# **Campaign Finance Report**

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

Filer Identificat	ion	92000	)98			Repo Filed			CANDI	DATE		СОМІ	MITTEE	<	LOBE	BYIST	Г	
Name of Filing (	Committee,	, Candida	ite or Lo	bbyist:			-		LECT CH	HRISTI	NE T	ARTAG	LIONE	-				
Street Address:	PO BC	DX 52153	3															
City:	PHILA	DELPHIA	۱.					s	tate:	PA			Zip Co	<b>de:</b> 19	115			
TYPE OF REPORT	6TH TUESE PRE-PRIMA		1.	2ND FRIDA PRIMARY	Y PRE	- 2.		DAY IMAR		POST-	3.		AMENDN REPORT		Yes	No	D	$\checkmark$
(place X to the right of	6TH TUESE PRE-ELECT		4.	2ND FRIDA ELECTION	Y PRI	E- 5.		DAY ECTIO	-	POST- 6.		TERMINATION REPORT?		Yes	No	D	$\checkmark$	
report type)	ANNUAL F	REPORT	7. <b>X</b>	<b>Year</b> 2000				ILING METHOD ( ) CHECK ONE			PAPER	PAPER		DISKI	TTE			
Name of Office S	Sought by (	Candidat	e:					D	DATE O	FELE	СТІО	N	District Number	Office Code	Par	ty Code	Cour	
SENATOR IN T								M	10	DAY	YE	AR		STS	DEN	1	51	
SENATOR IN T	HE GENER	AL ASSE	MDLI						11		7	2000		(SEE INS	STRUCTIO	ONS FOR	CODES	)
Summary of Receipts and MO DAY YEAR M							10	DAY	YI	EAR	FC	OR OFFIC	E USE	ONLY				
Expenditures	s from:			1 1		1 .	то		12	3	31	2000						
A. Amount Brought Forward From Last Report								\$			26,3	357.95						
B. Total Monetary Contributions And Receipts (From Schedule 1								\$ 0.00										
C. Total Funds Available (Sum Of Lines A and B)							\$			26,3	357.95							
D. Total Expenditures (From Schedule III)							\$			2,1	188.87							
E. Ending Cash	n Balance (	Subtract	Line D	From Line	C)		$\downarrow$	\$			24,1	.69.08						
F. Value Of In-	Kind Contr	ributions	Receive	ed (From S	chedu	le II)		\$				0.00	1					
G. Unpaid Deb	ts And Obli	igations	(From S	chedule I\	()			\$			60,0	00.00						
					AFF	IDAV	IT S	SEC	TION									
PART I - If this i		-	-	_									-					
I swear (or affirm correct and compl		eport, inclu	iding the	attached sc	hedule	s filed o	n pap	er or	by elect	ronic me	edium	, are to t	the best o	f my knov	vledge	and bel	ief , tr	ue.
Sworn to and subs	scribed befor day of	re me this		20							s	Signature	e of Perso	n Submitt	ing Rep	ort		-
		Signatur	e				_						Prin	ted Name	1			-
My Commission E	xpires	-											Ema	il				_
	M	10	DA	Y	YR					Are	ea Cod	le	Daytin	ne Teleph	one Nu	mber		
Part II- If this is	a report o	of a cand	idate's a	authorized	Comr	nittee,	Cand	didat	e shall	sign he	ere.							
I swear (or affirm) No 320) as amend		best of m	y knowle	dge and beli	ef this	s politica	l con	nmitt	ee has n	ot violat	ted an	ıy provis	ions of th	e act of Ju	ıne 3,19	937 (P.I	L. 133	3,
Sworn to and subso	cribed before day of	e me this		20								s	ignature	of Candida	ate			-
							_						Printe	ed Name				-
My Commission Exp		ignature											Ema	il				-
																		_
		мо	DA	Y	YF	Ł				Area	Code		D	aytime Te	elephon	e Numl	ber	

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** FRIENDS TO ELECT CHRISTINE TARTAGLIONE From: To: 12/31/2000 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 0.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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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 Candid	ate		Repo	orting I	Period			
Fre				From: To:			:	
					DATE			AMOUNT
Full Name of Contributing Committee			1	мо	DAY	YEAR		
Mailing Address							\$	0.00
City State Zip Code (Plus 4)								
							Γ	PAGE TOTAL

