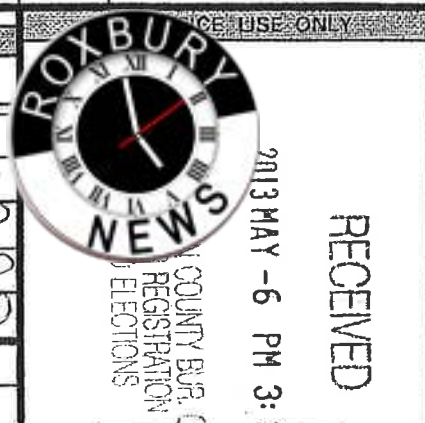


3341

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: <input type="checkbox"/>		Report Filed By: <input type="checkbox"/>		1. CANDIDATE		2. COMMITTEE		3. LOBBYIST	
Name of Filing Committee, Candidate or Lobbyist: <i>Friends to Elect Eugenia "Gina" Smith</i>									
Street Address: <i>1224 Rolliston Street</i>									
City: <i>Harrisburg</i>			State: <i>Pa</i>			Zip Code: <i>17104 -</i>			
TYPE OF REPORT (place X to the right of report type)	1. 6TH TUESDAY PRE-PRIMARY	2. 2ND FRIDAY PRE-PRIMARY	3. 30 DAY POST-PRIMARY	4. AMENDMENT REPORT?	YES	NO			
	4. 9TH TUESDAY PRE-ELECTION	5. 2ND FRIDAY PRE-ELECTION	6. 30 DAY POST-ELECTION	7. TERMINATION REPORT?	YES	NO			
	7. ANNUAL REPORT	YEAR	FILING METHOD (CHECK ONE)	PAPER	DISKETTE				
Name of Office Sought by Candidate: <i>Harrisburg City Council</i>				DATE OF ELECTION		District Number	Office Code	Party Code	County Code
				MO: <i>5</i>	DAY: <i>21</i>	YEAR: <i>2013</i>			
(SEE INSTRUCTIONS FOR CODES)									
Summary of Receipts and Expenditures from:			MO: <i>01</i>	DAY: <i>01</i>	YEAR: <i>2013</i>	To	MO: <i>5</i>	DAY: <i>06</i>	YEAR: <i>2013</i>
A. Amount Brought Forward From Last Report		\$		<i>0</i>					
B. Total Monetary Contributions and Receipts (From Schedule I)		\$		<i>620.00</i>					
C. Total Funds Available (Sum of Lines A and B)		\$		<i>620.00</i>					
D. Total Expenditures (From Schedule III)		\$		<i>300.00</i>					
E. Ending Cash Balance (Subtract Line D from Line C)		\$		<i>320.00</i>					
F. Value of In-Kind Contributions Received (From Schedule III)		\$		<i>NIL</i>					
G. Unpaid Debts and Obligations (From Schedule IV)		\$		<i>NIL</i>					



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 6th day of May, 2013

COMMONWEALTH OF PENNSYLVANIA
 NOTARIAL SEAL
 Adriaan N Buckner, Notary Public
 City of Harrisburg, Dauphin County
 My commission expires June 10, 2013

Signature of Person Submitting Report
Timothy R. East
 Printed Name:
717 623-8330
 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 6th day of May, 2013

COMMONWEALTH OF PENNSYLVANIA
 NOTARIAL SEAL
 Adriaan N Buckner, Notary Public
 City of Harrisburg, Dauphin County
 My Commission Expires June 10, 2013

Signature of Candidate
Eugenia Smith
 Printed Name:
717 623-3412
 Area Code Daytime Telephone Number

Dauphin County Election Bureau
 2 S. 2nd St.
 PO Box 1295
 Harrisburg PA 17108

**CONTRIBUTIONS AND RECEIPTS**

Detailed Summary Page

Name of Filing Committee or Candidate <i>Friends to Elect Eugenia "Gina" Smith</i>	Reporting Period From <i>1-1-13</i> To <i>5-6-13</i>
---	---

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

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)	
Contributions Received from Political Committees (Part A)	\$
All Other Contributions (Part B)	\$ <i>120.00</i>
TOTAL for the Reporting Period	(2) \$ <i>120.00</i>

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$
All Other Contributions (Part D)	\$ <i>500.00</i>
TOTAL for the Reporting Period	(3) \$ <i>500.00</i>

