Campaign Finance Report

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

| Filer Identificati Number : | on | 20052 | 299 | | | | Repo Filed | _ | | CAI | NDII | DATE | | СОМ | MITTEE | ✓ [| LOB | BYIST | | |
|--|----------------------|---------------|-------------|----------------|----------------|----------|---------------|-------------|------------|--------|--------|----------|--------|-------------|---------------------|----------------|---------------------|--------|-----------|----------|
| Name of Filing C | ommittee | e, Candida | ate or Lo | obbyis | st: | F | RIEN | DS O | FΡ | AT F | IAR | KINS (| 2/0 | TREASU | RER SUS | SAN M. I | COWA | LSKI | | |
| Street Address: | 2805 | SCHLEY | ST | | | | | | | | | | | | | | | | | |
| City: | ERIE | | | | | | | | 9 | State | e: | PA | | | Zip Cod | le: 16 | 508-1 | 719 | | |
| TYPE OF REPORT | 6TH TUES PRE-PRIM | | 1. | 2ND I PRIMA | FRIDAY ARY | PRE- | 2. | 30 I PRI | DAY MAI | | Р | OST- | 3. | | AMENDM REPORT | | Yes | N | 0 | / |
| (place X to the right of | 6TH TUES PRE-ELEC | | 4. | 2ND I | FRIDAY TION | PRE- | - 5. | 30 I ELE | | | Р | OST- | 6. | | TERMINATION REPORT? | | Yes | Ν | 0 | \ |
| report type) | ANNUAL | REPORT | 7. X | Year | 2013 | | | | | G ME | | _ | | | PAPER | | \checkmark | DISK | ETTE | |
| Name of Office S | - Sought by | Candidat | e: | | | | | | | DAT | E O | F ELE | CTI | NC | District Number | Office Code | Par | ty Cod | e Coui | |
| REPRESENTATI | \/E TN TL | IE CENIED | AL ACC | EMDL | v | | | | ī | МО | | DAY | Υ | EAR | 1 | STH | DEN | 1 | 25 | |
| REPRESENTATI | VL IN III | IL GLINEK | AL ASS | LMDL | .I | | | | | | 11 | | 5 | 2013 | | (SEE IN | TRUCTI | ONS FO | CODES | 5) |
| Summary of Expenditures | | and | МО | DA | Y | YEAR | | | I | МО | | DAY | Y | EAR | FO | R OFFIC | E USE | ONLY | 7 | |
| expenditures | irom: | | 1 | 11 | 26 | 20 |)13 | то | | | 12 | : | 31 | 2013 | | | | | | |
| A. Amount Bro | ught Forv | vard From | ı Last R | eport | | | | | \$ | | | | 6, | 670.19 | | | | | | |
| B. Total Monetary Contributions And Receipts (From Schedule I) \$ 4,500.00 | | | | | | | | | | | | | | | | | | | | |
| C. Total Funds Available (Sum Of Lines A and B) \$ 11,170.19 | | | | | | | | | | | | | | | | | | | | |
| D. Total Expenditures (From Schedule III) \$ 3,699.42 | | | | | | | | | | | | | | | | | | | | |
| E. Ending Cash Balance (Subtract Line D From Line C) | | | | | | | | \$ | | | | 7, | 470.77 | | | | | | | |
| F. Value Of In- | Kind Cont | tributions | Receive | ed (Fr | om Sc | hedul | e II) | | \$ | | | | | 0.00 | | | | | | |
| G. Unpaid Debt | s And Ob | ligations | (From S | Sched | ule IV) |) | | | \$ | | | | 2, | 980.86 | | | | | | |
| | | | | | | AFFI | [DAV | IT S | EC | CTIC | N | | | | | | | | | |
| PART I - If this is | | - | - | | _ | | | | | | | | | _ | | | | | | |
| I swear (or affirm) correct and comple | | report, inclu | uding the | attacl | hed sch | edules | filed o | n pape | er o | r by e | electr | onic m | ediun | n, are to t | the best o | f my knov | vledge | and be | lief , tr | ue |
| Sworn to and subs | cribed befo | ore me this | | 20 | | | | | | | | | | Signature | of Perso | n Submitt | ing Re _l | ort | | _ |
| | | Signatur | e | - | | | | _ | | | | | | | Prin | ted Name | | | | |
| My Commission Ex | pires | | | | | | | | | | • | | | | Ema | il | | | | |
| | | мо | DA | ΑY | | YR | | | | | | Arc | ea Co | de | Daytim | e Teleph | one Nu | mber | | |
| Part II- If this is | a report | of a cand | idate's | autho | rized (| Comm | ittee, | Cand | ida | te sh | nall s | sign he | ere. | | | | | | | |
| I swear (or affirm) No 320) as amende | | e best of m | y knowle | edge aı | nd belie | f this p | politica | al com | mit | tee h | as no | ot viola | ted a | ny provis | ions of th | e act of Ju | ıne 3,1 | 937 (P | .L. 133 | з, |
| Sworn to and subsc | | re me this | | | | | | | | | | | | s | ignature o | of Candida | ite | | | _ |
| - | day of — | | | _ 20 _ | | | | _ | | | | | | | Printe | d Name | | | | - |
| | | Signature | | | | | | _ | | | | | | | | | | | | _ |
| My Commission Exp | ires | | | | | | | | | | | | | | Ema | il | | | | |
| | _ | мо | D | AY | | YR | | | | | | Area | Code | | Da | aytime To | elephor | ne Num | ber | _ |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| Name of Filing Committee or Candidate | Reporting | g Period | | |
|---|-----------|-----------|---------------|------------|
| FRIENDS OF PAT HARKINS C/O TREASURER SUSAN M. KOWALSKI | From: | 11/26/201 | <u>l3</u> To: | 12/31/2013 |
| 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) | | | \$ | 2,700.00 |
| All Other Contributions (Part B) | | | \$ | 100.00 |
| TOTAL for the Reporting | Period | (2) | \$ | 2,800.00 |
| 3. Contributions Received Over \$250.00 (From Part C and Part D) | | | | |
| Contributions Received From Political Committees (Part C) | | | \$ | 1,700.00 |
| All Other Contributions (Part D) | | | \$ | 0.00 |
| TOTAL for the Reporting | Period | (3) | \$ | 1,700.00 |
| 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E) | | | | |
| TOTAL for the Reporting | Period | (4) | \$ | 0.00 |
| Total Monetary Contributions and Receipts During this Reporting Period (Add and totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page | | | \$ | 4,500.00 |