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

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				мо	DAY	YEAR		
Mailing Address							\$	0.00
City State Zip Code (Plus 4)								
PAGE TOTAL								
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.							\$	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 Cand	idate		Reporting	9 Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address	Mailing Address						\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C on	Schedule I, Detail	led Summary Pa	age, Sectio	n 3.			\$	0.00

# 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:	То:

				D	ATE		AMOUNT		
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zi	p Code (Plus 4)						
Employer Name				Occupation					
Employer Mailing Address/Principal Place of City Business					State		Zip Code	(Plus 4)	
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Secti				on 3.		Γ	PA	GE TOTAL	
	,		, . <u>.</u>	-			\$	0.00	

I

# 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			Report	ing Perio	od				
			From:			То:			
				D	ATE			AMOUNT	
Full Name			мо	DAY	YEAR				
Mailing Address							\$		0.00
City	State	Zip Code (	Plus 4)						
Receipt Description									
nter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.							PAGE TO	ſAL	
inter Grand Total of Part E on Schedule 1, Detaned Summary Page, Section 4.						\$		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	Reporting Period							
FRIENDS TO ELECT CHRISTINE TARTAGLIONE	From:	To:	<u>12/31/2000</u>					
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR								
TOTAL for the Reporting Pe	eriod (1)	\$	0.00					
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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, 3		\$	0.00					

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

## VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporting	g 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:	Description of Contribution:								
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detaile Section 2.				mary Pag	je,	PAGE	TOTAL		
					4	6	0.00		

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

Name of Filing Committee or Candidate					Re	porting I	Period				
					Fro	om:		То:	То:		
							DATE			AMOUNT	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address								\$	0.00		
City	State		Zip Code(Plus 4)								
Employer of Contributor	1		1		Occupation						
Employer Mailing Address/Principal Place of City Business			State	Zip Code(Plus 4)			Description of Contribution				
Enter Grand Total of Part G on Sch	Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed					PAGE TOTAL					
Summary Page, Section 3.									0.00		

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reportin	ng Period				
FRIENDS TO ELECT CHRISTINE TARTA	GLIONE		From			То:	<u>12/31/2000</u>	
				DATE			AMOUNT	
<b>To Whom Paid</b> VERIZON			мо	DAY	YEAR			
Mailing Address			12	2	2000	\$	106.61	
City PHILA	State	Zip Code (Plus 4)	Description of Expenditure PHONES					
To Whom Paid RERUM NOVA QUIN			мо	DAY	YEAR			
Mailing Address			12	7	2000	\$	1,000.00	
City State Zip Code (Plus 4)				Description of Expenditure DONATION				
To Whom Paid AMERICAN EXPRESS			мо	DAY	YEAR			
Mailing Address			12	7	2000	\$	364.77	
City	State	Zip Code (Plus 4)	Description of Expenditure MISC. EXPENSES					
To Whom Paid TEN PENNIES FLORIST			мо	DAY	YEAR			
Mailing Address			12	13	2000	\$	112.35	
City PHILA	State	Zip Code (Plus 4)	<b>Descrip</b> FLOWE	<b>stion of Exp</b> RS	benditure	I		
To Whom Paid COMMONWEALTH OF PA.				DAY	YEAR			
Mailing Address		12	13	2000	\$	449.14		
City HARRISBURG	State	Zip Code (Plus 4)	Description of Expenditure WINE & SPIRITS FOR PARTY					

To Whom Paid ACME MARKET			мо	DAY	YEAR			
Mailing Address			12	19	2000	\$	156.00	
City PHILA	State	Zip Code (Plus 4)	Description of Expenditure DONATION					
							PAGE TOTAL	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							2,188.87	

# SCHEDULE IV STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate Rep			Reportin	rting Period					
FRIENDS TO ELECT CHRISTINE TARTAGLIONE			From:			То:	-	12/31/2000	
					DATE			Outstanding Balance of Debt	
Name of Creditor BORSKI FOR CONGRESS				мо	DAY	YEAR			
Mailing Address				6	25	1994	+ <b>\$</b>	10,000.00	
City PHILADELPHIA	<b>State</b> PA	Zip Code (Plu	us 4)	Description of Debt					
		•			DATE			Outstanding Balance of Debt	
Name of Creditor PA. STATE DEM. CAMP. COMM.				мо	DAY	YEAR			
Mailing Address				6	27	1994	+ \$	50,000.00	
City PHILADELPHIA	<b>State</b> PA	Zip Code (Plu	us 4)	Description of Debt					
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL		