

Commonwealth of Pennsylvania
Campaign Finance Report
 (Note: This report must be typed in blue or black ink.)

| | | | | | | | | | |
|---|-------------------------|--|------------------------|------------------------------------|---|-----------------------------------|---|-----------------------------------|--|
| Filer Identification Number: | | Report Filed By: | | Candidate <input type="checkbox"/> | Committee <input checked="" type="checkbox"/> | Lobbyist <input type="checkbox"/> | | | |
| Name of Filing Committee, Candidate or Lobbyist FRIENDS TO REELECT MARGE TARTAGLIONE | | | | | | | | | |
| Street Address 1407 VANKIRK ST | | | | | | | | | |
| City: PHILADELPHIA | | | | State PA | | Zip: 19149- 8712000001 | | | |
| TYPE OF REPORT (place x to the right of report type) | 6th Tuesday Pre-Primar | 1. <input type="checkbox"/> | 2nd Friday Pre-Primar | 2. <input type="checkbox"/> | 30 Day Post Post Primar | 3. <input type="checkbox"/> | Amendment Report ? | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| | 6th Tuesday Pre-Electio | 4. <input type="checkbox"/> | 2nd Friday Pre-Electio | 5. <input type="checkbox"/> | 30 Day Post Electio | 6. <input type="checkbox"/> | Termination Report ? | Yes <input type="checkbox"/> | No <input checked="" type="checkbox"/> |
| | Annual Report | 7. <input checked="" type="checkbox"/> | Year 2006 | | Filing Method Check One | | Paper <input checked="" type="checkbox"/> | Diskette <input type="checkbox"/> | |
| Name of Office Sought by Candidate: CITY COMMISSIONERS | | | | Date of Election 11/07/2006 | | District Number 0 | Office Code OTH | Party Code DEM | County Code 51 |
| | | | | | | | (See Instructions for Codes) | | |

| SUMMARY OF RECEIPTS AND EXPENDITURES FROM | | TO | FOR OFFICE USE ONLY |
|--|------------|-------------|--|
| | 01/01/2006 | 12/31/2006 | |
| A. Amount Brought Forward From Last Report | \$ | \$18,424.72 | RECEIVED FROM DEPOSITED FOR 11/20/06 11:24 2006 |
| B. Total Monetary Contributions and Receipts (From Schedule I) | \$ | \$0.00 | |
| C. Total Funds Available (Sum of Lines A and B) | \$ | \$18,424.72 | |
| D. Total Expenditures (From Schedule III) | \$ | -\$500.00 | |
| E. Ending Cash Balance (Subtract Line D from Line C) | \$ | \$17,924.72 | |
| 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, on paper or computer diskette, are to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this

30th day of January 19 2007

Gerald A. Bengon
 Signatur

My Commission Expire 3/22/09
 Mo. Day Year

Elizabeth M. Milo
 Signature Of Person Submitting Report

ELIZABETH M. MILO
 Printed Nam

215
 Area Code

535-0409
 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 _____ 19 _____

 Signatur

My Commission Expire _____
 Mo. Day Year

 Signature of Person Submitting Report

 Printed Nam

 Area Cod

 Daytime Telephone Number

Schedule I
Contributions and Receipts
Detailed Summary Page

| | |
|---|---|
| NAME OF FILING COMMITTEE OR CANDIDATE FRIENDS TO REELECT MARGE TARTAGLIONE | REPORTING PERIOD From: 01/01/2006 To: 12/31/2006 |
|---|---|

| | |
|---|--------|
| 1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR | |
| TOTAL for the Reporting Period | \$0.00 |

| | |
|--|--------|
| 2. CONTRIBUTIONS \$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 | \$0.00 |

| | |
|--|--------|
| 3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D) | |
| CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES (Part C) | \$0.00 |
| ALL OTHER CONTRIBUTIONS (Part D) | \$0.00 |
| TOTAL for the Reporting Period | \$0.00 |

| | |
|--|--------|
| 4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E) | |
| TOTAL for the Reporting Period | \$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 Page 1, Report Cover Page, Item B.) | \$0.00 |
|--|---------------|

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 FRIENDS TO REELECT MARGE TARTAGLIONE | REPORTING PERIOD From: 01/01/2006 To: 12/31/2006 |
|---|---|

| | | | DATE | | | AMOUNT |
|-----------------------------------|-------|------------------|------|-----|------|--------|
| Full Name of Contributing Committ | | | MO. | DAY | YEAR | |
| Mailing Adress | | | MO. | DAY | YEAR | |
| City | State | Zip Code (Plus 4 | MO. | DAY | YEAR | |

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 FRIENDS TO REELECT MARGE TARTAGLIONE | REPORTING PERIOD From: 01/01/2006 To: 12/31/2006 |
|---|---|

| | | | DATE | | | AMOUN |
|--------------------------|-------|------------------|------|-----|------|-------|
| Full Name of Contributor | | | MO. | DAY | YEA | |
| Mailing Address | | | MO | DAY | YEA | |
| City | State | Zip Code (Plus 4 | MO. | DAY | YEAR | |