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 Ca | Name of Filing Committee or Candidate | | | Reporting Period | | | | | |
|--|---------------------------------------|-----------------------------------|-------|------------------|------------------|------------------|--|--|--|
| FRIENDS OF PAT HARKINS C/C |) TREASURER SUSAN I | M. KOWALSKI | From: | 11/26/20 |) <u>13</u> To | : 12/31/2013 | | | |
| | | | | DATE | | AMOUNT | | | |
| Full Name of Contributing Commit | | | мо | DAY | YEAR | | | | |
| Mailing Address P.O. BOX 8 | 63 | | | | | \$ 250.00 | | | |
| City HARRISBURG | State PA | Zip Code (Plus 4 171080863 | 12 | 18 | 2013 | | | | |
| Full Name of Contributing Commit VISION COMMITTEE | tee | | МО | DAY | YEAR | | | | |
| Mailing Address 2205 STRAWBERRY SQUARE City HARRISBURG State Zip Code (Plus 4) | | | | 18 | 2013 | \$ 250.00 | | | |
| MAKKISDURG | PA | 17101 | | | | | | | |
| Full Name of Contributing Commit | МО | DAY | YEAR | | | | | | |
| Mailing Address 204 STATE | ST | | | | | \$ 250.00 | | | |
| City HARRISBURG | State PA | Zip Code (Plus 4 17101 | 12 | 18 | 2013 | | | | |
| Full Name of Contributing Commit PA REALTORS POL. ACTION COM | | · | МО | DAY | YEAR | | | | |
| Mailing Address 500 N. 12T | | | 12 | 18 | 2013 | \$ 250.00 | | | |
| City LEMOYNE | State PA | Zip Code (Plus 4 | | | | | | | |
| Full Name of Contributing Committee PENNSYLVANIA SOCIETY OF ANESTHESIOLOGIST | | | | DAY | YEAR | | | | |
| Mailing Address 50 S PROVIDENCE RD | | | | | \$ 250.00 | | | | |
| City MEDIA | State PA | Zip Code (Plus 4 | 12 | 18 | 2013 | | | | |

