### **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 9600	)334				port ed B		CANDI	DATE		СОМ	1ITTEE		LOB	BYIST	<b>✓</b>	
Name of Filing C	ommittee, Candid	ate or L	obbyist:		TAM	MARA	A STIN	NE									
Street Address:	212 N. 3RD S	ST. STE	203														
City:	HARRISBURG							State:	PA			Zip Cod	le: 17	7101			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE	-	2.	30 DA PRIMA		POST-	3. <b>X</b>		AMENDM REPORT?		Yes	No	•	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	≣-	5.	30 DA ELECT		POST-	6.		TERMINA REPORT?		Yes	No		<b>/</b>
report type)	ANNUAL REPORT	7.	<b>Year</b> 2000					IG METHO				PAPER		<b>\</b>	DISKE	TTE	
Name of Office S	ought by Candida	te:	•		-			DATE 0	F ELE	CTIO	N	District Number	Office Code	Pai	ty Code	Coun	
	,							МО	DAY	YE	AR	reamber	couc			couc	
								11		7	2000		(SEE IN	STRUCTI	ONS FOR O	ODES)	)
	Receipts and	МО	DAY	YEAR	ł			МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
Expenditures	irom:		1 1		1	Т	0	4	7	24	2000						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$				0.00						
B. Total Moneta	ary Contributions	And Rec	eipts (From	Sche	dule	e I)	\$				0.00						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$				0.00						
D. Total Expend	ditures (From Sch	edule II	I)				\$			3,3	00.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C	)			\$			(3,30	0.00)						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	hedu	le II	I)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$				0.00			1			
				AFF	IDA	AVI	T SE	CTION									
PART I - If this is	a Committee rep	ort, trea	surer sign h	ere. I	If th	nis is	a Can	didate re	eport, c	candio	late sig	ın here.					
I swear (or affirm) correct and comple	that this report, inc ete.	luding the	attached sche	edules	s file	ed on	paper (	or by elect	ronic m	edium,	, are to t	he best o	f my kno	wledge	and belie	ef , tru	ue.
Sworn to and subs	cribed before me thi day of	S	20							s	ignature	of Perso	n Submit	ting Re	ort		_
	Signatu	ıre					-					Prin	ted Name	e			-
My Commission Ex	rpires						_					Emai	il				
	МО	D	AY	YR					Are	ea Cod	e	Daytim	e Telepl	none Nu	mber		
Part II- If this is	a report of a can	didate's	authorized C	Comn	nitte	ee, C	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of red.	ny knowle	edge and belief	f this	poli	itical	commi	ittee has n	ot viola	ted an	y provis	ions of the	e act of J	une 3,1	937 (P.L	. 1333	3,
Sworn to and subsc	ribed before me this										s	ignature o	of Candid	ate			-
-	day of						-					Printe	d Name				-
	Signature						-										_
My Commission Exp	ires											Emai	II				
	мо	D	AY	YR	1		-		Area	Code		Da	aytime T	elephor	e Numb	er	-

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting Period		
TAMARA STINE	From:	To:	4/24/2000
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)		\$	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	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		\$	0.00

#### **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 C	andidate	R	eporting	Period			
		Fi	rom:		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.

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 Committe	ee or Candidate		Rep	orting P	eriod			
			Froi	m:		To	<b>)</b> :	
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	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				
			From:			То:		
				DA	TE		P	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.0
Mailing Address							<b>-</b>   \$	0.0
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule I, Detailed Sun	nmary 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	<b>o</b> :	
				D	ATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR	\$	0.00
Mailing Address							1	
City	State	Zip Code (Plu	s 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip C	Code (Plus 4)
Enter Grand Total of Part C on Schee	dule I, Detailed Su	ımmary 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 Candidate		Report	ing Peri	od			
			From:			То:		
		•		D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	ıs 4)					
Receipt Description	<u>'</u>	<u>'</u>			•			
Futor Curred Total of Bout	For Cabadula I Batailad	I Comment Page Co		4				PAGE TOTAL
Enter Grand Total of Part	E on Schedule 1, Detailed	Summary Page, Se	ection	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 Period		
TAMARA STINE	From:	To:	<u>4/24/2000</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS F	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	TF)		
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	g Period				
			From:			To:		
				DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address		_				<b> </b>		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:		•	•			•		
Enter Grand Total of Part F on Sche Section 2.	dule II, In-Kind (	Contributions Detai	iled Sum	mary Pag	je,		PAGE TOTAL	
						\$	(	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	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 Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period		
TAMARA STINE	From	То:	<u>4/24/2000</u>

				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
FRIENDS OF RON RAYMOND			МО	DAI	ILAK		
Mailing Address			3	21	2000	\$	250.00
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
			POLITIO	CAL CONTR	NIB		
To Whom Paid			МО	DAY	YEAR		
COM TO ELECT DAN CLARK					7-7.11		
Mailing Address			3	21	2000	\$	250.00
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
			POL CO	NTRIB			
To Whom Paid			МО	DAY	YEAR		
COM TO ELECT DAVE MAYUNIO	CH		1-10		I Z/IIX		
Mailing Address			3	21	2000	\$	200.00
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
			POL CO	NT			
To Whom Paid			МО	DAY	YEAR		
FRIENDS OF JOHN FICHTER							
Mailing Address			3	27	2000	\$	250.00
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
			POL CO	NT			
To Whom Paid			мо	DAY	YEAR		
DEM STATE SEN CAMP COM			М		ILAK		
Mailing Address			4	10	2000	\$	500.00
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
			POL CO	NTRIBUTIO	ON		
To Whom Paid			МО	DAY	YEAR		
COTMAN FOR STATE SENATE (	СОМ		140		ILAK		
Mailing Address			4	10	2000	\$	250.00
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	I	
			POL CO	NTRIBUTIO	ON		

							PAGE 12
To Whom Paid				DAY	YEAR		
LEN GRAPPO FOR ST REP			МО		ILAN		
Mailing Address			4	10	2000	\$	200.00
City	State	Description of Expenditure					
To Whom Paid			МО	DAY	YEAR		
CITIZENS FOR SAYLOR							
Mailing Address			4	17	2000	\$	200.00
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
			POLITIO	CAL CONTR	RIBUTION	l	
To Whom Paid			МО	DAY	YEAR		
FRIENDS OF RON MAISICO							
Mailing Address			4	17	2000	\$	200.00
City	State	Zip Code (Plus 4)	Description of Expenditure				
			POLITIO	CAL CONTR	RIBUTION	l	
To Whom Paid			мо	DAY	YEAR		
PEOPLE WITH HART			М		ILAK		
Mailing Address			4	18	2000	\$	500.00
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
			POLITICAL CONTRIB				
To Whom Paid			МО	DAY	YEAR		
COM TO RE ELECT WOZNIAK			М		ILAK		
Mailing Address			4	25	2000	\$	250.00
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
To Whom Paid			МО	DAY	YEAR		
FRIENDS OF BILL ADOLPH							
Mailing Address			4	25	2000	\$	250.00
City	State	Zip Code (Plus 4)	Description of Expenditure				
			POLITIO	CAL CONTR	RIBUTION	<u> </u>	
Enter Grand Total of Expe	nditures on Page 1. Po	nort Cover Page Ttem D					PAGE TOTAL
Enter Grand Total of Exper	iditales on raye 1, Re	port cover Page, Item D	·•			\$	3,300.00