Campaign Finance Report

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

Filer Identification	on	20120	C0961				port ed B		CANI	NDIDATE COMMITTEE LOBBYIST									
Name of Filing C	ommittee, (Candida	ite or Lo	obbyist:		KIM	1, PA	TTY H											
Street Address:																			
City:									State:					Zip Code	: 17	110-1	104		
TYPE OF REPORT	6TH TUESDA PRE-PRIMAR		1.	2ND FRIDAY PRIMARY	Y PRE-	-	2.	30 DA PRIMA		P	OST-	3.		AMENDME REPORT?	NT	Yes	No		\checkmark
(place X to the right of	6TH TUESDA PRE-ELECTION		4.	2ND FRIDAY	Y PRE	<u>-</u>	5.	30 DA ELECT		P	OST-	6. X		TERMINAT REPORT?	ION	Yes	No	,	\
report type)	ANNUAL RE	EPORT	7.	Year 2012					IG MET							\checkmark	DISKE	TTE	
Name of Office S	ought by Ca	andidat	e:						DATE	0	F ELEC	CTION		District Number	Office Code	Par	ty Code	Cour	
SESSECTATE	- 	SENED	466	= 1.51.1/					МО		DAY	YEA	R	103	STH	DEN	1	22	
REPRESENTATI	VE IN THE	GENEK	AL ASS	FWRLA					1	.1		6	2012	 	(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of I		and	МО	DAY	YEAR	Ł			МО		DAY	YEA	R	FOR	OFFIC	E USE	ONLY		
Expenditures	from:		1	10 23	2	012	<u>?</u> T	О	1	l 1	2	26	2012						
A. Amount Bro	ught Forwa	rd From	Last R	eport				\$				(332	.37)						
B. Total Moneta	ary Contribu	utions A	nd Rec	eipts (From	Sche	dule	e I)	\$				33	2.37						
C. Total Funds Available (Sum Of Lines A and B) \$ 0.00																			
D. Total Expenditures (From Schedule III) \$ 0.00																			
E. Ending Cash	Balance (S	ubtract	Line D	From Line C	2)			\$				(0.00						
F. Value Of In-l	Kind Contrib	butions	Receive	ed (From So	chedu	le II	I)	\$				(0.00						
G. Unpaid Debt	s And Oblig	ations ((From S	chedule IV)			\$					0.00		,				
					AFF	·ID/	AVI	T SE	CTIO	V									
PART I - If this is		•	•	=															
I swear (or affirm) correct and comple		ort, inclu	ıding the	: attached sch	redules	s file	≟d on	paper o	or by ele	ctr	onic me	edium, a	re to t	the best of i	my know	/ledge	and beli	ef , tr	шe
Sworn to and subs	cribed before day of	me this		20						•		Sig	nature	e of Person	Submitti	ing Rep	ort		_
		Signatur				_		<u>-</u>		•				Printe	d Name				-
My Commission Ex		Signatur	e							-				Email					-
	мо)	D#	AY	YR						Are	a Code		Daytime	Telepho	one Nu	mber		
Part II- If this is	a report of	a cand	idate's	authorized	Comn	nitte	ee, C	andida	ate sha	II s	sign he	ere.							
I swear (or affirm) No 320) as amende		est of m	y knowle	edge and belie	ef this	; poli	itical	commi	ittee has	nc	ot violat	ed any	provis	ions of the	act of Ju	ine 3,1	937 (P.L	133:	3,
Sworn to and subsc		me this											s	ignature of	Candida	te			-
	day of —							-						Printed	Name				-
	Sig	nature				_		-		_									_
My Commission Exp	_													Email					
	,	мо	D/	AY	YR	l		-			Area	Code		Day	time Te	lephon	e Numb	er	⁻

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period					
KIM, PATTY H	From:	10/23/20	<u>12</u> To:	11/26/2012			
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor							
TOTAL for the Reporting) 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)	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)			\$	332.37			
All Other Contributions (Part D)			\$	0.00			
TOTAL for the Reporting) Period	(3)	\$	332.37			
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)							
TOTAL for the Reporting) Period	(4)	\$	0.00			
			1				
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	332.37			

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	e of Filing Committee or Candidate			Reporting Period						
		F	rom:		То	:				
		1		DATE			AMOUNT			
Full Name of Contributing C	ommittee		МО	DAY	YEAR					
Mailing Address						\$	0.00			
City	State	Zip Code (Plus 4)								

PAGE TOTAL
0.00

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

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.

Name of Filing Committee	or Candidate		Reporting Period					
			From:		To) :		
		1		DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address						\$	0.00	
City	State	Zip Code (Plus 4)]					

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

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						
KIM, PATTY H	From:	10/23/2012	То:	11/26/2012			

DATE AMOUNT

Full Name of Contributing Committee	мо	DAY	YEAR			
Friends of Patty Kim	140		ILAK	\$ 332.37		
Mailing Address 2418 N 2nd St			11	5	2012	,
City Harrisburg	State	Zip Code (Plus 4)			2012	
	PA	17110				

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

PAGE TOTAL \$ 332.37

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	2			Rep	orting Pe	riod			
				Fron	n:		To) :	
					D	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR	\$	0.00
Mailing Address									
City	State	Zi	p Code (Plus	(4)					
Employer Name	•				Occupa	tion	-	-	
Employer Mailing Address/Principal Pl	ace of Business		City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3									PAGE TOTAL
								\$	0.00

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 Peri	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plus 4)					
Receipt Description	•	•			•			
Forten Commit Tatal of Boot	F an Cabadala I Batallad	I C B	C					PAGE TOTAL
Enter Grand Total of Part	e on Schedule I, Detalled	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 Per	iod					
KIM, PATTY H	From:	<u>10/23/2012</u> To:	11/26/2012				
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	R					
TOTAL for the Reporting Pe	eriod (1)	\$	0.00				
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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,		\$	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			мо	DAY	YEAR			
Mailing Address		_				 		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:		•	•			•		
Enter Grand Total of Part F on Sche Section 2.	dule II, In-Kind (Contributions Detai	iled Sum	mary Pag	je,		PAGE TOTAL	
						\$	(0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address									\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	ation				
Employer Mailing Address/Principal Place of Business City					e Zip	Code(Plus 4)	Desci	ript	ion of Contribution	on
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	ontributions De	etaile	ed				PAGE TO	ΓAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period				
			From			То:		
				DATE			AMOUNT	
To Whom Paid				DAY	YEAR			
Mailing Address						\$	0.00	
City	State	Zip Code (Plus 4)) Description of Expenditure					
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item I							PAGE TOTAL	
Lines Grand Total Of Expenditures C	ni rage 1, keport C	over rage, Item L	, .			\$	0.00	