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 2005	299			Rep File			CANI	DII	DATE		СОМ	1ITTEE	√	LOBE	YIST		
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		FRIE	ND:	S OF	PAT HA	Rk	KINS C	/O T	REASU	RER SU	SAN M.	KOWAI	SKI		
Street Address:																		
City:	ERIE							State:		PA			Zip Co	de: 16	5508-1	719		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA' PRIMARY	Y PRE	- 2	2. X	30 DA PRIMA		P	OST-	3.		AMENDM REPORT		Yes	No)	√
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA' ELECTION	y pre	≣- 5	5.	30 DA ELECT		P	OST-	6.		TERMINA REPORT		Yes	No	,	√
report type)	ANNUAL REPORT	7.	Year 2016					IG MET CHECK					PAPER		\	DISKE	TTE	
Name of Office S	- Sought by Candida	te:						DATE	0	F ELEC	CTIO	N	District Number	Office Code	Par	ty Code	Cour	
								МО		DAY	YE	AR	1	STH	DEM	I	25	
REPRESENTATI	VE IN THE GENER	RAL ASS	EMBLY					1	1		8	2016		(SEE IN	STRUCTIO	NS FOR	CODES)
	Receipts and	МО	DAY	YEAR	R			мо		DAY	YE	AR	FC	R OFFI	CE USE	ONLY		
Expenditures	from:		3 8	2	016	T	0		4	1	.1	2016						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$	-			4,4	78.98						
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule	I)	\$				1,0	00.00						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$				5,4	78.98						
D. Total Expen	ditures (From Sch	edule II	I)				\$				9	50.00						
E. Ending Cash	Balance (Subtract	Line D	From Line (C)			\$				4,5	28.98						
F. Value Of In-	Kind Contributions	Receive	ed (From So	chedu	le II))	\$					0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$				2,9	80.86			•			
				AFF	IDA	VI	ΓSE	CTIOI	V									
PART I - If this is	s a Committee rep	ort, trea	surer sign l	nere. I	If thi	s is	a Car	ndidate	re	port, c	andio	date sig	ın here.					
I swear (or affirm) correct and comple) that this report, incl ete.	uding the	attached sch	nedules	s filed	l on p	paper	or by ele	ctr	onic me	edium	, are to t	he best o	f my kno	wledge a	and beli	ef , tr	ue,
Sworn to and subs	cribed before me this	:	20						•		s	ignature	of Perso	n Submit	ting Rep	ort		_
			-				- -		-				Prin	ted Name	e			_
My Commission Ex	Signatu opires	re							-				Ema	il				-
	МО	DA	AY	YR			-		-	Are	a Cod	e	Daytim	e Teleph	none Nui	nber		_
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nittee	e, Ca	andid	ate sha	ll s	sign he	re.							
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and beli	ef this	politi	ical	comm	ittee has	s no	ot violat	ed an	y provisi	ions of th	e act of J	une 3,19	937 (P.L	133:	3,
Sworn to and subsc	ribed before me this											Si	ignature (of Candid	ate			-
	day of						-						Drints	d Name				_
	Signature						-						rime	u Haille				
My Commission Exp	_								-				Ema	il				_
	МО	D	AY	YR	l					Area (Code		D	aytime T	elephon	e Numb	er	-

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:	3/8/201	<u>б</u> То:	<u>4/11/2016</u>
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)			\$	0.00
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)			\$	1,000.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting) Period	(3)	\$	1,000.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	J Period	(4)	\$	0.00
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			\$	1,000.00

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 C	andidate	R	eporting	Period			
		Fi	rom:		То	:	
		•		DATE			AMOUNT
Full Name of Contributing Comm	ittee		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.

