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 201	0095				port ed B		CANI	DID	ATE		СОММ	4ITTEE	✓	LOBE	BYIST		
Name of Filing C	Committee, Candi	date or L	obbyist:		DAV	√IS,	TINA	FRIENI	DS	OF								
Street Address:	505 GRANT	AVE																
City:	CROYDON							State:		PA			Zip Cod	le: 19	9021			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY I PRIMARY	PRE-	-	2.	30 DA PRIMA		PC	OST-	3.		AMENDM REPORT?		Yes	No	•	/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- !	5.	30 DA ELECT		PC	OST-	6. X		TERMINA REPORT		Yes	No	•	/
report type)	ANNUAL REPORT	7.	Year 2021					IG MET CHECK					PAPER		/	DISKE	TTE	
Name of Office S	Sought by Candida	nte:	•					DATE	OF	ELE	СТІС	DN	District Number	Office Code	Par	ty Code	Coun	
								МО		DAY	YI	EAR	-1	1	DEM	1	09	
								1	11		2	2021		(SEE IN	STRUCTIO	ONS FOR O	ODES)	
	Receipts and	МО	DAY YI	EAR			'	МО		DAY	Y	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	s from:		10 19	20	021	Т	0	1	11	2	22	2021						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$		-		91,	887.48						
B. Total Moneta	ary Contributions	And Rec	eipts (From S	che	dule	e I)	\$					32.58						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$				91,	920.06						
D. Total Expend	ditures (From Sch	edule II	I)				\$				16,3	301.56						
E. Ending Cash	Balance (Subtra	t Line D	From Line C)				\$				75,6	18.50						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sche	edul	le II	I)	\$					0.00						
G. Unpaid Debt	s And Obligation	(From S	Schedule IV)				\$					0.00			'			
			Д	۱FF	IDA	AVI	T SE	CTIO	N									
PART I - If this is	s a Committee rep	ort, trea	surer sign hei	re. 1	if th	nis is	a Can	didate	rep	port, c	andi	date sig	ın here.					
I swear (or affirm) correct and complete) that this report, inc ete.	luding the	e attached sched	lules	file	d on	paper o	or by ele	ectro	onic me	edium	, are to t	he best o	f my kno	wledge a	and belie	ef , tru	ıe
Sworn to and subs	cribed before me th day of	is	20						-		5	Signature	of Perso	n Submit	ting Rep	ort		_
	Signat	ıra					- -		-				Prin	ted Name	e			-
My Commission Ex	_								_				Ema	il				-
	мо	D	AY	YR					_	Are	a Co	de	Daytim	e Teleph	none Nu	mber		
Part II- If this is	a report of a can	didate's	authorized Co	mm	itte	ee, C	andida	ate sha	ıll s	ign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and belief	this	polit	tical	commi	ittee has	s no	t violat	ed ar	ıy provisi	ions of the	e act of J	une 3,19	937 (P.L	. 1333	3,
Sworn to and subsc	ribed before me this	i										Si	ignature o	of Candid	ate			-
	day of 						-		-				Drint-	d Name				-
	Signature						-											_
My Commission Exp	-								_			_	Ema	il	_			
	МО	D	AY	YR			•		•	Area	Code		Da	ytime T	elephon	e Numb	er	·

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
DAVIS, TINA FRIENDS OF	From:	10/19/20	2 <u>1</u> To:	11/22/2021
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)	\$	32.58
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			\$	32.58

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize on with an aggregate val							
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			Fr	om:		То	:	
					DATE			AMOUNT
Full Name of Contribution	ng Committee			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.

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 o	r Candidate		Rep Fro	oorting P	eriod	To	o:	
			l		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			
			Fron	n:		To) :	
				D	ATE		ı	AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Co	de (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			l	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 Perio	d			
DAVIS, TINA FRIENDS OF			From:		10/19/202	<u>1</u> To:	11/22/2021	
				D	ATE		AMOUNT	
Full Name POLICE AND FIRE FEDERAL CREDIT UN	IION			мо	DAY	YEAR		
Mailing Address 901 ARCH STREET							\$	7.58
City PHILADELPHIA	State	Zip Code (Plus 4)	10	31	2021		
	PA	19107						
Receipt Description DIVIDENDS								
Full Name MERCH DEP ID				МО	DAY	YEAR		
Mailing Address TR # 07100028009	3298						\$ 2	5.00
City CROYDON	State	Zip Code (Plus 4)	11	1	2021		
	PA	19021						
Receipt Description MERCHANT FE	ES	•					•	

