

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 : 9200098		Report Filed By :		CANDIDATE	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST				
Name of Filing Committee, Candidate or Lobbyist: TARTAGLIONE, CHRISTINE FRIENDS TO ELECT										
Street Address: PO BOX 28566										
City: PHILADELPHIA			State: PA		Zip Code: 19149					
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2. <input checked="" type="checkbox"/>	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2024	FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/>		DISKETTE <input type="checkbox"/>		
Name of Office Sought by Candidate:				DATE OF ELECTION			District Number	Office Code	Party Code	County Code
				MO	DAY	YEAR				
				11	5	2024	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY	
		1	1	2024	TO	4	8	2024		
A. Amount Brought Forward From Last Report				\$		191,085.46				
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		10,500.00				
C. Total Funds Available (Sum Of Lines A and B)				\$		201,585.46				
D. Total Expenditures (From Schedule III)				\$		23,606.35				
E. Ending Cash Balance (Subtract Line D From Line C)				\$		177,979.11				
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
 My Commission Expires _____
 MO DAY YR

 Signature of Person Submitting Report

 Printed Name

 Email

 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
 My Commission Expires _____
 MO DAY YR

 Signature of Candidate

 Printed Name

 Email

 Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
TARTAGLIONE, CHRISTINE FRIENDS TO ELECT	From: <u>1/1/2024</u> To: <u>4/8/2024</u>

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)	\$ 7,000.00
All Other Contributions (Part D)	\$ 3,500.00
TOTAL for the Reporting Period (3)	\$ 10,500.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 10,500.00
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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 Candidate	Reporting Period
	From: _____ To: _____
DATE AMOUNT	

Full Name of Contributing Committee	MO	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 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 Candidate	Reporting Period
	From: _____ To: _____

				DATE	AMOUNT
Full Name of Contributor					\$ 0.00
Mailing Address	MO	DAY	YEAR		
City	State	Zip Code (Plus 4)			

PAGE TOTAL
\$ 0.00

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

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
TARTAGLIONE, CHRISTINE FRIENDS TO ELECT	From: <u>1/1/2024</u> To: <u>4/8/2024</u>

			DATE			AMOUNT
Full Name of Contributing Committee	MO	DAY	YEAR			
WILLIG, WILLIAMS & DAVIDSON ATTORNEYS-AT-LAW PA OPERATING ACCOUNT	3	1	2024	\$ 1,500.00		
Mailing Address 1845 WALNUT STREET-24TH FLR						
City PHILADELPHIA State PA Zip Code (Plus 4) 19103						
PHILADELPHIA ASSOCIATION OF RETAIL DRUGGISTS PHILPAC	3	1	2024	\$ 500.00		
Mailing Address 2417 WELSH RD-SUITE21 BOX 342						
City PHILADELPHIA State PA Zip Code (Plus 4) 19114						
KLEINBARD LLC OPERATING ACCOUNT	3	1	2024	\$ 500.00		
Mailing Address 3 LOGAN SQUARE 1717 ARCH ST 5TH FLR						
City PHILADELPHIA State PA Zip Code (Plus 4) 19103						
UNITED HEALTH GROUP PAC	1	31	2024	\$ 1,000.00		
Mailing Address 680 BLAIR MILL ROAD						
City HORSHAM State PA Zip Code (Plus 4) 19044						
DEMOCRACY FUND	1	31	2024	\$ 1,000.00		
Mailing Address 208 N 3RD ST STE 310						
City HARRISBURG State PA Zip Code (Plus 4) 17101						
AFSCME COUNCIL 13 POL & LEG ACCT	1	31	2024	\$ 2,500.00		
Mailing Address 4031 EXECUTIVE PARK DRIVE						
City HARRISBURG State PA Zip Code (Plus 4) 17111						

