

# 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 52153										
City: PHILADELPHIA			State: PA		Zip Code: 19115					
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. <input checked="" type="checkbox"/>	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.	Year 2001	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
SENATOR IN THE GENERAL ASSEMBLY				MO	DAY	YEAR	STS	DEM	51	
				11	6	2001	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY	
		1	1	1	TO	6	4	2001		
A. Amount Brought Forward From Last Report				\$		33,229.92				
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		7,000.00				
C. Total Funds Available (Sum Of Lines A and B)				\$		40,229.92				
D. Total Expenditures (From Schedule III)				\$		12,252.25				
E. Ending Cash Balance (Subtract Line D From Line C)				\$		27,977.67				
F. Value Of In-Kind Contributions Received (From Schedule II)				\$		0.00				
G. Unpaid Debts And Obligations (From Schedule IV)				\$		60,000.00				

## 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  
 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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>	
TARTAGLIONE, CHRISTINE FRIENDS TO ELECT	<b>From:</b>	<b>To:</b> <u>6/4/2001</u>

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

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>		
Contributions Received From Political Committees (Part A)		\$ 250.00
All Other Contributions (Part B)		\$ 250.00
	<b>TOTAL for the Reporting Period</b>	(2) \$ 500.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>		
Contributions Received From Political Committees (Part C)		\$ 5,000.00
All Other Contributions (Part D)		\$ 1,500.00
	<b>TOTAL for the Reporting Period</b>	(3) \$ 6,500.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>		
	<b>TOTAL for the Reporting Period</b>	(4) \$ 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>		\$ 7,000.00
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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.**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>	
TARTAGLIONE, CHRISTINE FRIENDS TO ELECT	<b>From:</b>	<b>To:</b> <u>6/4/2001</u>
<b>DATE</b>		<b>AMOUNT</b>

<b>Full Name of Contributing Committee</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
PA. OPTOMETRIC, PA.				
<b>Mailing Address</b> P.O. BOX 3406				\$ 250.00
<b>City</b> HARRISBURG	4	20	2001	
<b>State</b> PA				
<b>Zip Code (Plus 4)</b>				

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

<b>PAGE TOTAL</b>
\$ 250.00

**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)**

<b>Name of Filing Committee or Candidate</b> TARTAGLIONE, CHRISTINE FRIENDS TO ELECT	<b>Reporting Period</b> <b>From:</b> <b>To:</b> <u>6/4/2001</u>
<b>DATE</b>	
<b>AMOUNT</b>	

<b>Full Name of Contributor</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>AMOUNT</b>
DR. NORMAN KUSHNER	4	22	2001	
<b>Mailing Address</b> 2673 ELBRIDGE STREET				
<b>City</b> PHILA.	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19149		

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

<b>PAGE TOTAL</b>
\$ 250.00

**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.

<b>Name of Filing Committee or Candidate</b> TARTAGLIONE, CHRISTINE FRIENDS TO ELECT	<b>Reporting Period</b> <b>From:</b> <b>To:</b> <u>6/4/2001</u>
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			DATE			AMOUNT
Full Name of Contributing Committee			MO	DAY	YEAR	
COMMITTEE TO ELECT LYNNE ABRAHAM						
<b>Mailing Address</b> 1421 ARCH STREET						\$ 500.00
<b>City</b> PHILA.	<b>State</b> PA	<b>Zip Code (Plus 4)</b>	4	6	2001	
<b>Full Name of Contributing Committee</b> PA. REALTORS PAC			4	14	2001	\$ 500.00
<b>Mailing Address</b> 4501 CHAULSER HILL RD.						
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b>				
<b>Full Name of Contributing Committee</b> PBWA PAC			3	28	2001	\$ 500.00
<b>Mailing Address</b> P.O. BOX 12023						
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b>				
<b>Full Name of Contributing Committee</b> TWA - COPE			3	16	2001	\$ 1,500.00
<b>Mailing Address</b> 501 3RD ST.						
<b>City</b> WASHINGTON	<b>State</b> DC	<b>Zip Code (Plus 4)</b>				
<b>Full Name of Contributing Committee</b> LOCAL 98 IBEW			3	22	2001	\$ 2,000.00
<b>Mailing Address</b> 1719 SPRING GARDEN ST.						
<b>City</b> PHILA.	<b>State</b> PA	<b>Zip Code (Plus 4)</b>				

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

<b>PAGE TOTAL</b>	
\$	5,000.00

**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.)**

<b>Name of Filing Committee or Candidate</b> TARTAGLIONE, CHRISTINE FRIENDS TO ELECT	<b>Reporting Period</b> <b>From:</b> <b>To:</b> <u>6/4/2001</u>
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				DATE	AMOUNT		
Full Name of Contributor	MO	DAY	YEAR				
ELEANOR DEZZI				\$ 500.00			
<b>Mailing Address</b> 8660 BELFRY DR.	4	25	2001				
<b>City</b> PHILA. <b>State</b> PA <b>Zip Code (Plus 4)</b>							
<b>Employer Name</b>				<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>		

Full Name of Contributor	MO	DAY	YEAR				
DAVID GORDON				\$ 1,000.00			
<b>Mailing Address</b> 1882 AUTUMN LEAF LANE	4	22	2001				
<b>City</b> HUNTINGTON VALLEY <b>State</b> PA <b>Zip Code (Plus 4)</b>							
<b>Employer Name</b>				<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>		

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

<b>PAGE TOTAL</b>
\$ 1,500.00

**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.**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
	<b>From:</b> _____ <b>To:</b> _____