| | Full Name of Contributing Committee PHYSICIAN ASSISTANTS PAC | | | | | | |
|--|--|---------------------|-------------------|----|-----|------------------|------------------|
| Mailing Address 2 | 00 N. THIRD ST. | SUITE 1500 | | | | | \$ 200.00 |
| City HARRISBURG | | State | Zip Code (Plus 4) | 12 | 18 | 2013 | |
| , HARRISBURG | | PA | 17101 | | | | |
| Full Name of Contribution PA ASSN. OF DEER FAR | | | | МО | DAY | YEAR | |
| Mailing Address 2 | 00 N. THIRD ST. | SUITE 1500 | | | | | \$ 250.00 |
| City HARRISBURG | | State | Zip Code (Plus 4) | 12 | 18 | 2013 | |
| nakkisbukg | | PA | 17101 | | | | |
| Full Name of Contribution PA OPHTHALMOLOGY P | | | | МО | DAY | YEAR | |
| Mailing Address 2 | 200 N. 1111ND 31. 3011E 1300 | | | | | | \$ 250.00 |
| City HARRISBURG | | State | Zip Code (Plus 4) | 12 | 18 | 2013 | |
| TIVILL'S BOTTO | | PA | 17101 | | | | |
| Full Name of Contribution | | | | мо | DAY | YEAR | |
| Mailing Address 1 | 800 CENTER ST | | | | | | \$ 250.00 |
| City CAMP HILL | | State | Zip Code (Plus 4) | 12 | 28 | 2013 | |
| CAPII TILL | | PA | 170890089 | | | | |
| Full Name of Contribution BUCHANAN INGERSOLIC GOVERNMENT | _ | 1. FOR EFFECTIVE ST | ATE | МО | DAY | YEAR | |
| Mailing Address 3 | 01 GRANT ST 2 | OTH FLOOR | | | | | \$ 250.00 |
| City PITTSBURGH | | State | Zip Code (Plus 4) | 12 | 30 | 2013 | |
| | | PA | 15219 | | | | |
| Full Name of Contributing Committee GENERAL ELECTRIC PAC MULTICANDIDATE COM. | | | | МО | DAY | YEAR | |
| Mailing Address 1299 PENNSYLVANIA AVE NW | | | | | | \$ 250.00 | |
| City WASHINGTON | | State | Zip Code (Plus 4) | 12 | 30 | 2013 | |
| WASHINGTON | | l | | I | l | I | |
| | | DC | 20004 | | | | |

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

PAGE TOTAL \$ 2,700.00

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

FRIENDS OF PAT HARKINS C/O TREASURER SUSAN M. KOWALSKI

From: <u>11/26/2013</u> To:

DATE

12/31/2013

AMOUNT

| Full Name of Contribe | utor | МО | DAY | YEAR | | | |
|---------------------------------------|------|------------------------|-----------------------------------|------|----|------|-----------|
| Mailing Address 4640 HARBORVIEW DRIVE | | | | | | | \$ 100.00 |
| City ERIE | | tate ^P A | Zip Code (Plus 4) 16508 | 8 | 23 | 2013 | |

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

PAGE TOTAL \$ 100.00

PART C

Reporting Period

Contributions Received From Political Committees

Name of Filing Committee or Candidate

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.

| FRIENDS OF PAT HARKINS C/O TREASU KOWALSKI | IENDS OF PAT HARKINS C/O TREASURER SUSAN M. FI WALSKI | | | 11/2 | 6/2013 | То: | 12/ | <u>/31/2013</u> |
|--|--|------------------------------------|------------------------|------|--------|------|-----|-----------------|
| | | | | DA | TE | | AI | MOUNT |
| Full Name of Contributing Committee POLITICAL ACTION COM. STEAMFITTER | S LOCAL 449 | | | МО | DAY | YEAR | | |
| Mailing Address 1517 WOODRUFF ST | | | | | | 201- | \$ | 700.00 |
| City PITTSBURG | State PA | Zip Code (Plus 4) 152205317 | | 11 | 26 | 2013 | | |
| Full Name of Contributing Committee POLITICAL ACTION COM. FOR EDUCATION PSEA | | | | | DAY | YEAR | | |
| Mailing Address 400 NORTH THIRD S | T P.O. BOX 1724 | | | | | 201- | \$ | 500.00 |
| City HARRISBURG | State PA | Zip Code 171051 | Plus 4) 724 | 11 | 26 | 2013 | | |
| Full Name of Contributing Committee AFSCME COUNCIL 13 POLITICAL & LEG | ISLATIVE | | | МО | DAY | YEAR | | |
| Mailing Address 4031 EXECUTIVE PAR | RK DRIVE | | | | | | \$ | 500.00 |
| City HARRISBURG | State PA | Zip Code 171111 | (Plus 4) 507 | 12 | 18 | 2013 | | |
| Enter Grand Total of Part C on Sched | ule I, Detailed Sum | ımary Pa | age, Sectio | n 3. | | | | PAGE TOTAL |

1,700.00

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 Candida | me of Filing Committee or Candidate | | Rep | orting Pe | riod | | | | | |
|---|-------------------------------------|--|--------------|-----------|--------|-------|------|------------|------------|------|
| | | | | Fror | m: | | To |) : | | |
| | | | | | D | ATE | | | AMOUNT | i |
| Full Name of Contributor | | | | | мо | DAY | YEAR | | | |
| Mailing Address State Zin Code (Plus 4) | | | | | | | \$ | | 0.00 | |
| State Zip Code (Plus 4) | | | s 4) | | | | | | | |
| Employer Name | | | | | Occupa | tion | | | | |
| Employer Mailing Address/Principal P Business | Place of | | City | | • | State | | Zip (| Code (Plus | : 4) |
| Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section | | | | on 3. | | | \$ | PAGE TO | 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 | ting Perio | od | | | |
|-------------------------------|------------------------|-------------------------------|---------|------------|-----|------|----|------------|
| | | | From: | | | To: | | |
| | | | | D | ATE | | | AMOUNT |
| Full Name | | | | МО | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Code (| Plus 4) | | | | | |
| Receipt Description | - | • | | • | • | | | |
| Enter Grand Total of Part E o | on Schedule I. Detaile | d Summary Page | Section | 4 | | | , | PAGE TOTAL |
| | m Schedule 1, Betailet | <i>z</i> 50a. y 1 dgc, | Section | | | | \$ | 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 Perio | od | | | | | | | |
|--|-----------------|------------------------------|------------|--|--|--|--|--|--|
| FRIENDS OF PAT HARKINS C/O TREASURER SUSAN M. KOWALSKI | From: | <u>11/26/2013</u> To: | 12/31/2013 | | | | | | |
| 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 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 Candidat | :e | | Reporting | g 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 Sch | andula II. In-Kir | nd Contributions Data | ilad Sum | mary Pag | | | DACE TOTAL |
| Section 2. | iedule II, III-KII | ia contributions Deta | iiieu Suiii | iliai y Pag | , je, | | PAGE TOTAL |
| | | | | | | \$ | 0.00 |

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

| Name of Filing Committee or Candidat | nme of Filing Committee or Candidate | | | | Reporting Period | | | | | |
|---|--------------------------------------|---------|------------|---------|------------------|-----------|-----------|-----------|-------|------------------------|
| | | | | | Fro | om: | | To: | | |
| | | | | | | | DATE | | | AMOUNT |
| Full Name of Contributor | | | | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | | \$ | 0.00 | |
| City | State | | Zip Code(F | Plus 4) | | | | | | |
| Employer of Contributor | | | • | | | Occupa | tion | | • | |
| Employer Mailing Address/Principal Pla Business | ace of | City | | State | | Zip 4) | Code(Plus | Descri | ption | of Contribution |
| Enter Grand Total of Part G on Sc Summary Page, Section 3. | hedule II, I | In-Kind | Contributi | ons De | taile | ed | | | | PAGE TOTAL 0.00 |

SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate | Reportin | ng Period | | | |
|--|----------|------------|-----|------------|--|
| FRIENDS OF PAT HARKINS C/O TREASURER SUSAN M. KOWALSKI | From | 11/26/2013 | То: | 12/31/2013 | |
| | | DATE | | AMOUNT | |

| | | | | | DATE | | AMOUNT |
|---------------------------------|--|--------------------|-----------------------------------|--------------------------|---------------------------|-----------|--------------|
| To Whom Paid PEOPLE FOR LIFE | | | | мо | DAY | YEAR | |
| Mailing Address | PO BOX 1126 | | | 1 | 7 | 2013 | \$ 50.00 |
| City ERIE | State Zip Code (Plus 4) PA 16512 | | | | otion of Exp | | |
| To Whom Paid EAST HIGH SCHO | OL | | | мо | DAY | YEAR | |
| Mailing Address | 1001 ATKINS ST | | | 1 | 7 | 2013 | \$ 100.00 |
| City ERIE | | State PA | Zip Code (Plus 4) 16503 | 1 | otion of Exp | | |
| To Whom Paid ORPHAN ANGELS | | | | мо | DAY | YEAR | |
| Mailing Address | 5439 WEST LAKE RO |)AD | | 1 | 7 | 2013 | \$ 50.00 |
| City ERIE | | State PA | Zip Code (Plus 4) 16505 | | otion of Exp | | ΓΙΟΝ CENTER |
| To Whom Paid MARTIN LUTHER F | KING CENTER | | | МО | DAY | YEAR | |
| Mailing Address | 312 CHESTNUT ST. | | | 1 | 19 | 2013 | \$ 50.00 |
| City ERIE | | State PA | Zip Code (Plus 4) 16502 | Descrip DINNER | otion of Exp | penditure | |
| To Whom Paid STRONG VINCENT | BASEBALL BOOSTER | S | | МО | DAY | YEAR | |
| Mailing Address | 4243 REGIS DRIVE | | | 1 | 29 | 2013 | \$ 50.00 |
| City ERIE | | State PA | Zip Code (Plus 4) 16510 | 1 | otion of Exp ALL BOOST | | |

