paid VOTERS TO ELECT VANCE			мо	DAY	YEAR		
Mailing Address			9	27	2004	\$	50.00
City	State	Zip Code (Plus 4)	l l	otion of Exp			
To Whom Paid BUTKOVITZ FOR LEGISLATURE	•		мо	DAY	YEAR		
Mailing Address			10	4	2004	\$	250.00
City	State	Zip Code (Plus 4)	Descrip	otion of Exp	penditure		
To Whom Paid CITIZENS FOR BAXTON			МО	DAY	YEAR		
Mailing Address	ling Address		10	4	2004	\$	250.00
City	State	Zip Code (Plus 4)	Descrip	otion of Exp	penditure		

							12
To Whom Paid GLEN GRILL FOR HOUSE COMMI Mailing Address			мо	DAY	YEAR		
			10	4	2004	\$	125.00
City	State	Zip Code (Plus 4)	Description of Expenditure POL. CONT.				
To Whom Paid CITIZENS FOR HUGHES			МО	DAY	YEAR		
Mailing Address						\$	500.00
City	State	Zip Code (Plus 4)	Description of Expenditure POL CONTR.				
To Whom Paid COM TO ELECT VEON			МО	DAY	YEAR		
Mailing Address						\$	5,000.00
City	State	Zip Code (Plus 4)	Description of Expenditure				
To Whom Paid COMMITTEE TO ELECT (ILLEGIBLE)			МО	DAY	YEAR		
Mailing Address			10	12	2004	\$	10,000.00
City	State	Zip Code (Plus 4)	Description of Expenditure POL. CONT				
Enter Grand Total of Exp	enditures on Page 1. Re	eport Cover Page. Item D	_				PAGE TOTAL
			=			\$	16,975.00