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 9200	098			Report		CANDI	CANDIDATE COMMITTEE V LOBBYIST								
Name of Filing C	Committee, Candid	ate or L	obbyist:	T	ARTAG	SLION	E, CHRIS	STINE F	RIEN	DS TO	ELECT					_
Street Address:	PO BOX 2856	6														
City:	PHILADELPHI -	A					State:	PA			Zip Cod	ie: 19	9149			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PR PRIMARY	E-	2.	30 DA		POST-	3. X		AMENDMENT REPORT?		Yes	No	Y	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PF ELECTION	RE-	5.	30 DA		POST-	6.		TERMINA REPORT		Yes	No	٧	
report type)	ANNUAL REPORT	7.	Year 2020				NG METHO				PAPER		/	DISKE	TTE	
Name of Office S	Sought by Candida	te:	-				DATE 0	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code	,
	· ,						МО	DAY	YE	AR	2	Toolic	DEN	1	51	_
							11		3	2020		(SEE IN	STRUCTIO	ONS FOR O	ODES)	_
•	Receipts and	МО	DAY YEA	R			МО	DAY	YE	AR	FC	R OFFI	CE USE	ONLY		
Expenditures	s trom:		5 19	202	20 T	0	6		22	2020						
A. Amount Bro	ught Forward Froi	n Last R	eport			\$			67,4	105.91						
B. Total Monet	ary Contributions	And Rec	eipts (From Sch	edı	ule I)	\$			1,3	350.00						
C. Total Funds	Available (Sum O	f Lines A	and B)			\$			68,7	755.91						
D. Total Expend	ditures (From Sch	edule II	I)			\$			3,2	99.02						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)			\$			65,4	56.89						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sched	ule	II)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$			30,0	00.00			•			
			AF	FII	DAVI	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign here.	If	this is	a Car	ndidate re	eport, o	candi	date sig	jn here.					
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	attached schedul	es f	iled on	paper	or by elect	ronic m	edium	, are to t	the best o	f my kno	wledge	and belie	ef , true	١.
Sworn to and subs	cribed before me this day of	5	20						S	ignature	of Perso	n Submit	ting Rep	ort		
	Signatu	re				- -					Prin	ted Name	9			٠
My Commission Ex	cpires					_					Ema	il				
	МО	D	AY YI	R				Ar	ea Cod	e	Daytin	e Telepl	one Nu	mber		
Part II- If this is	a report of a can	didate's	authorized Com	mit	ttee, C	andid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of r	ny knowle	edge and belief th	is p	olitical	comm	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,19	937 (P.L	1333,	ı
Sworn to and subsc	ribed before me this									s	ignature o	of Candid	ate			
	day of					-					Printe	d Name				.
	Signature					-					F	:1				.]
My Commission Exp	oires										Ema					
	МО	D	AY Y	R		-		Area	Code		D	aytime T	elephon	e Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
TARTAGLIONE, CHRISTINE FRIENDS TO ELECT	From:	5/19/202	<u>!0</u> To:	6/22/2020
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	\$	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)			\$	350.00
TOTAL for the Reporting	Period	(3)	\$	1,350.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	1,350.00

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			Reporting	Reporting Period				
			From:		То	:		
		·		DATE			AMOUNT	
Full Name of Contributing Committee			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

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 or Candidate			Rep	Reporting Period				
			Froi	m:		To):	
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address			\Box				\$	0.00
City	State	Zip Code (Plus 4))					
								PAGE TOTAL

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					
TARTAGLIONE, CHRISTINE FRIENDS TO ELECT	From:	5/19/2020	То:	6/22/2020		
		DATE		AMOUNT		

Full Name of Contributing Committee Pennsylvania Optometric PAC			МО	DAY	YEAR	\$ 500.00
Mailing Address 218 North Street			5	22	2020	, , , , , , , , , , , , , , , , , , , ,
City Harrisburg	State PA	Zip Code (Plus 4) 17101				
Full Name of Contributing Committee PECOPAC						
_			МО	DAY	YEAR	s 500.00
_	2					\$ 500.00
PECOPAC	2 State	Zip Code (Plus 4)	MO 5	DAY 22	YEAR 2020	\$ 500.00