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

**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>6/4/2001</u>
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
<b>TOTAL for the Reporting Period</b>		<b>(1)</b>	<b>\$ 0.00</b>
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
<b>TOTAL for the Reporting Period</b>		<b>(2)</b>	<b>\$ 0.00</b>
<b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>			
<b>TOTAL for the Reporting Period</b>		<b>(3)</b>	<b>\$ 0.00</b>
<b>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.)</b>			<b>\$ 0.00</b>

**SCHEDULE II  
PART F  
IN-KIND CONTRIBUTIONS RECEIVED  
VALUE OF \$50.01 TO \$250.00**

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

			DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
<b>Mailing Address</b>				\$ 0.00
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>		
<b>Description of Contribution:</b>				
<b>Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.</b>				<b>PAGE TOTAL</b> \$ 0.00

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

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

## 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>6/4/2001</u>

			DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR	
SANDY VITO	4	3	2001	\$ 117.66
<b>Mailing Address</b>				
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>	
			RE-IMBURSEMENT	
NYB	4	3	2001	\$ 25.00
<b>Mailing Address</b>				
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>	
			DONATION	
NEWS GLEANER	4	3	2001	\$ 250.00
<b>Mailing Address</b>				
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>	
			AD	
AMERICAN EXPRESS	4	3	2001	\$ 8,293.75
<b>Mailing Address</b>				
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>	
			EXPENSES	
CLUB PAC 460	4	6	2001	\$ 100.00
<b>Mailing Address</b>				
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>	
			DONATION	

<b>To Whom Paid</b> SENATE DEM. CAMP. COMM			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b>			4	6	2001	
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b> DONATION			
<b>To Whom Paid</b> TEN PENNIES			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b>			4	6	2001	
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b> FLOWERS			
<b>To Whom Paid</b> NIA PAC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b>			4	12	2001	
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>			
<b>To Whom Paid</b> FRANKFORD CHARGERS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b>			4	12	2001	
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b> DONATION			
<b>To Whom Paid</b> AT & T			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b>			4	12	2001	
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b> PHONES			
<b>To Whom Paid</b> PHILLY POSH MEMORIAL EVENT			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b>			4	18	2001	
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b> DONATION			

<b>To Whom Paid</b> VERIZON			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b>			4	18	2001	\$ 62.10
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b> PHONES			
<b>To Whom Paid</b> COLUMBUS LODGE FORUM 1492			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b>			4	20	2001	\$ 115.00
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b> DONATION			
<b>To Whom Paid</b> 25TH WARD DEMS.			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b>			4	27	2001	\$ 100.00
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b> DONATION			
<b>To Whom Paid</b> AMERICAN EXPRESS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b>			5	3	2001	\$ 237.06
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>			
<b>To Whom Paid</b> 18TH WARD DEM. EXEX.			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b>			5	3	2001	\$ 100.00
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b> DONATION			
<b>To Whom Paid</b> CONNIE DELORY			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b>			5	3	2001	\$ 17.84
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b> RE-IMBURSEMENT			

<b>To Whom Paid</b> NATIONAL POL CONGRESS BLACK WOMEN			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b>			5	8	2001	
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b> DONATION			
<b>To Whom Paid</b> CCJ			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b>			5	8	2001	
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b> DONATION			
<b>To Whom Paid</b> 49TH WARD DEMS.			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b>			5	8	2001	
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b> DONATION			
<b>To Whom Paid</b> AT & T			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b>			5	8	2001	
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b> PHONES			
<b>To Whom Paid</b> 35TH WARD DEMS.			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b>			5	11	2001	
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b> DONATION			
<b>To Whom Paid</b> SACRED HEART			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b>			5	23	2001	
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>			

<b>To Whom Paid</b> TEN PENNIES			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b>			5	23	2001	
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>			
<b>To Whom Paid</b> VERIZON			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b>			5	23	2001	
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b> PHONES			
<b>To Whom Paid</b> BILL BERGER			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b>			5	24	2001	
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b> DONATION			
<b>To Whom Paid</b> PA. FEDERATION DEM. WOMEN			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b>			5	25	2001	
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b> DONATION			
<b>To Whom Paid</b> AMERICAN LEGION POST 2006			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b>			5	25	2001	
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b> DONATION			
<b>To Whom Paid</b> MOES DELI			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b>			5	25	2001	
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b> FUNERAL DONATION			



<b>To Whom Paid</b> RITA MOSSER			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b>			5	31	2001	\$ 100.00
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b> DONATION			
<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b> \$ 12,252.25

**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**

<b>Name of Filing Committee or Candidate</b> TARTAGLIONE, CHRISTINE FRIENDS TO ELECT				<b>Reporting Period</b> From: To: <u>6/4/2001</u>			
						<b>Outstanding Balance of Debt</b>	
						<b>DATE</b>	
<b>Name of Creditor</b> BORSKI FOR CONGRESS				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 10,000.00
<b>Mailing Address</b>				6	25	1994	
<b>City</b> PHILADELPHIA	<b>State</b> PA		<b>Zip Code (Plus 4)</b> 19111	<b>Description of Debt</b> LOAN			
						<b>Outstanding Balance of Debt</b>	
						<b>DATE</b>	
<b>Name of Creditor</b> PA. STATE DEM. COMM.				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 50,000.00
<b>Mailing Address</b>				6	27	1994	
<b>City</b> HARRISBURG	<b>State</b> PA		<b>Zip Code (Plus 4)</b>	<b>Description of Debt</b> LOAN			
<b>Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.</b>						<b>PAGE TOTAL</b>	
						\$ 60,000.00	