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

PAGE TOTAL	
\$	7,000.00

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 TARTAGLIONE, CHRISTINE FRIENDS TO ELECT	Reporting Period From: <u>1/1/2024</u> To: <u>4/8/2024</u>
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				DATE			AMOUNT
Full Name of Contributor	MO	DAY	YEAR				
HECTOR AYALA				\$ 1,000.00			
Mailing Address REQUESTED							
City PHILADELPHIA	3	1	2024				
State PA							
Zip Code (Plus 4) 19134							
Employer Name HISPANIC COMMUNITY COUNSELING SERVICES				Occupation CEO			
Employer Mailing Address/Principal Place of Business 3255 KENSINGTON AVE				City PHILADELPHIA		State PA	Zip Code (Plus 4) 19134
S. DAVID FINEMAN				\$ 1,000.00			
Mailing Address REQUESTED							
City REQUESTED	3	1	2024				
State PA							
Zip Code (Plus 4) 19103							
Employer Name 1735 MARKET ST				Occupation ATTORNEY			
Employer Mailing Address/Principal Place of Business 1735 MARKET ST				City PHILADELPHIA		State PA	Zip Code (Plus 4) 19103
DAVID L HYMAN & FARAH JIMINEZ				\$ 500.00			
Mailing Address 413 W MERMAID LANE							
City PHILADELPHIA	3	1	2024				
State PA							
Zip Code (Plus 4) 19118							
Employer Name KLEINBARD LLC				Occupation ATTORNEY			
Employer Mailing Address/Principal Place of Business 1717 ARCH ST 5TH FLR				City PHILADELPHIA		State PA	Zip Code (Plus 4) 19118
DOMINICK A. CIPOLLINI, JR. ITF				\$ 1,000.00			
Mailing Address REQUESTED							
City CHELTENHAM	3	1	2024				
State PA							
Zip Code (Plus 4) 19012							
Employer Name KEYSTONE OUTDOOR ADVERTISING CO., INC				Occupation OWNER			
Employer Mailing Address/Principal Place of Business P.O.BOX 202				City CHELTENHAM		State PA	Zip Code (Plus 4) 19012

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

PAGE TOTAL
\$ 3,500.00

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.

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

			DATE	AMOUNT
Full Name	MO	DAY	YEAR	\$
				0.00
Mailing Address				
City	State	Zip Code (Plus 4)		
Receipt Description				

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

PAGE TOTAL
\$ 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 TARTAGLIONE, CHRISTINE FRIENDS TO ELECT	Reporting Period From: <u>1/1/2024</u> To: <u>4/8/2024</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)	
TOTAL for the Reporting Period (2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)	
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: _____ To: _____

			DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
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 Detailed Summary Page, Section 2.				PAGE TOTAL \$ 0.00

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

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

Name of Filing Committee or Candidate	Reporting Period
TARTAGLIONE, CHRISTINE FRIENDS TO ELECT	From <u>1/1/2024</u> To: <u>4/8/2024</u>

				DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR		
AFSCME DC 47	3	6	2024	\$	500.00
Mailing Address 1606 WALNUT STREET					
City PHILADELPHIA					
State PA					
Zip Code (Plus 4) 19103					
Description of Expenditure ANNIVERSARY PARTY 1/2 PAGE AD					
To Whom Paid	MO	DAY	YEAR		
THE BLOCK GIVES BACK	3	6	2024	\$	300.00
Mailing Address 6831 TORRESDALE AVE					
City PHILADELPHIA					
State PA					
Zip Code (Plus 4) 19135					
Description of Expenditure GALA FUNDRAISER					
To Whom Paid	MO	DAY	YEAR		
PUERTO RICO STARS	3	6	2024	\$	100.00
Mailing Address 7711 ALGON AVE					
City PHILADELPHIA					
State PA					
Zip Code (Plus 4) 19111					
Description of Expenditure 40TH ANNIVERSARY ANNIVERSARY					
To Whom Paid	MO	DAY	YEAR		
PHILAPOSH	3	6	2024	\$	150.00
Mailing Address 3001 WALNUT ST 5TH FL					
City PHILADELPHIA					
State PA					
Zip Code (Plus 4) 19104					
Description of Expenditure 2 TICKETS PHILAPOSH BREAKFAST					
To Whom Paid	MO	DAY	YEAR		
AOH 87	3	6	2024	\$	100.00
Mailing Address 3524 E THOMPSON ST					
City PHILADELPHIA					
State PA					
Zip Code (Plus 4) 19134					
Description of Expenditure CHARITY FUNDRAISER					
To Whom Paid	MO	DAY	YEAR		
26TH PDAC	3	6	2024	\$	600.00
Mailing Address 615 E GIRARD AVE					
City PHILADELPHIA					
State PA					
Zip Code (Plus 4) 19125					
Description of Expenditure TABLE FOR 2024 AWARD WINNERS					

