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 2010	095				port ed B		CAND	IDATE		СОМ	4ITTEE	✓	LOBE	YIST	
Name of Filing C	ommittee, Candid	ate or L	obbyist:	•	DA۱	VIS,	TINA	FRIEND	S OF			•	-			
Street Address:	505 GRANT A	VE														
City:	CROYDON							State:	PA			Zip Cod	le: 19	9021		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE- PRIMARY 2. 3C					Y ARY	POST- 3.			AMENDM REPORT		Yes	No	~
(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	~
report type)	ANNUAL REPORT	7. X	Year 2024					IG METH CHECK C				PAPER		/	DISKE.	TTE
Name of Office S	ought by Candida	te:						DATE (OF ELE	СТІО	N	District Number	Office Code	Part	ty Code	County Code
								мо	DAY	YE	AR	141		DEM		09
								11		5	2024		(SEE IN	STRUCTIO	NS FOR C	ODES)
	Receipts and	МО	DAY	/EAR	1			мо	DAY	YE	AR	FO	R OFFI	CE USE	ONLY	
Expenditures	from:		11 28	2	023	T	0	12	2	31	2023					
A. Amount Bro	ught Forward Froi	n Last R	eport				\$			49,4	189.91					
B. Total Moneta	ary Contributions	And Rec	eipts (From	Sche	dule	e I)	\$			5	08.50					
C. Total Funds Available (Sum Of Lines A and B)							\$			49,9	998.41					
D. Total Expenditures (From Schedule III)							\$			12,9	87.65					
E. Ending Cash Balance (Subtract Line D From Line C)							\$			37,0	10.76					
F. Value Of In-	Kind Contributions	Receiv	ed (From Sch	nedu	le I	I)	\$				0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)				\$				0.00			'		
				AFF	ΊD	AVI	T SE	CTION								
	a Committee rep	•	-						•							
correct and comple	that this report, incete.	uaing the	e attached sche	eaules	тие	ea on	paper o	or by elec	tronic m	eaium	, are to t	ne best o	т ту кпо	wieage a	ana belie	f, true
Sworn to and subs	cribed before me this day of	;	20							S	ignature	of Perso	n Submit	ting Rep	ort	
	Signatu	re					-					Prin	ted Name	e		
My Commission Ex	xpires						_					Ema	il			
	МО	D.	AY	YR					Ar	ea Cod	le	Daytim	e Telepi	none Nui	nber	
Part II- If this is	a report of a can	didate's	authorized C	omn	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 belief	this	poli	itical	commi	ittee has	not viola	ted an	y provisi	ions of th	e act of J	une 3,19	937 (P.L.	1333,
Sworn to and subsc	ribed before me this day of		20								Si	ignature o	of Candid	ate		
							-					Printe	d Name			
	Signature						-									
My Commission Exp	ires											Ema	il			
	МО	D	AY	YR			-		Area	Code		Da	aytime T	elephon	e Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

	-			
Name of Filing Committee or Candidate	Reporting	J Period		
DAVIS, TINA FRIENDS OF	From:	11/28/202	<u>23</u> To:	12/31/2023
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)			\$	500.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	500.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	Period	(4)	\$	8.50
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 Page			\$	508.50

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate val							
Name of Filing Committee or Candidate			Re	porting	Period			
			Fr	om:		То	:	
		•			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
	•	•		•	•	•	$\overline{}$	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 or Candidate				Reporting Period From: To:					
					DATE			AMOUNT	
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4)	1						

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 Candidate	Reporting P	Period					
DAVIS, TINA FRIENDS OF	From:	11/28/2023	То:	<u>12/31/2023</u>			

DATE AMOUNT

Full Name of Contributing Committee K&L GATES LLP	МО	DAY	YEAR			
Mailing Address 210 6TH AVE						\$ 500.00
City PITTSBURGH	State PA	Zip Code (Plus 4) 15222-2602	12	19	2023	

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

PAGE TOTAL 500.00

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					Reporting Period						
				Fro	m:		То):			
					D	ATE		AN	MOUNT		
Full Name of Contributor					мо	DAY	YEAR				
Mailing Address								\$	0.00		
City	State	Zi	p Code (Plus	4)							
Employer Name		•			Occupa	tion	•	•			
Employer Mailing Address/Principal Business	Place of		City		•	State		Zip Code	e (Plus 4)		
Enter Grand Total of Part C on S	chedule I, Deta	iled Sumr	mary Page,	Secti	on 3.			P	AGE 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:		<u>11/28/202</u>	<u>3</u> To:	12/31/202	<u>3</u>
				D	ATE		AMOUNT	
Full Name POLICE AND FIRE FEDERAL CREDIT UN	ION			МО	DAY	YEAR		
Mailing Address 901 ARCH STREET						2022	\$	4.88
City PHILADELPHIA	State PA	Zip Code (19107	Plus 4)	11	30	2023		
Receipt Description DIVIDENDS								
Full Name POLICE AND FIRE FEDERAL CREDIT UN	ION			МО	DAY	YEAR		
Mailing Address 901 ARCH STREET				10	2.1	2022	\$	3.62
City PHILADELPHIA	State PA	Zip Code (19107	Plus 4)	12	31	2023		
Receipt Description DIVIDENDS								

