# **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 :	i <b>on</b> 9600	334			Repo Filed		:	CANDI	DATE		СОМІ	<b>1ITTEE</b>		LOB	BYIST	✓
Name of Filing C	Committee, Candid	ate or Lo	bbyist:		STINE	Е, Т/	ΑΜΑ	RA MCKI	NNEY							-
Street Address:	212 N. 3RD S	T. STE 2	203													
City:	HARRISBURG							State: PA Zip Code:				<b>le:</b> 17	<b>e:</b> 17101-0000			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.								AMENDM REPORT		Yes	No	, 🔨		
(place X to the right of	6TH TUESDAY PRE-ELECTION						0 DA		POST-	6.		TERMINA REPORT		Yes	No	° <b>∀</b>
report type)	ANNUAL REPORT	7.	<b>Year</b> 2021					IG METHO				PAPER		$\checkmark$	DISK	TTE
Name of Office S	L Sought by Candidat	te:						DATE O	F ELEC	CTIO	N	District Number	Office Code	Par	ty Code	County
	··· <b>·</b> ····							мо	DAY	YE	AR	Number	Code			leone
								11		2	2021		(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR	2			мо	DAY	YE	AR	FO	R OFFIC	e use	ONLY	
Expenditures	s from:		6 8	2	021	тс	)	9	1	.3	2021					
A. Amount Bro	ught Forward Fron	n Last Re	eport				\$		7		0.00	]				
B. Total Monet	ary Contributions	And Rece	ipts (From	Sche	dule I	)	\$				0.00					
C. Total Funds	Available (Sum Of	Lines A	and B)				\$				0.00					
D. Total Expen	ditures (From Sch	edule III	)				\$			2,5	00.00	1				
E. Ending Cash	Balance (Subtract	t Line D I	rom Line	C)			\$		(	(2,50	0.00)					
F. Value Of In-	Kind Contributions	s Receive	d (From S	chedu	le II)		\$				0.00					
G. Unpaid Debt	ts And Obligations	(From S	chedule IV	)			\$				0.00					
				AFF	IDA	/IT	SE	CTION								
PART I - If this is	s a Committee rep	ort, treas	urer sign	here. I	If this	is a	Can	ndidate re	eport, c	andio	late sig	yn here.				
I swear (or affirm) correct and comple	) that this report, incl ete.	uding the	attached scl	hedules	s filed o	on pa	aper	or by elect	ronic me	dium	, are to f	the best o	f my know	/ledge	and bel	ef , true
Sworn to and subs	cribed before me this day of	5	20							s	ignature	e of Perso	n Submitt	ing Rep	port	
	Signatu	re				_						Prin	ted Name			
My Commission Ex	2											Ema	il			
	мо	DA	Y	YR					Are	a Cod	e	Daytim	e Teleph	one Nu	mber	
Part II- If this is	a report of a cand	didate's a	uthorized	Comn	nittee,	Car	ndida	ate shall	sign he	re.						
I swear (or affirm) No 320) as amendo	that to the best of n ed.	ny knowle	dge and beli	ef this	politic	al c	ommi	ittee has n	ot violat	ed an	y provis	ions of th	e act of Ju	ine 3,1	937 (P.I	1333,
Sworn to and subso	ribed before me this										s	ignature o	of Candida	te		
	day of 		20									Printe	d Name			
	Signature															
My Commission Exp	bires											Ema	il			
	мо	DA	Y	YR					Area (	Code		Da	aytime Te	lephor	ne Numb	er

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** From: <u>6/8/2021</u> **To:** STINE, TAMARA MCKINNEY <u>9/13/2021</u> 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 0.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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# 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 Period					
	From:							
		·		DATE			AMOUNT	
Full Name of Contributing Com	nittee		мо	DAY	YEAR			
Mailing Address						\$	0.00	
City State Zip Code (Plus 4)								
						Г	PAGE TOTAL	

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

0.00

\$

PART B 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 Candidat	e			orting P	eriod	_		
			Fro	m:		Тс	):	
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						
								PAGE TOTAL
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 Candidate			Reporting	g Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Comm	nittee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C or	n Schedule I, Detaile	ed Summary Pa	age, Sectio	n 3.			\$	0.00

# 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	Reporting Period	
	From:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

## 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			Report	ting Perio	bd			
			From:			To:		
			1	D	ATE		AMOUNT	-
Full Name				мо	DAY	YEAR		
Mailing Address							\$ ;	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description	I					1		
Entoy Cyand Tatal of Days 5	on Schodulo I. Dotailed		Continu	4			PAGE TO	TAL
Enter Grand Total of Part E	on Schedule 1, Detailed	i Summary Page,	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 Period		
STINE, TAMARA MCKINNEY	From:	<u>6/8/2021</u> <b>То:</b>	<u>9/13/2021</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	ΓF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, 1		\$	0.00

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

## VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate R			Reporting	Period			
	From:			То:			
				DATE		АМС	DUNT
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address	Mailing Address					\$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detail Section 2.			iled Sum	mary Pag	je,	PAGE	TOTAL
					4	5	0.00

### SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate				Rej	porting P	eriod				
					Fro	From: To:				
					I		DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(P	Plus 4)						
Employer of Contributor					Occupat	tion				
Employer Mailing Address/Principal Place of City State Business				Zip 4)	Code(Plus	Descri	otion of	Contribution		

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed	PAGE TOTAL
Summary Page, Section 3.	0.00

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate					Reporting Period						
STINE, TAMARA MCKINNEY	From	<u>6/8</u>	То:	<u>9/13/2021</u>								
	DATE AMO											
To Whom Paid Com to Elect Jim Brewster				DAY	YEAR							
Mailing Address unknown			7	12	2021	\$	2,500.00					
CityHarrisburgStateZip Code (Plus 4)PA17110				<b>Description of Expenditure</b> political contribution								
							PAGE TOTAL					
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	2,500.00					