| To Whom Paid FRIENDS OF DAV | E BRENNAN | | | мо | DAY | YEAR | | |
|---|--|------------------------|-----------------------------------|--|------------------------------|--|----|--------|
| Mailing Address | 3407 GLENSIDE | | | 2 | 25 | 2013 | \$ | 100.00 |
| City ERIE | | State PA | Zip Code (Plus 4) 16508 | 1 | otion of Exp IGN CONTI | | I | |
| To Whom Paid COMMITTEE TO E | ELECT JOE SINNOTT | | | МО | DAY | YEAR | | |
| Mailing Address | PO BOX 3805 | | | 2 | 25 | 2013 | \$ | 50.00 |
| City ERIE | | State PA | Zip Code (Plus 4) 16508 | | ition of Exp IGN CONTI | | l | |
| To Whom Paid CLERK OF RECOR | DS COMMITTEE P. FE | TZNER | | МО | DAY | YEAR | | |
| Mailing Address | PO BOX 1953 | | | 2 | 25 | 2013 | \$ | 50.00 |
| City ERIE | State Zip Code (Plus 4) PA 16512 | | | | tion of Exp | | l | |
| | | | | | | | | |
| To Whom Paid COMMITTEE TO R | RE-ELECT SUE MACK | | | МО | DAY | YEAR | | |
| | RE-ELECT SUE MACK 2125 LAKESIDE DRI | IVE | | мо 3 | | | \$ | 50.00 |
| COMMITTEE TO R | | State PA | Zip Code (Plus 4) 16511 | 3 Descrip | DAY | YEAR 2013 penditure | \$ | 50.00 |
| COMMITTEE TO R Mailing Address City ERIE To Whom Paid | | State PA | | 3 Descrip | DAY 7 | YEAR 2013 penditure | \$ | 50.00 |
| COMMITTEE TO R Mailing Address City ERIE To Whom Paid | 2125 LAKESIDE DRI | State PA | | 3 Descrip CAMPA | 7 Ition of Exp | YEAR 2013 Denditure RIBUTION | \$ | 50.00 |
| COMMITTEE TO R Mailing Address City ERIE To Whom Paid COMMITTEE TO E | 2125 LAKESIDE DRI | State PA | | 3 Descrip CAMPA MO 3 Descrip | 7 tion of Exp IGN CONTI | YEAR 2013 Denditure RIBUTION YEAR 2013 Denditure | \$ | |
| COMMITTEE TO R Mailing Address City ERIE To Whom Paid COMMITTEE TO E Mailing Address | 2125 LAKESIDE DRI | State PA EWICZ State | Zip Code (Plus 4) | 3 Descrip CAMPA MO 3 Descrip | DAY 7 Ition of Exp IGN CONTI | YEAR 2013 Denditure RIBUTION YEAR 2013 Denditure | \$ | |
| COMMITTEE TO R Mailing Address City ERIE To Whom Paid COMMITTEE TO E Mailing Address City ERIE To Whom Paid | 2125 LAKESIDE DRI | State PA EWICZ State | Zip Code (Plus 4) | 3 Descrip CAMPA MO 3 Descrip CAMPA | DAY 7 Ition of Exp IGN CONTI | YEAR 2013 Penditure RIBUTION YEAR 2013 Penditure RIBUTION | \$ | |

| | | | | | | | PAGE | 14 |
|--|-----------------|--------------------|--|-------------------------|--------------|-------------|------------|--------|
| To Whom Paid CHILDRENS MIRACLE | NETWORK HOSPI | TAL ST. VINCENTS | | мо | DAY | YEAR | | |
| Mailing Address 232 WEST 25TH ST | | | 4 | 9 | 2013 | \$ | 100.00 | |
| City ERIE | | State PA | Zip Code (Plus 4) 16544 | Descrip SPONS | otion of Exp | penditure | | |
| To Whom Paid JEFFERSON & DA | ACKSON DINNER | | | МО | DAY | YEAR | | |
| Mailing Address C/ | O MARY JO CAMPE | BELL 5431 LINDEN A | VE | 4 | 9 | 2013 | \$ | 85.00 |
| City EDINBORO | | State PA | Zip Code (Plus 4) 16412 | | otion of Exp | | RATIC PART | Y |
| To Whom Paid COMMITTEE TO RE-EI | LECT WHITEY CLE | AVER | | МО | DAY | YEAR | | |
| Mailing Address 39 | 19 DEXTER AVE | | | 4 | 9 | 2013 | \$ | 50.00 |
| City ERIE | | State PA | Zip Code (Plus 4) 16504 | | otion of Exp | | | |
| To Whom Paid ERIE SHRINERS HOSI | PITAL | | | МО | DAY | YEAR | | |
| Mailing Address 16 | 545 WEST 8TH ST | | | 4 | 20 | 2013 | \$ | 50.00 |
| City ERIE | | State PA | Zip Code (Plus 4) 16505 | | otion of Exp | | | |
| To Whom Paid DR. GERTRUDE A. BA | RBER FOUNDATIO | N | | МО | DAY | YEAR | | |
| Mailing Address 10 | 00 BARBER PLACE | | | 5 | 15 | 2013 | \$ | 120.00 |
| City ERIE State Zip Code (Plus 4) PA 165071863 | | | | otion of Exp | | SED PAT HAR | KINS | |
| To Whom Paid DR. GERTRUDE A. BARBER FOUNDATION | | | МО | DAY | YEAR | | | |
| Mailing Address 10 | 00 BARBER PLACE | | | 5 | 15 | 2013 | \$ | 78.31 |
| City ERIE State Zip Code (Plus 4) 165071863 | | | Description of Expenditure GARDEN PARTY BASKET REIMBURSED PAT HARKINS | | | | | |