To Whom Paid STEAMFITTERS LOCAL UNION 420 WISH			MO	DAY	YEAR	\$	500.00
Mailing Address 4031 FREEMANSBURG AVE			3	11	2024		
City EASTON	State PA	Zip Code (Plus 4) 18045	Description of Expenditure MONTE CARLO NIGHT WISH EVENT AND 2 TICKETS				
To Whom Paid DEMOCRATIC CITY COMMITTEE			MO	DAY	YEAR	\$	1,500.00
Mailing Address 219 SPRINGGARDEN ST			3	11	2024		
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19123	Description of Expenditure DCC COCKTAIL PARTY				
To Whom Paid HARROWGATE CIVIC ASSOCIATION			MO	DAY	YEAR	\$	100.00
Mailing Address 3640 EMERALD ST			3	11	2024		
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19134	Description of Expenditure 3RD ANNUAL SPRING FESTIVAL				
To Whom Paid OFFICER DANIEL BOYLE SCHOLARSHIP FUND			MO	DAY	YEAR	\$	150.00
Mailing Address P.O. BOX 11511			4	1	2024		
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19116	Description of Expenditure 1/2 PAGE AD				
To Whom Paid USW DISTRICT 10 CONFERENCE FUND			MO	DAY	YEAR	\$	250.00
Mailing Address 245 CENTERVILLE RD-SUITE 9			4	1	2024		
City LANCASTER	State PA	Zip Code (Plus 4) 17603	Description of Expenditure FULL PAGE AD				
To Whom Paid 26TH PDAC			MO	DAY	YEAR	\$	200.00
Mailing Address 615 E GIRARD AVE			4	1	2024		
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19125	Description of Expenditure 2024 AWARDS DINNER TABLE				
To Whom Paid FRIENDS OF PATTY KIM			MO	DAY	YEAR	\$	2,500.00
Mailing Address 2418 N 2ND ST			4	1	2024		
City HARRISBURG	State PA	Zip Code (Plus 4) 17110	Description of Expenditure DONATION				
To Whom Paid NICOLE FOR PA			MO	DAY	YEAR	\$	1,000.00
Mailing Address 1524 HIGH ROAD			4	1	2024		
City JEFFERSON HILLS	State PA	Zip Code (Plus 4) 15025	Description of Expenditure DONATION				

To Whom Paid Brigid Dowling			MO	DAY	YEAR	\$ 250.00
Mailing Address 652 Roseland Ave			4	2	2024	
City Jenkintown	State PA	Zip Code (Plus 4) 19046	Description of Expenditure APRIL CAMPAIGN WORK			
To Whom Paid NICOLE FOR PA			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 1524 HIGH ROAD			4	8	2024	
City JEFFERSON HILLS	State PA	Zip Code (Plus 4) 15025	Description of Expenditure DONATION			
To Whom Paid JUNIATA BOYS & GIRLS CLUB			MO	DAY	YEAR	\$ 250.00
Mailing Address 1225 E CAYUGA STREET			4	8	2024	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19124	Description of Expenditure DONATION			
To Whom Paid PNC BANK			MO	DAY	YEAR	\$ 24.19
Mailing Address 808 OLD YORK ROAD			3	29	2024	
City JENKINTOWN	State PA	Zip Code (Plus 4) 19046	Description of Expenditure CORPORATE ACCT ANALYSIS CHARGE			
To Whom Paid AMEX			MO	DAY	YEAR	\$ 207.97
Mailing Address P.O. BOX 96001			3	11	2024	
City LOS ANGELES	State CA	Zip Code (Plus 4) 90096	Description of Expenditure AMERICAN EXPRESS CARD			
To Whom Paid BRIGID DOWLING			MO	DAY	YEAR	\$ 250.00
Mailing Address 652 Roseland Ave			1	10	2024	
City Jenkintown	State PA	Zip Code (Plus 4) 19046	Description of Expenditure CAMPAIGN WORK			
To Whom Paid SDCC			MO	DAY	YEAR	\$ 7,500.00
Mailing Address 1635 Market Street			2	1	2024	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19107	Description of Expenditure DONATION			
To Whom Paid BRIGID DOWLING			MO	DAY	YEAR	\$ 250.00
Mailing Address 652 Roseland Ave			2	1	2024	
City Jenkintown	State PA	Zip Code (Plus 4) 19046	Description of Expenditure CAMPAIGN WORK			

