Campaign Finance Report

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

Filer Identification 9200098 Filer Identification 9200098							; y :	CANDI	CANDIDATE			ITTEE	√	LOBE	SYIST		
Name of Filing C	Committee, Candid	ate or L	obbyist:		TAF	RTAG	LION	E, CHRIS	STINE F	RIEN	DS TO	ELECT	_				_
Street Address:	PO BOX 2856	6															
City:	PHILADELPHI -	Α						State:	PA			Zip Cod	de: 19	9149			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	Y PRE	-	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No	٧	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	Y PRE	-	5.	30 DA ELECT	'	POST-	6.		TERMINATION REPORT?		Yes	No	Y	
report type)	ANNUAL REPORT	7. X	Year 2020 FILING METHOL () CHECK ON									$\overline{}$	DISKE	TTE			
Name of Office S	- Sought by Candida	te:						DATE C	F ELE	CTIC	N	District Number	Office Code	Par	ty Code	County	,
								МО	DAY	YI	EAR	2		DEM	1	51	_
								11		3	2020		(SEE IN	STRUCTIO	ONS FOR C	ODES)	_
	Receipts and	МО	DAY	YEAR	ł			МО	DAY	YI	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	from:		11 24	2	020	T	0	12		31	2020						
A. Amount Bro	ught Forward Fro	n Last R	eport				\$	-		39,0	010.98						
B. Total Moneta	ary Contributions	And Rec	eipts (From	Sche	dul	e I)	\$				29.13						
C. Total Funds Available (Sum Of Lines A and B)							\$			39,0	040.11						
D. Total Expend	ditures (From Sch	edule II	I)				\$			5,6	577.52						
E. Ending Cash	Balance (Subtrac	t Line D	From Line (C)			\$			33,3	62.59						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sc	chedu	le I	Ί)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$			30,0	00.00			•			
				AFF	ID	AVI	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign h	nere. I	If th	his is	a Can	ndidate r	eport, o	candi	date sig	jn here.					
I swear (or affirm) correct and comple) that this report, inc ete.	luding the	e attached sch	nedules	s file	ed on	paper (or by elect	ronic m	edium	, are to t	the best o	f my kno	wledge a	and belie	ef , true	ð,
Sworn to and subs	cribed before me this day of	5	20							5	Signature	of Perso	n Submit	ting Rep	ort		
	Signatu	re					-					Prin	ted Name	9			•
My Commission Ex	cpires ————						_					Ema	il				
	МО	D	AY	YR					Are	ea Cod	ie	Daytim	e Teleph	none Nu	mber		<u>_</u>
Part II- If this is	a report of a can	didate's	authorized	Comn	nitte	ee, C	andida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of red.	ny knowle	edge and belie	ef this	pol	itical	commi	ittee has r	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 day of		20								s	ignature o	of Candid	ate			
							-					Printe	d Name				۱
My Commission Exp	Signature						-					Ema	il				
	МО	D	AY	YR	l		-		Area	Code		Da	aytime T	elephon	e Numbe	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
TARTAGLIONE, CHRISTINE FRIENDS TO ELECT	From:	11/24/202	<u>20</u> To:	12/31/2020
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	(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) Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	J Period	(4)	\$	29.13
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			\$	29.13

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 C	Reporting Period						
			From:		То	:	
		•		DATE			AMOUNT
Full Name of Contributing Comm	ittee		мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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

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 Commi	ttee or Candidate		Reporting I	Period			
			From:		To) :	
		·		DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
						\$	0.00
Mailing Address							
Mailing Address City	State	Zip Code (Plus 4)					

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

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 Cai	ndidate		Reporting	Period				
			From:			То:		
				DA	TE		Þ	AMOUNT
Full Name of Contributing Comm	nittee			мо	DAY	YEAR		0.00
Mailing Address							*	0.00
City	State	Zip Code	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C o	n Schedule I, Detaile	d 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				orting Pe	riod			
Fr								
				D	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupa	tion			
Employer Mailing Address/Principal Pla	ce of Business	City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Scho	dule I, Detailed S	Summary Page,	, Sectio	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 Candidate	Reporting P	eriod	
TARTAGLIONE, CHRISTINE FRIENDS TO ELECT	From:	11/24/2020 To:	12/31/2020