| | | | | | | | FAC | SE 15 |
|--------------------------------------|----------------------|-------|-------------------|----------------------------|-------------|----------|-----------|-------------|
| To Whom Paid HELEN MCCUL | LUM AVALON HOTEL | | | МО | DAY | YEAR | | |
| Mailing Address 16 WEST 10TH ST | | | 5 | 15 | 2013 | \$ | 57.49 | |
| City ERIE | | State | Zip Code (Plus 4) | Descrir | tion of Exp | enditure | | |
| LNIE | | PA | 16501 | | | | | PAT HARKINS |
| To Whom Paid HOLY TRINITY | USHERS SOCIETY | | | МО | DAY | YEAR | | |
| Mailing Addres | s EAST 23RD REED S | Т | | 5 | 15 | 2013 | \$ | 50.00 |
| City ERIE | | State | Zip Code (Plus 4) | Descrin | tion of Exp | enditure | | |
| - LNIL | | PA | 16503 | 1 | HE CANDI | | | |
| To Whom Paid PA SPORTS HA | ILL OF FAME | | | МО | DAY | YEAR | | |
| Mailing Addres | s PO BOX 1189 | | | 6 | 1 | 2013 | \$ | 40.00 |
| City ERIE | | State | Zip Code (Plus 4) | Description of Expenditure | | | | |
| | | PA | 16512 | PROGR | | | | |
| To Whom Paid EARLY CONNE | CTIONS | | | МО | DAY | YEAR | | |
| Mailing Addres | s 1363 WEST 6TH ST | | | 7 | 21 | 2013 | \$ | 250.00 |
| City ERIE | | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | |
| ENIE | | PA | 16505 | | | | NG HOLE S | PONSOR |
| To Whom Paid ERIE LIONS CL | .UB | | | МО | DAY | YEAR | | |
| Mailing Addres | s PO BOX 9364 | | | 7 | 21 | 2013 | \$ | 100.00 |
| City ERIE | | State | Zip Code (Plus 4) | Descrin | tion of Exp | enditure | | |
| | | PA | 16505 | 1 | AM AD. | | | |
| To Whom Paid SAINT PATRIC | K CHURCH | | | МО | DAY | YEAR | | |
| Mailing Address 130 EAST 4TH ST | | | 8 | 5 | 2013 | \$ | 125.00 | |
| City ERIE | | State | Zip Code (Plus 4) | Descrip | tion of Exp | enditure | | |
| | | PA | 16507 | PROGR | | | | |

| | | | | | | | .,, | GE 16 |
|--|--|--------------------|------------------------------------|-------------------------|--------------------------|----------|----------|------------|
| To Whom Paid NATIONAL PEN COMPANY | | | | | DAY | YEAR | | |
| Mailing Address DEPT 274501 P.O. BOX 55000 | | | 8 | 5 | 2013 | \$ | 195.90 | |
| City DETROIT | | State MI | Zip Code (Plus 4) 482552745 | | tion of Exp LY MAGNE | | NDAR | |
| To Whom Paid POLISH FALCONS N | IEST #610 | | | МО | DAY | YEAR | | |
| Mailing Address | 431 EAST 3RD ST | | | 9 | 1 | 2013 | \$ | 25.00 |
| City ERIE | | State PA | Zip Code (Plus 4) 16507 | | tion of Exp L NATIONA | | ERS AWAR | DS BANQUET |
| To Whom Paid ECDP C/O MARY JO | CAMPELL | | | МО | DAY | YEAR | | |
| Mailing Address | 5431 LINDEN AVE | | | 9 | 29 | 2013 | \$ | 35.00 |
| City EDINBORO | State Zip Code (Plus 4) PA 16412 | | | | tion of Exp | | OTS DINI | NER |
| To Whom Paid ANNUAL JOINT DIN | NER COMMITTEE GE | M CITY OZEIL TEMPL | E | МО | DAY | YEAR | | |
| Mailing Address | 126 EAST 11TH ST | | | 9 | 29 | 2013 | \$ | 80.00 |
| City ERIE | | State PA | Zip Code (Plus 4) 16501 | | otion of Exp | | | |
| To Whom Paid EAST SIDE FEDERA | TION OF POLISH AM | IERICAN SOCIETIES | | МО | DAY | YEAR | | |
| Mailing Address | 491 MANISTEE AVE | | | 9 | 29 | 2013 | \$ | 200.00 |
| City ERIE | City ERIE State Zip Code (Plus 4) PA 16511 | | | Descrip PROGR | otion of Exp | enditure | | |
| To Whom Paid WHITNEY M. YOUNG | G JR. #88 | | | МО | DAY | YEAR | | |
| Mailing Address | 1618 PARADE ST. | | | 9 | 29 | 2013 | \$ | 25.00 |
| City ERIE | | State | Zip Code (Plus 4) | · · | tion of Exp | | | |
| | | PA | 16503 | | INCIL OF D L CONVEN | | ION ON | YOUR 132ND |