 $\label{lem:constraint} \textbf{Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.}$

PAGE TOTAL 1,000.00

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	Reporting Period						
TARTAGLIONE, CHRISTINE FRIENDS TO ELECT	From:	<u>5/19/2020</u> To:	6/22/2020				

				DATE			AMOUNT		
Full Name of Contributor				мо	DAY	YEAR	4 350.00		
Deborah Beck				1-10	חאם	ILAK	\$ 350.00		
Mailing Address 3820 Club Drive			5	22	2020				
City Harrisburg	State	Zi	p Code (Plus 4)]	22	2020			
	PA	1 17	7110						
Employer Name DASPOP				Occupation President					
Employer Mailing Address/Principal P	ace of Business		City	State			Zip Code (Plus 4)		
3820 Club Drive			Harrisburg		PA		17110		

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

PAGE TOTAL	
\$ 350.00	

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	Name of Filing Committee or Candidate			orting Period					
			From:			То:			
					ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$	0.00	
Mailing Address									
City	State	Zip Code (P	lus 4)						
Receipt Description	'	,		<u> </u>		_ !	•		
				_				PAGE TOTAL	
Enter Grand Total of Part	E on Schedule 1, Detailed	i Summary Page, S	Section	4.			\$	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 Perio	d						
TARTAGLIONE, CHRISTINE FRIENDS TO ELECT	From:	<u>5/19/2020</u> To:	<u>6/22/2020</u>					
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 PART 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 Candidate				Reporting Period				
	From:		То:					
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•	•	•	•		·		
					-			
Enter Grand Total of Part F or	n Schedule II, In-Ki	nd Contributions Detai	led Sun	mary Pa	ge,		PAGE TOTAL	-
Section 2.						\$		0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate			Reporting Period							
				Fro	m:		To:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								\$	1	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor Occupation										
Employer Mailing Address/Principal Place of Business		Cit	ty	Stat	e Zij	p Code(Plus 4)	Descr	iptio	n of Contributio	on
Enter Grand Total of Part G on Sch	edule II. In-K	ind	Contributions D	etaile	ed				PAGE TOT	AL
Summary Page, Section 3.					-					0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate		Reporting Period						
TARTAGLIONE, CHRISTINE FRIENDS TO ELECT	From	5/19/2020	То:	<u>6/22/2020</u>				