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

PAGE TOTAL \$8.50

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	
DAVIS, TINA FRIENDS OF	From:	<u>11/28/2023</u> To:	12/31/2023
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	R	
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 Candidate				Reporting Period					
			From:			То:			
				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 So	chedule II, In-Kir	nd Contributions Deta	iled Sun	nmary 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	Name of Filing Committee or Candidate				Reporting Period						
				Fro	om:		То:				
						DATE			AMOUNT		
Full Name of Contributor					мо	DAY	YEAR				
Mailing Address								\$	0.00		
City	State	Zip Code(Plus 4)									
Employer of Contributor					Occupa	tion					
Employer Mailing Address/Principal Plac Business	ce of Cit	ity	State		Zip 4)	Code(Plus	Descri	ption o	f Contribution		
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-K	Kind (Contributions De	etaile	ed				PAGE TOTAL 0.00		

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period					
DAVIS, TINA FRIENDS OF			From	From <u>11/28/2023</u> To:				
				DATE			AMOUNT	
To Whom Paid HDCC			мо	DAY	YEAR			
Mailing Address PO BOX 555			12	1	2023	\$	3,500.00	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108-0555	Description of Expenditure CONTRIBUTION					
To Whom Paid MERCHANT FEES ID 1246825337			мо	DAY	YEAR			
Mailing Address TR # 071000283103412			12	4	2023	\$	25.00	
City CROYDON	State PA		otion of Exp	enditure				
To Whom Paid ROLLING HARVEST FOOD			мо	DAY	YEAR			
Mailing Address PX BOX 693			12	8	2023	\$	250.00	
City NEW HOPE	State PA	Zip Code (Plus 4) 18938	Description of Expenditure DONATION					
To Whom Paid FRIENDS OF NATE DAVIDSON			мо	DAY	YEAR			
Mailing Address 23/17 N 7TH STDEET DO BOY 5/1/7			12	14	2023	_	250.00	

Mailing Address 2347 N 7TH STREET PO BOX 5447		12	14	2023	\$	250.00	
City HARRISBURG	State PA	Description of Expenditure DONATION					
To Whom Paid MALCOLM FOR PA		МО	DAY	YEAR			
Mailing Address PO BOX 3254		12	15	2023	\$	500.00	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19130	Description of Expenditure DONATION				

							AGE 12	
To Whom Paid POSTER MY WALL				DAY	YEAR			
Mailing Address 250 MILL LLC EL CA	Mailing Address 250 MILL LLC EL CAMINO REAL SUITE 105			17	2023	\$	9.95	
City CARLSBAD	State CA	Zip Code (Plus 4) 98009	Description of Expenditure FLYERS FOR FUNDRAISER					
To Whom Paid HILTON AND TOWERS			МО	DAY	YEAR			
Mailing Address 1 N 2ND STREET			12	18	2023	\$	90.00	
City HARRISBURG	HARRISBURG State PA 17101			Description of Expenditure CAMPAIGN DINNER				
To Whom Paid FRIENDS OF JARED SOLOMON				DAY	YEAR			
Mailing Address PO BOX 7522			12	.2 18 2023 \$ 50				
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19101	Description of Expenditure DONATION					
To Whom Paid CAFE ANTONIO			МО	DAY	YEAR			
Mailing Address 107 E TRENTON AV	E		12	19	2023	\$	23.32	
State Zip Code (Plus 4) PA 19067			Description of Expenditure LUNCH MEETING					
To Whom Paid MICHELLE SELLITO			МО	DAY	YEAR			
Mailing Address 1130 ALEXANDRA LANE APT 107								
Mailing Address 1130 ALEXANDRA L	ANE APT 107		12	20	2023	\$	2,737.50	
Mailing Address 1130 ALEXANDRA L City HARRISBURG	State PA	Zip Code (Plus 4) 17110	Descrip	20 Pition of Exp SBURG EVE	enditure	\$	2,737.50	
1130 ALLANDRA L	State		Descrip	tion of Exp	enditure	\$	2,737.50	
City HARRISBURG To Whom Paid	State PA		Descrip HARRIS	otion of Exp SBURG EVE	penditure ENT	\$	2,737.50	

To Whom Paid HDCC			мо	DAY	YEAR	
Mailing Address PO BOX 555			12	22	2023	\$ 5,000.00
City HARRISBURG	State PA	Zip Code (Plus 4) 17108-0555	1	otion of Exp IBUTION	enditure	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$ PAGE TOTAL 12,987.65