Campaign Finance Report

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

Filer Identificati	ion	20120	20961		-	Repor		CANDI	DATE	✓	СС	OMMITTEI		LOBI	BYIST	
Number : Name of Filing C	Committee	Candida	ate or L	obbyicty		Filed KIM, P	-									
	Johnnittee,	Canulua		obbyist:		KIM, P/	41111	1								
Street Address:																
City:								State:	Zip Code: 17110-1104							
TYPE OF REPORT	6TH TUESD PRE-PRIMA		1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 DA PRIMA		POST-	OST- 3.		AMENDMENT REPORT?		Yes	No	\checkmark
(place X to the right of	6TH TUESD PRE-ELECTI		4.	2ND FRIDA ELECTION	Y PRE	∃- 5. X	30 DA		POST-	POST- 6.		TERMINATION REPORT?		Yes	No	~
report type)	ANNUAL R	EPORT	7.	Year 2012				NG METH				PAPER	APER			TTE
Name of Office S	– Sought by C	andidat	e:					DATE C	OF ELE	CTION		District Number	Office Code	Par	ty Code	County Code
REPRESENTATI		CENED						мо	DAY	YEA	R	103	STH	DEN	1	22
REFRESENTATI		GLNLK	AL ASS					11		6	2012]	(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of		and	мо	DAY	YEAR	2		мо	DAY	YEA	R	FO	R OFFIC	e use	ONLY	
Expenditures	s from:			9 18	2	012	0	10		22	2012					
A. Amount Bro	ught Forwa	rd From	n Last R	eport	-		\$				0.00					
B. Total Monet	ary Contrib	utions A	And Rec	eipts (Fron	n Sche	dule I)	\$				0.00					
C. Total Funds	Available (Sum Of	Lines A	and B)			\$				0.00					
D. Total Expen	ditures (Fro	om Sche	dule II	I)			\$			33	2.37					
E. Ending Cash	Balance (S	ubtract	Line D	From Line	C)		\$			(332	.37)					
F. Value Of In-	Kind Contri	butions	Receiv	ed (From S	chedu	le II)	\$				0.00	1				
G. Unpaid Deb	ts And Oblig	ations	(From S	Schedule I\	/)		\$				0.00					
					AFF	IDAV	IT SE	CTION								
PART I - If this is		-	-	_								-				
I swear (or affirm) correct and comple) that this rep ete.	ort, inclu	uding the	e attached sc	hedules	s filed on	paper	or by elect	ronic m	edium, a	re to	the best of	my know	ledge	and beli	ef , true
Sworn to and subs	scribed before day of	e me this		20						Sig	natur	e of Person	Submitt	ng Rep	oort	
		Signatur	e				_					Print	ed Name			
My Commission E	xpires	-										Email	l			
	м	D	D	AY	YR		_		Are	ea Code		Daytime	e Telepho	one Nu	mber	
Part II- If this is	a report of	f a cand	idate's	authorized	Comm	nittee, G	Candid	ate shall	sign he	ere.						
I swear (or affirm) No 320) as amendo		pest of m	y knowle	edge and bel	ief this	political	comm	ittee has r	not viola	ted any	provis	ions of the	act of Ju	ne 3,1	937 (P.L	. 1333,
Sworn to and subso	ribed before day of	me this		20							s	ignature o	f Candida	te		
	uay UI						_					Printeo	d Name			
	-	nature					-					Email	1			
My Commission Exp	bires											Emai	I			
		мо	D	AY	YR		_		Area	Code		Da	ytime Te	lephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** From: <u>9/18/2012</u> To: KIM, PATTY H 10/22/2012 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.)

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: To:			:			
		·			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 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			D:				
					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	\$	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 Schedule I, Detailed Summary Page, Section 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						
			Fron	n:		Τά):			
				D/	ATE		A	MOUNT		
Full Name of Contributor				мо	DAY	YEAR	\$	0.00		
Mailing Address										
City	State	Zip Code (Plus	s 4)							
Employer Name				Occupation						
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip Cod	e (Plus 4)		
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.							P. \$	AGE 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			Reporting Period							
				om: To:						
				D	ATE			AMOUNT		
Full Name				мо	DAY	YEAR	\$		0.00	
Mailing Address										
City	State	Zip Code (Plus 4)							
Receipt Description	·									
		_	.					PAGE TOT	AL	
Enter Grand Total of Part E on Schedule I, Detailed 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	l	
КІМ, РАТТҮ Н	From:	<u>9/18/2012</u> то:	<u>10/22/2012</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, 1		\$	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						
				From:			То:		
				DATE			AMOUNT		
Full Name of Contributor				DAY	YEAR				
Mailing Address		_				7 \$		0.00	
City	State	Zip Code (Plus 4)							
Description of Contribution:			1						
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,		PAGE TOTA	AL.	
						\$		0.00	

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

Name of Filing Committee or Candidate				Reporting Period						
				From:						
					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-Kind	d Contributions D	etaile	ed			PAGE TOTAL 0.00			

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate				Reporting Period						
КІМ, РАТТҮ Н				<u>9/1</u>	<u>8/2012</u>	<u>10/22/2012</u>				
		DATE		AMOUNT						
To Whom Paid			мо	DAY	YEAR					
Wegmans			-							
Mailing Address 6416 Carlist	e Pike		10	20	2012	\$	332.37			
City Mechanicsburg	State	Zip Code (Plus 4)	Description of Expenditure							
	PA	17050	food for	r DePasqua	ile house	party				
							PAGE TOTAL			
Enter Grand Total of Expend) .			\$	332.37					