			D	ATE		AMOUNT	
Full Name			wo	DAY	VEAD		
PNC BANK			МО	DAY	YEAR	\$	29.13
Mailing Address PO BOX 609			12	30	2020		
City PITTSBURGH	State	Zip Code (Plus 4)]		2020		
	PA	15230					
Receipt Description REIMBURSEMEN	IT OF CHECK REPRIN	T FEE					

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL \$ 29.13

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 Per	iod							
TARTAGLIONE, CHRISTINE FRIENDS TO ELECT	From:	<u>11/24/2020</u> To:	12/31/2020						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER 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 Can	Reporting Period							
	From: To:							
				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	ımary 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					porting	Period				
				Fro	m:		To:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								\$		0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zij	p Code(Plus 4)	Descr	iptio	n of Contribution	on
Enter Grand Total of Part G on Sch	edule II. In-K	ind	Contributions D	etaile	ed				PAGE TOT	ΓAL
Summary Page, Section 3.					-					0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting I	Period		
TARTAGLIONE, CHRISTINE FRIENDS TO ELECT	From	11/24/2020	То:	12/31/2020

				DATE		AMOUNT				
To Whom Paid			МО	DAY	YEAR					
Brigid Dowling			110							
Mailing Address 652 ROSELAND AVENUE			12	8	2020	\$	200.00			
City JENKINTOWN State Zip Code (Plus 4)			Description of Expenditure							
	PA 19046			CAMPAIGN EXPENSE WORK						
To Whom Paid			мо	DAY	YEAR					
FLAME MAGAZINE			140							
Mailing Address 415-427 N 5TH ST			12	8	2020	\$	300.00			
City PHILADELPHIA	State	Zip Code (Plus 4)	Description of Expenditure							
	PA	19123	1/4 PAC	GE AD						
To Whom Paid			мо	DAY	YEAR					
WILLIAM CRAMP ELEMENTARY SCHO	OL		110							
Mailing Address 3449 N MASCHER ST				8	2020	\$	100.00			
City PHILADELPHIA State Zip Code (Plus 4)			Description of Expenditure							
PA 19140				DONATION THANKSGIVING BASKET						
To Whom Paid			мо	DAY	YEAR					
NK CDC					7 = 7 11.1					
Mailing Address 2771 RUTH ST			12	8	2020	\$	100.00			
City PHILADELPHIA State Zip Code (Plus 4)			Descrip	tion of Exp	enditure	•				
	PA	19134	DONATION							
To Whom Paid			мо	DAY	YEAR					
FRIENDS OF VISITATION			140							
Mailing Address 300 E LEHIGH AV	Ē		12	21	2020	\$	250.00			
City PHILADELPHIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
	PA	19125	DONATION							
To Whom Paid			МО	DAY	YEAR					
PHILADELPHIA WATER ICE			1.10							
Mailing Address 8354-58 STATE RD			12	8	2020	\$	31.90			
City PHILADELPHIA State Zip Code (Plus 4)			Description of Expenditure							
	PA 19136			BLOCK PARTY DONATION						

To Wh	om Paid			мо	DAY	YEAR				
PHILADELPHIA FIGHT				PIO		ILAK				
Mailing Address 5817 CHARLES ST			12	8	2020	\$	1,000.00			
City PHILADELPHIA State Zip Code (Plus 4)			Description of Expenditure							
PA 19135			DONATION HEALTH CLINIC							
To Wh	om Paid			МО	DAY	YEAR				
Brigid	Dowling			MO		ILAK				
Mailin	g Address 652 ROSELAND AVE	ENUE		12	10	2020	\$	75.00		
City JENKINTOWN State Zip Code (Plus 4)			Description of Expenditure							
		PA	19046	GROUN	D SHIPPIN	G, NOTAI	RY, AND	PRINTING		
To Wh	om Paid			мо	DAY	YEAR				
MIKE	HAREL SCHOLARSHIP FUND									
Mailin	g Address 106 WEST MAIN ST			12	17	2020	\$	500.00		
City	NORRISTOWN	State	Zip Code (Plus 4)	Description of Expenditure						
		PA	19401	DONATI	ON					
To Wh	om Paid			МО	DAY	YEAR				
HOLO	CAUST AWARENESS MUSEUM									
Mailing Address 8339 OLD YORK RD STE 203				12	17	2020	\$	150.00		
City ELKINS PARK State Zip Code (Plus 4)				Description of Expenditure						
		PA	19027	FULL PG AD						
To Wh	om Paid			мо	DAY	YEAR				
SCHM	IDT PLAYGROUND DISTRICT 3 FU	JND								
Mailin	g Address 7534 CLARIDGE ST			12	17	2020	\$	50.00		
City	PHILADELPHIA	State	Zip Code (Plus 4)	Description of Expenditure						
		PA	19111	DONATION						
To Wh	om Paid			мо	DAY	YEAR				
отто	AND DELLA ENGLERT SCHOLARS	SHIP FUND								
Mailin	g Address PO BOX 827651			12	17	2020	\$	1,000.00		
City	PHILADELPHIA	State	Zip Code (Plus 4)	Description of Expenditure						
		PA	19182	DONATION						
To Wh	om Paid			мо	DAY	YEAR				
FRIEN	DS OF EINSTEIN			140		ILAK				
Mailin	g Address 5501 OLD YORK RD			12	21	2020	\$	200.00		
City PHILADELPHIA State Zip Code (Plus 4) PA 19141			Descrip	tion of Exp	enditure					
			68TH ANNUAL HARVEST BALL							
To Whom Paid			мо	DAY	YEAR					
Kathy Benton			.10		LAIN					
Mailing Address 1908 Columbia Ave			12	20	2020	\$	116.98			
City	Camp Hill	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
PA 17011			STAPLE	TAPLES REIMBURSEMENT						
	·									

