

# Campaign Finance Report

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

Filer Identification Number : 2010095		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: DAVIS, TINA FRIENDS OF											
Street Address: 505 GRANT AVE											
City: CROYDON				State: PA		Zip Code: 19021					
TYPE OF REPORT  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No <input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6. X	TERMINATION REPORT?	Yes	No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2023	FILING METHOD ( ) CHECK ONE			PAPER <input checked="" type="checkbox"/>	DISKETTE			
Name of Office Sought by Candidate:					DATE OF ELECTION			District Number	Office Code	Party Code	County Code
					MO	DAY	YEAR	-1		DEM	09
					11	7	2023	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		10	24	2023		11	27	2023			
A. Amount Brought Forward From Last Report					\$ 69,833.11						
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 2,285.81						
C. Total Funds Available (Sum Of Lines A and B)					\$ 72,118.92						
D. Total Expenditures (From Schedule III)					\$ 22,629.01						
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 49,489.91						
F. Value Of In-Kind Contributions Received (From Schedule II)					\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)					\$ 0.00						

## AFFIDAVIT SECTION

**PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.**

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.**

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
**Detailed Summary Page**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
DAVIS, TINA FRIENDS OF	From: <u>10/24/2023</u> To: <u>11/27/2023</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 0.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 0.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 2,280.00
<b>All Other Contributions (Part D)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 2,280.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 5.81

<b>Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)</b>	\$ 2,285.81
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# 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.**

<b>Name of Filing Committee or Candidate</b>  DAVIS, TINA FRIENDS OF	<b>Reporting Period</b>  <b>From:</b> <u>10/24/2023</u> <b>To:</b> <u>11/27/2023</u>
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				DATE			AMOUNT	
Full Name of Contributing Committee INDENDENCE BLUE CROSS PAC				MO	DAY	YEAR	\$ 500.00	
Mailing Address 1901 MARKET STREET				11	6	2023		
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103						
Full Name of Contributing Committee PGG-STATE				MO	DAY	YEAR	\$ 500.00	
Mailing Address 2 NORTH NINTH STREET				11	6	2023		
City ALLENTOWN	State PA	Zip Code (Plus 4) 18101						
Full Name of Contributing Committee BRISTOL TOWNSHIP DEMOCRATIC COMMITTEE				MO	DAY	YEAR	\$ 780.00	
Mailing Address 2501 BATH ROAD #1				11	7	2023		
City LEVITTOWN	State PA	Zip Code (Plus 4) 19007						
Full Name of Contributing Committee JOHNSON & JOHNSON PAC				MO	DAY	YEAR	\$ 500.00	
Mailing Address 1350 I ST, NW, STE 1210				11	27	2023		
City WASHINGTON	State DC	Zip Code (Plus 4) 20005						

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

<b>PAGE TOTAL</b>
\$ 2,280.00

**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: <span style="float: right;">To:</span>

				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)		

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

<b>PAGE TOTAL</b>
\$ 0.00

## 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.**

<b>Name of Filing Committee or Candidate</b>  DAVIS, TINA FRIENDS OF	<b>Reporting Period</b>  From: <u>10/24/2023</u> To: <u>11/27/2023</u>
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				DATE		AMOUNT	
Full Name				MO	DAY	YEAR	\$ 5.81
POLICE AND FIRE FEDERAL CREDIT UNION				10	31	2023	
Mailing Address							
901 ARCH STREET							
City	State		Zip Code (Plus 4)	10	31	2023	
PHILADELPHIA	PA		19107				
Receipt Description							
DIVIDENDS							

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

PAGE TOTAL	
\$	5.81

## 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
DAVIS, TINA FRIENDS OF		From: <u>10/24/2023</u> To: <u>11/27/2023</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)		\$	0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)		\$	0.00
<b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period (3)		\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)		\$	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: <span style="float: right;">To:</span>
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						<b>PAGE TOTAL</b>  \$ 0.00

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

Name of Filing Committee or Candidate	Reporting Period
	From: To:

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
DAVIS, TINA FRIENDS OF	From <u>10/24/2023</u> To: <u>11/27/2023</u>

DATE				AMOUNT		
To Whom Paid BUCKS COUNTY AFL			MO	DAY	YEAR	\$ 250.00
Mailing Address 3031 WALTON RD BLDG C STE 300			10	24	2023	
City PLYMOUTH MEETING	State PA	Zip Code (Plus 4) 19462	Description of Expenditure DINNER			
To Whom Paid TMA BUCKS			MO	DAY	YEAR	\$ 200.00
Mailing Address 7 NESHAMINY INTERPLEX DR #102			10	24	2023	
City FEASTERVILLE-TREVOSE	State PA	Zip Code (Plus 4) 19053	Description of Expenditure MEMBERSHIP			
To Whom Paid CALVARY			MO	DAY	YEAR	\$ 100.00
Mailing Address 150 E BUTLER AVE			10	30	2023	
City CHALFONT	State PA	Zip Code (Plus 4) 18914	Description of Expenditure TRUNK OR TREAT			
To Whom Paid FRIENDS OF TIMIKA LANE			MO	DAY	YEAR	\$ 275.00
Mailing Address PO BOX 9190			10	30	2023	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19139	Description of Expenditure DONATION			
To Whom Paid BUCKS UNITED			MO	DAY	YEAR	\$ 500.00
Mailing Address 346 STRATTON COURT			10	30	2023	
City LANGHORNE	State PA	Zip Code (Plus 4) 19047	Description of Expenditure DONATION			