Enter Grand Total of Part B 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 OVER \$250.00 IN THE REPORTING PERIOD.

| | |
|---|--|
| NAME OF FILING COMMITTEE OR CANDIDATE FRIENDS TO REELECT MARGE TARTAGLIONE | REPORTING PERIOD From: 01/01/2006 To : 12/31/2006 |
|---|--|

| | | | | DATE | AMOUNT | |
|-------------------------------------|-------|-------------------|--|------|--------|------|
| Full Name of Contributing Committee | | | | MO. | DAY | YEAR |
| Mailing Address | | | | MO. | DAY | YEAR |
| City | State | Zip Code (Plus 4) | | MO. | DAY | YEAR |

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

| |
|-----------------------------|
| Page Total \$0.00 |
|-----------------------------|

**PART D
ALL OTHER CONTRIBUTIONS
OVER \$250.00**

USE THIS PART TO ITEMIZE ALL OTHER CONTRIBUTIONS WITH AN AGGREGATE VALUE
OVER \$250.00 FOR THE REPORTING PERIOD.

Exclude Contributions From Political Committees Reported in Part C.

| | |
|---|---|
| NAME OF FILING COMMITTEE OR CANDIDATE FRIENDS TO REELECT MARGE TARTAGLIONE | REPORTING PERIOD From: 01/01/2006 To: 12/31/2006 |
|---|---|

| | | | | DATE | | | AMOUN |
|--|-------|-------------------|--|------------|----|------|-------|
| Full Name of Contributor | | | | MO | DA | YEAR | |
| Mailing Address | | | | MO | DA | YEAR | |
| City | State | Zip Code (Plus 4) | | MO | DA | YEAR | |
| Employer Nam | | | | Occupation | | | |
| Employer Mailing Address/Principal Place of Busine | | | | | | | |

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

| |
|-------------------|
| Page Total |
| \$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 FRIENDS TO REELECT MARGE TARTAGLIONE | REPORTING PERIOD From: 01/01/2006 To: 12/31/2006 |
|--|---|

| | | | | |
|--------------------|-------|------------------|------|--------|
| Full Name | | | | |
| Mailing Address | | | | |
| City | State | Zip Code (Plus 4 | Date | Amount |
| Receipt Descriptio | | | | |

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 FRIENDS TO REELECT MARGE TARTAGLIONE | REPORTING PERIOD From: 01/01/2006 To: 12/31/2006 |
|---|---|

| | |
|--|--------|
| 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 CONTRIBUTIONS 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, Report 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 FRIENDS TO REELECT MARGE TARTAGLIONE | REPORTING PERIOD From: 01/01/2006 To: 12/31/2006 |
|---|---|

| Full Name of Contributor | DATE | | | AMOUN | | |
|-----------------------------|-------|------------------|------|-------|------|--|
| | MO. | DAY | YEAR | | | |
| Mailing Address | MO. | DAY | YEAR | | | |
| City | State | Zip Code (Plus 4 | MO. | DAY | YEAR | |
| 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 FRIENDS TO REELECT MARGE TARTAGLIONE | REPORTING PERIOD From: 01/01/2006 To: 12/31/2006 |
|---|---|

| | | | DATE | | | AMOUN |
|---|-------|------------------|-----------------------------|-----|------|-------|
| Full Name of Contributing Committ | | | MO. | DAY | YEAR | |
| Mailing Address | | | MO. | DAY | YEAR | |
| City | State | Zip Code (Plus 4 | MO. | DAY | YEAR | |
| Employer of Contribut | | | Occupation | | | |
| Employer Mailing Adress/Principal Place of Busine | | | 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 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 FRIENDS TO REELECT MARGE TARTAGLIONE | REPORTING PERIOD From: 01/01/2006 To: 12/31/2006 |
|--|---|

| Name of Creditor | Outstanding Balance of Debt | | | | | | | | | |
|---|-----------------------------|----------------------------|--|------|-------|-------------------|--------------------|--|--|--|
| <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 45%;">Mailing Address</td> <td style="width: 15%; text-align: center;">DATE DEBT INCURRED ▶</td> <td style="width: 40%;"></td> </tr> <tr> <td>City</td> <td>State</td> <td>Zip Code (Plus 4)</td> </tr> <tr> <td colspan="3">Description of Deb</td> </tr> </table> | Mailing Address | DATE DEBT INCURRED ▶ | | City | State | Zip Code (Plus 4) | Description of Deb | | | |
| Mailing Address | DATE DEBT INCURRED ▶ | | | | | | | | | |
| City | State | Zip Code (Plus 4) | | | | | | | | |
| Description of Deb | | | | | | | | | | |

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.

| |
|-----------------------------|
| Page Total \$0.00 |
|-----------------------------|