To Whom Paid		AMOUNT					
To Whom Paid	DATE						
MO DAY Y	YEAR						
JOHN DANFORD	ILAK						
Mailing Address5128 LIEPER ST527	2020	\$ 2,500.00					
City PHILADELPHIA State Zip Code (Plus 4) Description of Expend	nditure						
PA 19124 ELECTION DAY LOGI	ELECTION DAY LOGISTICS						
To Whom Paid MO DAY YI	YEAR						
VISITATION BVM CHURCXH	ILAK						
Mailing Address 2625 B ST 5 27	2020	\$ 250.00					
City PHILADELPHIA State Zip Code (Plus 4) Description of Expend	Description of Expenditure						
PA 19125 DONATION	DONATION						
To Whom Paid MO DAY YI	YEAR						
Brigid Dowling	ILAK						
Mailing Address126 Haines Ave615	2020	\$ 200.00					
	I .						
City Elkins Park State Zip Code (Plus 4) Description of Expend	nditure						
City Elkins Park State Zip Code (Plus 4) Description of Expendence PA 19027 JUNE CAMPAIGN EXP		rk					
PA 19027 JUNE CAMPAIGN EXP	(PENSE WO	RK					
PA 19027 JUNE CAMPAIGN EXP		PRK					
To Whom Paid STAPLES PA 19027 JUNE CAMPAIGN EXP MO DAY YI	YEAR	\$ 59.88					
To Whom Paid STAPLES PA 19027 JUNE CAMPAIGN EXP MO DAY YI	YEAR 2020						
To Whom Paid STAPLES Mailing Address 4203 UNION DEPOSIT RD 19027 JUNE CAMPAIGN EXP MO DAY YI 6 14	YEAR 2020						
To Whom Paid STAPLES Mailing Address 4203 UNION DEPOSIT RD City HARRISBURG State PA 19027 JUNE CAMPAIGN EXP MO DAY YI Zip Code (Plus 4) PA 17111 SUPPLIES To Whom Paid	YEAR 2020 Inditure						
To Whom Paid STAPLES Mailing Address 4203 UNION DEPOSIT RD City HARRISBURG State PA 19027 JUNE CAMPAIGN EXP MO DAY YI Zip Code (Plus 4) PA 17111 SUPPLIES To Whom Paid	YEAR 2020						
To Whom Paid STAPLES Mailing Address 4203 UNION DEPOSIT RD City HARRISBURG State PA 17111 To Whom Paid SUPPLIES To Whom Paid Kathy Benton PA 19027 JUNE CAMPAIGN EXPRES MO DAY YI A 19027 YI A 19027 MO DAY YI MO DAY NO DAY YI MO DAY MO DAY YI MO DAY NO DAY YI MO DAY YI MO DAY NO DAY YI MO DAY YI MO DAY NO DAY YI MO DAY MO DAY NO DAY NO DAY NO DAY NO DAY NO DAY NO DAY YI MO DAY NO DAY	YEAR 2020 Inditure						
TO Whom Paid STAPLES Mailing Address 4203 UNION DEPOSIT RD City HARRISBURG State PA 17111 To Whom Paid SUPPLIES To Whom Paid Kathy Benton PA 19027 JUNE CAMPAIGN EXPRES MO DAY YE To Whom Paid Kathy Benton	YEAR 2020 Inditure YEAR 2020	\$ 59.88					
To Whom Paid STAPLES Mailing Address 4203 UNION DEPOSIT RD City HARRISBURG State PA 17111 To Whom Paid Kathy Benton Mo DAY YI And DAY And DAY YI And DAY And DAY YI And DAY YI And DAY And DAY YI And DAY And DAY And DAY YI And DAY And DAY YI And DAY And DAY And DAY YI And DAY And DAY YI And DAY And DAY And DAY And DAY YI And DAY	YEAR 2020 Inditure 2020 Inditure	\$ 59.88 \$ 95.30					
PA	YEAR 2020 Inditure 2020 Inditure COR STAPLES	\$ 59.88 \$ 95.30					
PA	YEAR 2020 Inditure 2020 Inditure	\$ 59.88 \$ 95.30					
To Whom Paid STAPLES Mailing Address 4203 UNION DEPOSIT RD City HARRISBURG State Zip Code (Plus 4) Description of Expendence	YEAR 2020 Inditure 2020 Inditure OR STAPLES	\$ 59.88 \$ 95.30					
TO Whom Paid STAPLES Mailing Address 4203 UNION DEPOSIT RD City HARRISBURG State Zip Code (Plus 4) Description of Expendence	YEAR 2020 Inditure 2020 Inditure OR STAPLES YEAR 2020	\$ 59.88 \$ 95.30 S PAYMENT					

							JL 12
To Whom Paid PNC BANK			мо	DAY	YEAR		
Mailing Address PO BOX 609			5	31	2020	\$	28.84
City PITTSBURGH State Zip Code (Plus 4)			Description of Expenditure				
	PA 15230 CORPORATE ACCT ANALYSI					IS CHARGE	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							3,299.02
					'		

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				ing Period				
TARTAGLIONE, CHRISTINE FRIENDS TO ELECT From:			<u>5/19/2020</u> To:			6/22/2020		
					DATE			tstanding lance of Debt
Name of Creditor UFCW LOCAL 18776					DAY	YEAR		
Mailing Address 3031 A WALTON AVE STE 201			5	6	2014	\$	30,000.00	
City PLYMOUTH MEETING State Zip Code (Plus 4) Description of Debt								
PA 19462 LOAN TO COMITTEE								
								PAGE TOTAL
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							\$	30,000.00