| | | | | | | | PAGI | = 1/ |
|--|-------------------------------------|--------------------|---------------------------------------|-------------------------|--------------------------|-----------|-------|--------|
| To Whom Paid ALPHA KAPPA AL | PHA SORORITY BIDDY | ' BROOKS | | МО | DAY | YEAR | | |
| Mailing Address | PO BOX 10694 | | | 9 | 29 | 2013 | \$ | 75.00 |
| City ERIE | | State PA | Zip Code (Plus 4) 16514 | Descrip PROGR | otion of Exp | enditure | | |
| To Whom Paid VNA HOSPICE | | | | МО | DAY | YEAR | | |
| Mailing Address | 2253 WEST GRAND | VIEW | | 11 | 1 | 2013 | \$ | 50.00 |
| City ERIE | | State PA | Zip Code (Plus 4) 165064507 | Descrip | otion of Exp | penditure | | |
| To Whom Paid HOLY TRINITY US | SHERS SOCIETY | | | мо | DAY | YEAR | | |
| Mailing Address | EAST 23RD & | REED ST | | 11 | 1 | 2013 | \$ | 50.00 |
| City ERIE | IE State Zip Code (Plus 4) PA 16503 | | | | otion of Exp | | ETHER | |
| To Whom Paid OUR LADYS CHR | STIAN SCHOOL | | | МО | DAY | YEAR | | |
| Mailing Address | 606 LOWELL AVE | | | 11 | 6 | 2013 | \$ | 50.00 |
| City ERIE | | State PA | Zip Code (Plus 4) 16505 | Descrip PROGR | otion of Exp | penditure | | |
| To Whom Paid PATRICK T. DIPA | OLO SCHOLARSHIP FO | JND | | МО | DAY | YEAR | | |
| Mailing Address | P.O. BOX 3073 | | | 11 | 6 | 2013 | \$ | 100.00 |
| City ERIE | | State PA | Zip Code (Plus 4) 16508 | | otion of Exp | | | |
| To Whom Paid BARBER NATION. | AL INSTITUTE | | | МО | DAY | YEAR | | |
| Mailing Address | 100 BARBER PLACE | | | 11 | 18 | 2013 | \$ | 170.00 |
| City ERIE | | State PA | Zip Code (Plus 4) 165071863 | | otion of Exp HRISTMAS | | | |
| | | 1 | | | | | | |

| To Whom Paid PEOPLE FOR LIFE | | | МО | DAY | YEAR | |
|-----------------------------------|----------------------|-----------------------------------|-------------------------|--------------|----------|----------------|
| Mailing Address P.O. BOX 1126 | | | 12 | 7 | 2013 | \$ 50.00 |
| City ERIE | State PA | Zip Code (Plus 4) 16512 | _ | otion of Exp | | |
| To Whom Paid MCGRATH'S PUB | | | МО | DAY | YEAR | |
| Mailing Address 202 LOCUST ST | | | 12 | 23 | 2013 | \$ 587.72 |
| City HARRISBURG | State PA | Zip Code (Plus 4) 17101 | Descrip FUNDR | otion of Exp | enditure | |
| Enter Grand Total of Expenditures | on Page 1. Report C | over Page. Item D. | | | | PAGE TOTAL |
| The state for expenditures | on rage 1/ Nepolit e | ore. I age, Item D. | | | | \$ 3,699.42 |

STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

| FRIENDS OF PAT HARKINS C/O TREASURER SUSAN M. KOWALSKI From: 11/26/2013 To: 12/31/2013 Outstanding Balance of Debt Name of Creditor PRINTING CONCEPTS Mo DAY YEAR Mailing Address 4982 PACIFIC AVE State PA 16509 PA 16509 Description of Debt MAILER PAID FOR BY PAT HARKINS DATE DATE DATE DUSTANDING PAID FOR BY PAT HARKINS Outstanding Balance of Debt Railing Address ERIE POST OFFICE DATE DATE State PA 16501 PA 13 2006 \$ 1,348.86 Description of Debt MAILER PAID FOR BY PAT HARKINS DATE DATE | Name of Filing Committee or Candidate Reportin | | | | ng Period | | | | |
|--|--|--------------------|---------------|-----------|-----------|------|------|------------|--------------------|
| Name of Creditor PRINTING CONCEPTS Mailing Address 4982 PACIFIC AVE State PA 16509 PA 16509 MO DAY YEAR Description of Debt MAILER PAID FOR BY PAT HARKINS Name of Creditor POSTMASTER GENERAL Mailing Address ERIE POST OFFICE State PA 16501 State PA 16501 DATE DATE Outstanding Balance of Debt MAILER PAID FOR BY PAT HARKINS DATE Outstanding Mailing Address PA 1,348.86 City ERIE State PA 16501 DATE Outstanding Balance of Debt MAILER PAID FOR BY PAT HARKINS DATE Outstanding Balance of Debt MAILER PAID FOR BY PAT HARKINS Outstanding Balance of Debt MAILER PAID FOR BY PAT HARKINS DATE Outstanding Balance of Debt MAILER PAID FOR BY PAT HARKINS PAGE TOTAL Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G. | FRIENDS OF PAT HARKINS C/O TREASURER SUSAN M. KOWALSKI From: | | | <u>11</u> | ./26/2013 | То: | | 12/31/2013 | |
| PRINTING CONCEPTS Mailing Address | | | | | | DATE | | | |
| City ERIE State PA 16509 Description of Debt MAILER PAID FOR BY PAT HARKINS Name of Creditor PA 16509 DAY YEAR Mo DAY YEAR 16509 Mo DAY YEAR Mo DAY PA 16501 DATE DATE DATE Mo DAY PAR PAID FOR BY PAT HARKINS Mo DAY PEAR PAID FOR BY PAT HARKINS Mo DAY PEAR PAID FOR BY PAT HARKINS Mo DAY PEAR DESCRIPTION DATE DATE DATE Mo DAY PEAR DATE DATE DATE DATE DATE Mo DAY PEAR DESCRIPTION DATE DATE DATE DATE DATE Mo DAY PEAR DATE | | | | | мо | DAY | YEAR | | |
| PA 16509 MAILER PAID FOR BY PAT HARKINS DATE Dust | Mailing Address 4982 PACIFIC AVE | | | | 4 | 13 | 200 | 5 , | \$ 1,382.00 |
| Name of Creditor POSTMASTER GENERAL Mailing Address ERIE POST OFFICE State PA 16501 Name of Creditor POSTMASTER GENERAL PA Description of Debt MAILER PAID FOR BY PAT HARKINS Name of Creditor ERIE FIRE PREVENTION Mo DAY VEAR Dutstanding Balance of Debt MO DAY VEAR Outstanding Balance of Debt MO DAY VEAR PA Outstanding Balance of Debt Name of Creditor ERIE FIRE PREVENTION Mo DAY VEAR DATE DATE DATE PAGE TOTAL PAGE TOTAL PAGE TOTAL | City ERIE | | , , | ıs 4) | | | | T HA | ARKINS |
| POSTMASTER GENERAL Mailing Address | | | | | | DATE | | | |
| City ERIE State PA PA City ERIE State PA Description of Debt P | | | | | мо | DAY | YEAR | | |
| PA 16501 MAILER PAID FOR BY PAT HARKINS DATE DUST | Mailing Address ERIE POST OFFICE | | | | 4 | 13 | 200 | 5 , | \$ 1,348.86 |
| Name of Creditor ERIE FIRE PREVENTION MO DAY VEAR Mo DAY VEAR Mo DAY VEAR State Zip Code (Plus 4) Description of Debt PROGRAM AD PAID FOR BY PAT HARKINS PAGE TOTAL Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G. | City ERIE | | | ıs 4) | - | | | T HA | ARKINS |
| ERIE FIRE PREVENTION MO DAY YEAR Mailing Address P.O. BOX 452 5 31 2007 \$ 250.00 City ERIE State Zip Code (Plus 4) PROGRAM AD PAID FOR BY PAT HARKINS PAGE TOTAL Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G. | | | | | | DATE | | | |
| City ERIE State Zip Code (Plus 4) Description of Debt PROGRAM AD PAID FOR BY PAT HARKINS PAGE TOTAL Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G. | | | | | МО | DAY | YEAR | | |
| PAGE TOTAL Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G. | Mailing Address P.O. BOX 452 | | | | 5 | 31 | 200 | 7 , | \$ 250.00 |
| Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G. | City ERIE | State | Zip Code (Plu | ıs 4) | - | | | BY F | PAT HARKINS |
| l | | | • | | • | | | | PAGE TOTAL |
| | Enter Grand Total of Unpaid Deb | ts on Page 1, Repo | ort Cover Pa | ge, Item | G. | | | \$ | 2,980.86 |