

# Campaign Finance Report

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

<b>Filer Identification Number :</b> 9200098		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>			
<b>Name of Filing Committee, Candidate or Lobbyist:</b> TARTAGLIONE, CHRISTINE FRIENDS TO ELECT											
<b>Street Address:</b>											
<b>City:</b> PHILADELPHIA				<b>State:</b> PA		<b>Zip Code:</b> 19115					
<b>TYPE OF REPORT</b>  (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.	TERMINATION REPORT?	Yes	No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7. X	Year 2005	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>			
<b>Name of Office Sought by Candidate:</b>  SENATOR IN THE GENERAL ASSEMBLY					<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
					<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	STS DEM 51			
					11	8	2005	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>		
		1	1	1		12	31	2005			
<b>A. Amount Brought Forward From Last Report</b>					\$		45,827.07				
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>					\$		0.00				
<b>C. Total Funds Available (Sum Of Lines A and B)</b>					\$		45,827.07				
<b>D. Total Expenditures (From Schedule III)</b>					\$		4,467.44				
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>					\$		41,359.63				
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>					\$		0.00				
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>					\$		50,000.00				

## 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>
TARTAGLIONE, CHRISTINE FRIENDS TO ELECT	<b>From:</b> <b>To:</b> <u>12/31/2005</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>	\$ 0.00
<b>All Other Contributions (Part D)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 0.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<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>	\$ 0.00
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<div>PART B</div> <div>ALL OTHER CONTRIBUTIONS</div> <div>\$50.01 TO \$250.00</div> <div>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)</div>						
Name of Filing Committee or Candidate				Reporting Period		
				From:		To:
				DATE		AMOUNT
Full Name of Contributor				MO	DAY	YEAR
Mailing Address						
City	State	Zip Code (Plus 4)				\$ 0.00
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 Period
	From: <span style="margin-left: 100px;">To:</span>

DATE				AMOUNT
Full Name of Contributing Committee				
Mailing Address				
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

			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)	

<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.**

Name of Filing Committee or Candidate	Reporting Period  From: <span style="float: right;">To:</span>
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			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.

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

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
TARTAGLIONE, CHRISTINE FRIENDS TO ELECT		<b>From:</b>	<b>To:</b> <u>12/31/2005</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 RECIEVED - 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

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# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
TARTAGLIONE, CHRISTINE FRIENDS TO ELECT	From To: <u>12/31/2005</u>

DATE				AMOUNT
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
AMERICAN EXPRESS				
<b>Mailing Address</b>	11	30	2005	\$ 318.20
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>	
			CAMPAIGN EXPENSES	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
IRON WORKERS LOCAL 401				
<b>Mailing Address</b>	11	30	2005	\$ 300.00
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19154	<b>Description of Expenditure</b>	
			DONATION	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
STEVENSONS FLORIST				
<b>Mailing Address</b>	11	30	2005	\$ 2,754.00
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>	
			FLOWER DONATION	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
CATHY BENTON				
<b>Mailing Address</b>	12	16	2005	\$ 58.26
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19124	<b>Description of Expenditure</b>	
			REIMBURSEMENT	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
DONALD KOCKLER				
<b>Mailing Address</b>	12	16	2005	\$ 26.50
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>	
			REIMBURSEMENT	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
WISSINGNOMING CIVIC ASSOC				
<b>Mailing Address</b>	12	16	2005	\$ 25.00
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>	
			DONATION	

<b>To Whom Paid</b> GARIZINE FUNERAL HOME			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 500.00
<b>Mailing Address</b>			12	19	2005	
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b> FUNERAL EXPENSE DONATION			

<b>To Whom Paid</b> PHILIP LEVIN			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 405.99
<b>Mailing Address</b>			12	21	2005	
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b> CHRISTMAS GIFTS FOR STAFF			

<b>To Whom Paid</b> STEVENSONS FLORIST			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 79.49
<b>Mailing Address</b>			12	21	2005	
<b>City</b> PHILADELPHIA	<b>State</b> PA	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b> FLOWER DONATION			

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						<b>\$</b> 4,467.44

## STATEMENT OF UNPAID DEBTS

<b>Name of Filing Committee or Candidate</b>  TARTAGLIONE, CHRISTINE FRIENDS TO ELECT	<b>Reporting Period</b>  <b>From:</b> _____ <b>To:</b> <u>12/31/2005</u>
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			DATE			Outstanding Balance of Debt
Name of Creditor PA STATE DEMOCRATIC COMMITTEE			MO	DAY	YEAR	\$ 50,000.00
Mailing Address			6	27	1994	
City	HARRISBURGH	State PA	Zip Code (Plus 4)		Description of Debt LOAN	

<b>Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.</b>	<b>PAGE TOTAL</b> \$ 50,000.00
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