To Whom Paid MERCHANT FEES ID1246825337			MO	DAY	YEAR	\$ 26.27
Mailing Address    TR NUMBER 071000283470553			11	2	2023	
City    CROYDON	State PA	Zip Code (Plus 4) 19021	Description of Expenditure MISC EXPENSE			

To Whom Paid FTD*BIRD OF PARADISE			MO	DAY	YEAR	\$ 102.81
Mailing Address    231 MILL STREET			11	3	2023	
City    BRISTOL	State PA	Zip Code (Plus 4) 19007	Description of Expenditure FLOWERS FOR REP. HOGAN'S FATHER			

To Whom Paid NGP VAN			MO	DAY	YEAR	\$ 1,017.60
Mailing Address    1101 15TH STREET NW STE 500			11	3	2023	
City    WASHINGTON	State DC	Zip Code (Plus 4) 20005	Description of Expenditure INTERNET FEES			

To Whom Paid TMA BUCKS			MO	DAY	YEAR	\$ 100.00
Mailing Address    7 NESHAMINY INTERPLEX DR #102			11	6	2023	
City    FEASTERVILLE-TREVOSE	State PA	Zip Code (Plus 4) 19053	Description of Expenditure DONATION			

To Whom Paid SAM'S CLUB			MO	DAY	YEAR	\$ 188.02
Mailing Address    1717 E OLD LINCOLN HWY			11	7	2023	
City    LANGHORNE	State PA	Zip Code (Plus 4) 19047	Description of Expenditure ELECTION DAY EXPENSES			

To Whom Paid EDWARD HAGGERTY			MO	DAY	YEAR	\$ 600.00
Mailing Address    10 CANAL STREET			11	8	2023	
City    LEVITTOWN	State PA	Zip Code (Plus 4) 19046	Description of Expenditure WEBSITE			

To Whom Paid ST THOMAS AQUINAS			MO	DAY	YEAR	\$ 250.00
Mailing Address 601 BRISTOL PIKE			11	8	2023	
City CROYDON	State PA	Zip Code (Plus 4) 19021	Description of Expenditure BAZAAR			

To Whom Paid HOAGIE EXPRESS			MO	DAY	YEAR	\$ 482.65
Mailing Address 5426 BRISTOL EMILIE ROAD			11	8	2023	
City LEVITTOWN	State PA	Zip Code (Plus 4) 19057	Description of Expenditure ELECTION DAY			

To Whom Paid HOAGIE EXPRESS			MO	DAY	YEAR	\$ 1,559.30
Mailing Address 5426 BRISTOL EMILIE ROAD			11	8	2023	
City LEVITTOWN	State PA	Zip Code (Plus 4) 19057	Description of Expenditure ELECTION DAY			

To Whom Paid BRISTOL FALL CLASSIC			MO	DAY	YEAR	\$ 250.00
Mailing Address BRISTOL BORO PUBLIC WORKS 92 MAPLE BEACH ROAD			11	10	2023	
City BRISTOL	State PA	Zip Code (Plus 4) 19007	Description of Expenditure DONATION			

To Whom Paid BRISTOL TOWNSHIP SENIOR CENTER			MO	DAY	YEAR	\$ 350.00
Mailing Address 2501 BATH ROAD			11	15	2023	
City BRISTOL	State PA	Zip Code (Plus 4) 19007	Description of Expenditure DONATION			

To Whom Paid MICHELLE SELLITTO			MO	DAY	YEAR	\$ 1,398.60
Mailing Address 1130 ALEXANDRA LANE APT 107			11	15	2023	
City HARRISBURG	State PA	Zip Code (Plus 4) 17110	Description of Expenditure OCT FUNDRAISER			

<b>To Whom Paid</b> POSTER MY WALL			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 250 MILL LLC EL CAMINO REAL SUITE 105			11	17	2023	
<b>City</b> CARLSBAD	<b>State</b> CA	<b>Zip Code (Plus 4)</b> 92009	<b>Description of Expenditure</b> FLYER FOR FUNDRAISER			

  

<b>To Whom Paid</b> UNION LEAGUE			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 800 RIDGE PIKE			11	20	2023	
<b>City</b> LAFAYETTE HILLS	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19444	<b>Description of Expenditure</b> DEPOSIT FOR GOLF EVENT			

  

<b>To Whom Paid</b> WALMART 2068			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 180 LEVITTOWN CENTER			11	27	2023	
<b>City</b> LEVITTOWN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19055	<b>Description of Expenditure</b> CANDY FOR 2 PARADES			

  

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 22,629.01