									13		
To Whom Paid				мо	DAY	YEAR					
Brigid Dowling											
Mailing Address	lailing Address 652 ROSELAND AVENUE				30	2020	\$		200.00		
City JENKINTOWN State Zip Code (Plus 4)			Description of Expenditure								
PA 19046				CAMPAIGN EXPENSE WORK JAN.							
To Whom Paid				мо	DAY	YEAR					
US POSTAL SER	VICE										
Mailing Address	2801 LEVICK ST			12	30	2020	\$		62.75		
City PHILADELPHIA State Zip Code (Plus 4)			Description of Expenditure								
		PA	19149	STAMPS	AND PRIC	ORITY MA	IL				
To Whom Paid				мо	DAY	YEAR					
PNC BANK											
Mailing Address	PO BOX 609			12	30	2020	\$		29.13		
City PITTSBU	IRGH	State	Zip Code (Plus 4)	Descript	ion of Exp	enditure					
		PA	15230	ACH CH	ECK REOR	DER					
To Whom Paid				мо	DAY	YEAR					
PNC BANK	_										
Mailing Address	PO BOX 609			12	10	2020	\$		304.43		
City PITTSBURGH State Zip Code (Plus 4)				Description of Expenditure							
	PA 15230				PRINTING CHECKS COST						
To Whom Paid				мо	DAY	YEAR					
PNC BANK											
Mailing Address	PO BOX 609			12	30	2020	\$		59.73		
City PITTSBU	RGH	State	Zip Code (Plus 4)	Descript	ion of Exp	enditure					
	PA 15230			CHECK PRINTING FEE							
To Whom Paid				MO DAY YEAR							
PNC BANK											
Mailing Address	PO BOX 609			12	17	2020	\$		893.55		
City PITTSBU	IRGH	State	Zip Code (Plus 4)	Description of Expenditure							
		PA	15230	AMEX ACH PAYMENT							
To Whom Paid				мо	DAY	YEAR					
PNC BANK											
Mailing Address	PO BOX 609			12	31	2020	\$		24.82		
City PITTSBURGH State Zip Code (Plus 4)			Descript	ion of Exp	enditure						
PA 15230			ACCOU	NT ANALYS	SIS CHAR	GE					
To Whom Paid			МО	DAY	YEAR						
PNC BANK					, _, ., .,						
Mailing Address	PO BOX 609			11	30	2020	\$		29.23		
City PITTSBURGH State Zip Code (Plus 4)			Descript	ion of Exp	enditure						
		PA	15230	ACCOUNT ANALYSIS CHARGE							

PAGE 14

		PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.	\$	5,677.52

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>11/24/2020</u> To:		12/31/2020			
<u> </u>					DATE Outstanding Balance of Debt			
Name of Creditor UFCW LOCAL 1776				мо	DAY	YEAR		
Mailing Address 3031-A WALTON RD STE 201				5	6	2014	 \$	30,000.00
City PLYMOUTH MEETING State Zip Code (Plus 4) Description of Debt								
PA 19462-0000 LOAN TO COMITTEE								
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL	
						\$	30,000.00	