Campaign Finance Report

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

					_	_	CANDI	DATE	-	COM	1ITTEE		LOB	BYIST		
Filer Identificat Number :	i on 200	5299			Report Filed E		CANDI	DATE		COM	111122	✓	LODI	51151		
Name of Filing	Committee, Candi	date or L	obbyist:		HARKIN	IS, PA	T FRIEN	DS OF								
Street Address:																
City:	ERIE						State: PA				Zip Code: 16508-1719					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRID PRIMARY	AY PRE	- 2. X	30 DA PRIMA		POST-	3.		AMENDMENT REPORT?		Yes	No	\checkmark	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRID		E- 5.	30 DA ELECI		POST-	6.		TERMIN REPORT		Yes	No	\checkmark	
report type)	ANNUAL REPOR	T 7.	Year 2012	2			NG METHO CHECK O				PAPER		\checkmark	DISKE	TTE	
Name of Office	Sought by Candid	ate:			•		DATE O	F ELE	CTIO	N	District Number		Par	ty Code	County Code	
DEDDESENTAT	IVE IN THE GENE						мо	DAY	YE	AR	1	STH	DEM	1	25	
KEIKESENIAI			DEMDET				11		6	2012		(SEE IN	STRUCTIO	ONS FOR	CODES)	
	Receipts and	мо	DAY	YEAF	2		мо	DAY	YE	AR	FC	OR OFFIC	CE USE	ONLY		
Expenditure	s from:		3 (6 2	012 T	0	4		9	2012						
A. Amount Bro	ought Forward Fro	om Last F	Report			\$			4,4	42.41						
B. Total Monetary Contributions And Receipts (From Schedule I)										0.00						
C. Total Funds	Available (Sum C	Of Lines A	A and B)			\$			4,4	42.41						
D. Total Exper	nditures (From Sc	hedule II	II)			\$			1,5	11.34						
E. Ending Cast	n Balance (Subtra	ct Line D	From Line	C)		\$			2,9	31.07	-					
F. Value Of In-	-Kind Contribution	ns Receiv	ved (From S	Schedu	le II)	\$				0.00	-					
G. Unpaid Deb	ts And Obligation	s (From	Schedule I	V)		\$			2,9	80.86						
				AFF	IDAVI	T SE	CTION									
	is a Committee re		_								-				. .	
correct and comp	ı) that this report, in lete.	cluaing th	e attached s	cneaule	s filed on	paper	or by elect	ronic me	eaium,	are to t	ine best d	от ту кпоч	vieage	and bell	er, true	
Sworn to and sub	scribed before me th day of	is	20						Si	ignature	e of Perso	on Submitt	ting Rep	oort		
	Signat	ure				-					Prir	nted Name	•			
My Commission E	-										Ema	ail				
	мо	D	AY	YR		_		Are	ea Cod	e	Daytin	ne Teleph	one Nu	mber		
Part II- If this is	a report of a car	ndidate's	authorized	d Comr	nittee, C	andid	ate shall	sign he	ere.							
I swear (or affirm No 320) as amend) that to the best of led.	my knowl	edge and be	lief this	olitical	comm	ittee has n	ot violat	ted any	y provis	ions of th	e act of J	une 3,19	937 (P.L	. 1333,	
Sworn to and subs	cribed before me this day of	S	20							s	ignature	of Candida	ate			
						-					Printe	ed Name				
My Commission Ex	Signature	•				-					Ema	ail				
	рп сэ 					_										
	мо	D	AY	YR	2			Area	Code		D	aytime T	elephon	e Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reportin	g Period		
HARKINS, PAT FRIENDS OF	From:	<u>3/6/201</u>	<u>2</u> To:	<u>4/9/2012</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g Period	(1)	\$	0.00
2. Contributions Received - \$ 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	g 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
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	g Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00
4				

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			Reporting Period					
			From	m:		То		
		·			DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	4)					
								PAGE TOTAL
Enter Grand Total of Part A on Sche	dule I, Detailed Sun	nmary Page, Se	ection	12.			\$	0.00

Use this Part to it	emize all othei 50.01 to \$250.0	1 TO \$250.00 contribution 00 in the repo	s wi ortin	ith an Ig per	aggreg iod.			rom
Name of Filing Committee or Candida	te		Rep	orting P	eriod			
			Fror	m:		Тс):	
					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, Detail	ed Summary Pag	je, Se	ection 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 Candidate			Reporting	Period				
			From:			То:		
				DA	TE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.00
Mailing Address							- \$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	lule I, Detailed Sun	nmary 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.)