To Whom Paid STEWARDS BENEFIT COMMITTEE GLAZIERS UNION 252			MO	DAY	YEAR	\$	300.00
Mailing Address 2980 Southampton Rd			2	6	2024		
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19154	Description of Expenditure FULL PAGE AD AND ATTENDANCE				
To Whom Paid FEDERATION OF NEIGHBORHOOD CENTERS			MO	DAY	YEAR	\$	200.00
Mailing Address 2800 D STREET			2	6	2024		
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19134	Description of Expenditure 2 TICKETS				
To Whom Paid WANDA COMMUNITY EVENT, INC.			MO	DAY	YEAR	\$	100.00
Mailing Address 3526 STOUTON STREET			2	29	2024		
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19134	Description of Expenditure EASTER BASKET DONATION				
To Whom Paid TEAMSTERS LOCAL 830 SCHOLARSHIP FUND			MO	DAY	YEAR	\$	350.00
Mailing Address P.O. BOX 6040			2	29	2024		
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19114	Description of Expenditure FULL PAGE AD				
To Whom Paid PHILAPOSH			MO	DAY	YEAR	\$	100.00
Mailing Address 3001 WALNUT ST 5TH FL			2	29	2024		
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19104	Description of Expenditure GOLD MEMBERSHIP RENEWAL				
To Whom Paid Brigid Dowling			MO	DAY	YEAR	\$	250.00
Mailing Address 652 Roseland Ave			4	2	2024		
City Jenkintown	State PA	Zip Code (Plus 4) 19046	Description of Expenditure CAMPAIGN WORK				
To Whom Paid MS. GIL			MO	DAY	YEAR	\$	100.00
Mailing Address 5500 LANGDON STREET			4	1	2024		
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19124	Description of Expenditure DONATION FOR CHILDREN'S PARTY				
To Whom Paid PA BUILDUP TRADES COUNCIL			MO	DAY	YEAR	\$	800.00
Mailing Address 904 N 2ND STREET			2	29	2024		
City HARRISBURG	State PA	Zip Code (Plus 4) 17102	Description of Expenditure 1/3 PAGE AD RENEWAL				

To Whom Paid BRIGID DOWLING			MO	DAY	YEAR	\$ 250.00
Mailing Address 652 Roseland Ave			2	29	2024	
City Jenkintown	State PA	Zip Code (Plus 4) 19046	Description of Expenditure CAMPAIGN WORK			
To Whom Paid PNC BANK			MO	DAY	YEAR	\$ 23.21
Mailing Address 808 OLD YORK ROAD			2	29	2024	
City JENKINTOWN	State PA	Zip Code (Plus 4) 19046	Description of Expenditure CORPORATE ACCT ANALYSIS CHARGE			
To Whom Paid AMEX			MO	DAY	YEAR	\$ 691.35
Mailing Address P.O. BOX 96001			2	12	2024	
City LOS ANGELES	State CA	Zip Code (Plus 4) 90096	Description of Expenditure AMERICAN EXPRESS CARD			
To Whom Paid PNC BANK			MO	DAY	YEAR	\$ 24.68
Mailing Address 808 OLD YORK ROAD			1	31	2024	
City JENKINTOWN	State PA	Zip Code (Plus 4) 19046	Description of Expenditure CORPORATE ACCT ANALYSIS CHARGE			
To Whom Paid AMEX			MO	DAY	YEAR	\$ 2,734.95
Mailing Address P.O. BOX 96001			1	11	2024	
City LOS ANGELES	State CA	Zip Code (Plus 4) 90096	Description of Expenditure AMERICAN EXPRESS CARD			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 23,606.35