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)	
TOTAL for the Reporting Period	(4) \$

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.)	\$ <i>620.00</i>
--	------------------



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 <i>Friends to Elect Eugenia "Gina" Smith</i>	Reporting Period From <i>1-1-13</i> To <i>5-6-13</i>
---	---

Full Name of Contributor	Mailing Address	City	State	Zip Code (Plus 4)	DATE			AMOUNT
					MO	DAY	YEAR	\$
<i>Robert Jackson</i>	<i>1236 Rolleston St</i>	<i>Harrisburg</i>	<i>Pa</i>	<i>17104 -</i>				<i>20.00</i>
<i>Walter Marshall</i>	<i>1211 Rolleston Street</i>	<i>Harrisburg</i>	<i>pa</i>	<i>17104 -</i>				<i>100.00</i>
								\$
								\$
								\$
								\$
								\$
								\$
								\$
								\$
								\$
								\$
								\$
								\$
								\$
								\$
								\$
								\$
								\$

PAGE TOTAL
\$ *120.00*

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

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 <i>Friends to Elect Eugenia "Gina" Smith</i>	Reporting Period From <i>1-1-2013</i> To <i>5-6-2013</i>
---	---

				DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR		
<i>Shiela Bennette</i>					\$ <i>500.⁰⁰</i>
Mailing Address <i>1419 N. 2nd St Apt 204</i>					\$
City <i>Harrisburg</i>	State <i>Pa</i>	Zip Code (Plus 4) <i>17104</i>			\$
Employer Name	Occupation				
Employer Mailing Address/Principal Place of Business					
Full Name of Contributor					\$
Mailing Address					\$
City	State	Zip Code (Plus 4)			\$
Employer Name	Occupation				
Employer Mailing Address/Principal Place of Business					
Full Name of Contributor					\$
Mailing Address					\$
City	State	Zip Code (Plus 4)			\$
Employer Name	Occupation				
Employer Mailing Address/Principal Place of Business					
Full Name of Contributor					\$
Mailing Address					\$
City	State	Zip Code (Plus 4)			\$
Employer Name	Occupation				
Employer Mailing Address/Principal Place of Business					
Full Name of Contributor					\$
Mailing Address					\$
City	State	Zip Code (Plus 4)			\$
Employer Name	Occupation				
Employer Mailing Address/Principal Place of Business					



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

PAGE TOTAL
\$ *500.⁰⁰*

SCHEDULE III
STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate <p style="text-align: center; font-size: 1.2em;">Friends to Elect Eugenia "Gina" Smith</p>	Reporting Period From <u>1-1-13</u> To <u>5-6-13</u>
---	---

To Whom Paid <p style="font-size: 1.2em;">Chad Scott Denm Inc</p>	MO 	DAY 	YEAR 	Amount \$ <u>300⁰⁰</u>
Mailing Address <p style="font-size: 1.2em;">908 N. 3rd Street</p>	Description of Expenditure <p style="font-size: 1.2em;">Political Handout Cards</p>			
City <p style="font-size: 1.2em;">Harrisburg</p>	State <p style="font-size: 1.2em;">Pa</p>	Zip Code (Plus 4) <p style="font-size: 1.2em;">17102 -</p>		
To Whom Paid 	MO 	DAY 	YEAR 	Amount \$
Mailing Address 	Description of Expenditure 			
City 	State 	Zip Code (Plus 4) 		
To Whom Paid 	MO 	DAY 	YEAR 	Amount \$
Mailing Address 	Description of Expenditure 			
City 	State 	Zip Code (Plus 4) 		
To Whom Paid 	MO 	DAY 	YEAR 	Amount \$
Mailing Address 	Description of Expenditure 			
City 	State 	Zip Code (Plus 4) 		
To Whom Paid 	MO 	DAY 	YEAR 	Amount \$
Mailing Address 	Description of Expenditure 			
City 	State 	Zip Code (Plus 4) 		
To Whom Paid 	MO 	DAY 	YEAR 	Amount \$
Mailing Address 	Description of Expenditure 			
City 	State 	Zip Code (Plus 4) 		
To Whom Paid 	MO 	DAY 	YEAR 	Amount \$
Mailing Address 	Description of Expenditure 			
City 	State 	Zip Code (Plus 4) 		



Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL
\$ 300⁰⁰