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

PAGE TOTAL \$32.58

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 Peri	od	
DAVIS, TINA FRIENDS OF	From:	<u>10/19/2021</u> To:	11/22/2021
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, 1		\$	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:			To:	
				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	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			
					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 C	andidate		Reporti	ng Period			
DAVIS, TINA FRIENDS OF			From	10/19	9/2021	То:	11/22/2021
				DATE			AMOUNT
To Whom Paid MARIA MCLAUGHLIN FOR SUPI	REME COURT		мо	DAY	YEAR		
Mailing Address PO BOX 159	943		10	28	2021	\$	1,000.00
City PHILADELPHIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	19103	DONAT				
To Whom Paid BUCKS UNITED			МО	DAY	YEAR		
Mailing Address 346 STRAT	TON COURT		10	19	2021	\$	1,000.00
City LANGHORNE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	l	
	PA	19047	DONAT				
To Whom Paid BUCKS UNITED			МО	DAY	YEAR		
Mailing Address 346 STRAT	TON COURT		10	22	2021	\$	1,500.00
City LANGHORNE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	l	
	PA	19047	DONAT				
To Whom Paid HDCC	•		мо	DAY	YEAR		
Mailing Address 205 STATE	STREET		10	29	2021	\$	10,000.00
City HARRISBURG	State	Zip Code (Plus 4)	Descri	tion of Exp	enditure	l .	
	PA	17101	DONAT	-			
To Whom Paid ROYERS FLOWERS AND GIFTS	·		МО	DAY	YEAR		
Mailing Address 407 W LAN	CASTER AVENUE		11	17	2021	\$	127.16
City SHILLINGTON	State	Zip Code (Plus 4)	Descri	l tion of F			
City SHILLINGTON			Descrip	otion of Exp	penaiture		

19607

FLOWERS

PA

To Whom Paid EDGELEY FIRE COMPANY	МО	DAY	YEAR		
Mailing Address 1200 EDGELEY ROAD	10	19	2021	\$	250.00
City LEVITTOWN State Zip Code (Plus 4) PA 19057	Descrip DONAT	otion of Exp	penditure		
To Whom Paid FRIENDS OF PROKOPIAK	мо	DAY	YEAR		
Mailing Address 32 BUTTERFLY LANE	10	19	2021	\$	250.00
City LEVITTOWN PA 2ip Code (Plus 4) 19054	Descrip DONAT	otion of Exp	penditure		
To Whom Paid GAINEY FOR MAYOR	мо	DAY	YEAR		
Mailing Address PO BOX 82620	10	19	2021	\$	250.00
City PITTSBURGH State Zip Code (Plus 4) PA 15218	Descrip DONAT	otion of Exp	penditure		
To Whom Paid BRISTOL BOROUGH PARADE	МО	DAY	YEAR		
	мо 10	DAY 22	YEAR 2021	\$	100.00
BRISTOL BOROUGH PARADE	10	22 Otion of Exp	2021		100.00
BRISTOL BOROUGH PARADE Mailing Address 250 POND STREET City BRISTOL State Zip Code (Plus 4)	10 Descrip	22 Otion of Exp	2021		100.00
BRISTOL BOROUGH PARADE Mailing Address 250 POND STREET City BRISTOL State Zip Code (Plus 4) 19007 To Whom Paid	10 Descrip DONAT	22 Dition of Exp	2021 penditure		100.00
BRISTOL BOROUGH PARADE Mailing Address 250 POND STREET City BRISTOL State Zip Code (Plus 4) 19007 To Whom Paid NHSIMB	Description DONAT MO Description Descrip	22 otion of Exp ION DAY	2021 Penditure YEAR 2021 Denditure	\$ BANDS	100.00
Mailing Address 250 POND STREET City BRISTOL State PA 19007 To Whom Paid NHSIMB Mailing Address 2001 OLD LINCOLN HIGHWAY City LANGHORNE State Zip Code (Plus 4) 1907 Zip Code (Plus 4) 19007	Description DONAT MO Description Descrip	22 Dation of Exp TON DAY 29 Dation of Exp	2021 Penditure YEAR 2021 Denditure	\$ BANDS	100.00
Mailing Address 250 POND STREET City BRISTOL PA To Whom Paid NHSIMB Mailing Address 2001 OLD LINCOLN HIGHWAY City LANGHORNE PA 2ip Code (Plus 4) 19007 State PA 2ip Code (Plus 4) 19047 To Whom Paid NHSIMB	Description 10 Description 10 Description 1/2 PAGE	22 ption of Exp ION DAY 29 ption of Exp GE AD KAL	2021 Penditure YEAR 2021 Penditure EIDOSCO	\$ BANDS	100.00

							PAGE 13
To Whom Paid GAINEY FOR MAYOR				DAY	YEAR		
Mailing Address 6401 PENN AVENUE			10	29	2021	\$	250.00
City PITTSBURGH	State PA	Zip Code (Plus 4) 15206	Description of Expenditure DONATION				
To Whom Paid ACTBLUE*GINAHCURRY			МО	DAY	YEAR		
Mailing Address PO BOX 1241			10	30	2021	\$	250.00
City LANSDOWNE	State PA	Zip Code (Plus 4) 19050	Description of Expenditure DONATION				
To Whom Paid MEMBER FEES			МО	DAY	YEAR		
Mailing Address TRACE NMBER 071000280093298			11	1	2021	\$	21.20
City CROYDON	State PA	Zip Code (Plus 4) 19021	Description of Expenditure MEMBER FEES				
To Whom Paid NGP VAN			мо	DAY	YEAR		
Mailing Address 655 15TH ST NW, SUITE 650			11	3	2021	\$	1,003.20
City WASHINGTON	State DC	Zip Code (Plus 4) 20005	Description of Expenditure ONLINE FEES				
To Whom Paid YOBC			МО	DAY	YEAR		
Mailing Address 111 PHEASANT RUN			11	22	2021	\$	100.00
City NEWTOWN	State PA	Zip Code (Plus 4) 18940	Description of Expenditure DONATION				
Enter Grand Total of Expe	nditures on Page 1. Pon	ort Cover Page Item D					PAGE TOTAL
Enter Grand Total Of Expe	nantures on raye 1, kept	on cover raye, Item D	•			\$	16,301.56