0.00

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 Committ	ee or Candidate		Rej	porting P	eriod			
			Fro	om:		To) :	
			•		DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
							l	
Mailing Address							\$	0.00
Mailing Address City	State	Zip Code (P	lus 4)				\$	0.00

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 Peri	eriod				
FRIENDS OF PAT HARKINS C/O TREASURER SUSAN M. KOWALSKI	From:	3/8/2016	То:	4/11/2016		

DATE AMOUNT

Full N	ame of Contributing Committee			МО	DAY	YEAR	
UPS P	PAC			1-10	DAI	ILAK	\$ 1,000.00
Mailin	g Address			1	5	2016	
City	ATLANTA	State	Zip Code (Plus 4)	1	3	2010	
		GA	30328				

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

PAGE TOTAL \$ 1,000.00

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 Candidate			Rep	orting Pe	riod			
			Fror	n:		To):	
				D	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupa	tion			
Employer Mailing Address/Principal Pla	ce of Business	City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Scho	dule I, Detailed S	Summary Page,	, Sectio	on 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 Period		
FRIENDS OF PAT HARKINS C/O TREASURER SUSAN M. KOWALSKI	From:	3/8/2016 To:	<u>4/11/2016</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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	ame of Filing Committee or Candidate					Reporting Period				
			From:			To:				
				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			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Report	ing Period			
FRIENDS OF PAT HARKINS C/O TREASURER SUSAN M. KOWALSKI	From	<u>3/</u> 3	<u>3/2016</u>	То:	4/11/2016
		DATE			AMOUNT
To Whom Paid	мо	DAY	YEAR		

100.00					
5TH ANNUAL BLACK HISTORY TRIVIA & amp; SOUL FOOD DINNER					
100.00					
2ND ANNUAL WORKSHOP SUPPORTING WOMEN VETERANS					
200.00					
100.00					
100.00					
100.00 CATION					
CATION					
CATION					
100.00					
100.00					
100.00					
100.00					

To Whom Paid					DAY	YEAR		
DELTA SIGMA THETA SORORITY					DAT	TEAK		
Mailing Address					28	2016	\$	150.00
City	ERIE State Zip Code (Plus 4)				tion of Exp	enditure		
		PA	PA 16514 FULL PAGE PROGRAM			RAM AD		
								PAGE TOTAL
Enter	l							
			Report Cover Page, It	ciii D.			\$	950.00
			Report cover ruge, re	ciii D.			\$	950.00
			Report cover ruge, re	c <i>2</i> .			\$	950.00
			Report cover ruge, re	c <i>5</i> .			\$	950.00
			Report cover ruge, re	c <i>5</i> .			\$	950.00
			Report cover ruge, re	ciii <i>b</i> .			\$	950.00
			Report cover ruge, re	ciii D.			\$	950.00

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				Reportir	Reporting Period						
FRIENDS OF PAT HARKINS C/O TREASURER SUSAN M. KOWALSKI From:				From:	<u>3/8/2016</u> To:			<u>4/11/2016</u>		<u>2016</u>	
•				DATE				Outstanding Balance of Debt			
Name of Creditor					мо	DAY	YEAR				
PRINTING CONCEPTS					140		ILAK				
Mailing Address					4	13	2006	5 4	;	1,382.00	
City ER	ty ERIE State Zip Code (Plus 4)				Description of Debt						
		PA 16509			MAILER PAID FOR BY PAT HARKINS						
Name of Creditor					мо	DAY	YEAR				
POSTMASTER GENERAL											
Mailing Address					4	13	2006	5 \$	•	1,348.86	
City ER	City ERIE State Zip Code (Plus 4)				Description of Debt						
PA				MAILER PAID FOR BY PAT HARKINS							
Name of Creditor						DAY	YEAR				
ERIE FIRE PREVENTION					МО	DAT	IEAR				
Mailing Address					5	31	2007	7 \$;	250.00	
City ER	ity ERIE State Zip Code (Plus 4)					Description of Debt					
	PA PROGRAM AD PAID FOR BY PAT HARKINS							(INS			
<u> </u>								PAC	GE TOTAL		
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item					G.			\$		2,980.86	