		Rep	orting Pe	riod			
		From	n:		Т):	
			D	ATE		AM	OUNT
			мо	DAY	YEAR	\$	0.00
State	Zip Code (Plu	s 4)					
•			Occupat	ion			
ce of Business	City			State		Zip Code	(Plus 4)
dule I, Detailed Su	ummary Page	Sectio	on 3.				GE TOTAL 0.00
	State ce of Business	State Zip Code (Plus ce of Business City	State Zip Code (Plus 4) ce of Business City	From: DA DA State Zip Code (Plus 4) Occupat	From: DATE DATE DATE State Zip Code (Plus 4) City Occupation Ce of Business City State	From: To DATE MO DAY YEAR State Zip Code (Plus 4) Image: Comparison of the second	From: To: DATE AM MO DAY YEAR \$ State Zip Code (Plus 4) Occupation ce of Business City State Zip Code

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 Peric	d				
			From:			То:			
				D	ATE			AMOUNT	r
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (Plus 4)						
Receipt Description	·	•					•		
		_						PAGE TO	TAL
Enter Grand Total of Part E on Sched	ule 1, Detailed Sumn	nary 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		
HARKINS, PAT FRIENDS OF	From:	<u>3/6/2012</u> то:	<u>4/9/2012</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T 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	Period	·			
F			From:			То:		
				DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address						\$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:						-		
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	e,		PAGE TOTA	<u>، ۱</u>
						\$		0.00

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

Name of Filing Committee or Candidate			Rej	porting I	Period		
			Fro	om:		То:	
					DATE		AMOUNT
Full Name of Contributor				мо	DAY	YEAR	
Mailing Address			-				\$ 0.00
City	State	Zip Code(Plus 4)					
Employer of Contributor	•	·		Occupa	ation		•
Employer Mailing Address/Principal Plac	e of Business	City	State	e Zip	Code(Plus 4)	Descri	ption of Contribution
Enter Grand Total of Part G on Scho Summary Page, Section 3.	edule II, In-Kin	d Contributions D	etaile	ed			PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

<u>4/9/2012</u>						
AMOUNT						
50.00						
35.00						
50.00						
PROGRAM AD						
50.00						
50.00						
50.00						
<u>.</u>						
<u>.</u>						
<u>.</u>						
845.00						
845.00						
845.00						
845.00 PAT						

To Whom Paid			мо	DAY	YEAR			
ERIE COUNTY DEMOCRATIC PA	ARTY		мо					
Mailing Address			3	29	2012	\$	85.00	
City ERIE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	16501	DINNER	& PROGR	AM AD			
To Whom Paid			мо	DAY	YEAR			
HOLY TRINITY CHURCH			MO					
Mailing Address			3	29	2012	\$	300.00	
City ERIE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	165032196	ZABAWA PROGRAM AD					
To Whom Paid			мо	DAY	YEAR			
ERIE COUNTY BAR ASSOC.			мо					
Mailing Address			3	29	2012	\$	25.00	
City ERIE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	165021427	ANNUAI	LAW DAY	LUNCH			
							PAGE TOTAL	
Enter Grand Total of Expend	litures on Page 1, Re	port Cover Page, Item D	•			\$	1,511.34	

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			Reporting Period					
HARKINS, PAT FRIENDS OF			From:	<u>3/6/2012</u> To:			<u>4/9/2012</u>	
					DATE		Outstanding Balance of Debt	
Name of Creditor PRINTING CONCEPTS				мо	DAY	YEAR		
Mailing Address				4	13	2006	; \$	1,382.00
City ERIE	State PA	Zip Code (P 16509	lus 4)	Description of Debt MAILER PAID BY PAT HARKINS				
Name of Creditor POSTMASTER GENERAL				мо	DAY	YEAR		
Mailing Address				4	13	2006	5 \$	1,348.86
City ERIE	State PA	Zip Code (P	lus 4)	Description of Debt MAILER PAID BY PAT HARKINS				
Name of Creditor ERIE FIRE PREVENTION				мо	DAY	YEAR		
Mailing Address							\$	250.00
City ERIE	State	Zip Code (P	lus 4)	Description of Debt PROGRAM AD PAID BY PAT HARKINS				
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							\$	PAGE TOTAL 2,980.86