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 200)5299			Rep File			CANDI	CANDIDATE COMMITTEE V LOBBYIST							
Name of Filing C	Committee, Cand	idate or L	obbyist:		FRIE	ND:	S OF I	PAT HAR	KINS (C/O T	REASU	RER SU	SAN M.	KOWAI	_SKI	
Street Address:																
City:	ERIE -							State:	PA			Zip Cod	de: 16	5508-1	719	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	D FRIDAY PRE- MARY 2. 30 DAY POST- PRIMARY 3.					3.		AMENDM REPORT	No	\			
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- 5		30 DA ELECT		POST-	6.		TERMINA REPORT		Yes	No	~
report type)	ANNUAL REPOR	T 7. X	Year 2016				FILING METHOD () CHECK ONE					PAPER		\	DISKE	TTE
Name of Office S	- Sought by Candid	late:			-	_		DATE 0	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	County Code
								МО	DAY	YE	AR	1	STH	DEM	1	25
REPRESENTATI	VE IN THE GEN	ERAL ASS	EMBLY					11		8	2016		(SEE IN	STRUCTIO	ONS FOR C	ODES)
•	Receipts and	МО	DAY	YEAR				МО	DAY	YE	AR	FC	R OFFI	CE USE	ONLY	
Expenditures	from:		11 29	20	016	T	0	12	12 31 2016							
A. Amount Bro	ught Forward Fr	om Last R	eport				\$			8,6	09.21					
B. Total Moneta	ary Contribution	s And Rec	eipts (From	Sche	dule 1	I)	\$				0.00					
C. Total Funds	Available (Sum	Of Lines A	and B)				\$			8,6	509.21					
D. Total Expend	ditures (From So	hedule II	I)				\$			1,4	41.25					
E. Ending Cash	Balance (Subtra	ct Line D	From Line C))			\$			7,1	67.96					
F. Value Of In-	Kind Contributio	ns Receiv	ed (From Sch	hedul	le II))	\$				0.00					
G. Unpaid Debt	ts And Obligation	s (From S	Schedule IV)				\$				0.00			1		
				AFF	IDA'	VI	ΓSE	CTION								
PART I - If this is	s a Committee re	port, trea	surer sign he	ere. 1	If this	s is	a Can	didate r	eport, o	candi	date sig	jn here.				
I swear (or affirm) correct and comple		cluding the	e attached sche	edules	filed	on į	paper o	or by elect	ronic m	edium	, are to t	the best o	f my kno	wledge a	and belie	ef , true
Sworn to and subs	cribed before me t day of	nis	20							S	ignature	of Perso	n Submit	ting Rep	ort	
	— — Signa	ture					• -					Prin	ted Name	e		
My Commission Ex	cpires											Ema	il			
	МО	D	AY	YR					Are	ea Cod	e	Daytin	e Telepl	none Nu	mber	
Part II- If this is	a report of a ca	ndidate's	authorized C	Comm	ittee	e, Ca	andida	ate shall	sign he	ere.						
I swear (or affirm) No 320) as amende		my knowl	edge and belief	f this	politio	cal	commi	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,19	937 (P.L.	1333,
Sworn to and subsc		is									S	ignature o	of Candid	ate		
-	day of						-					Printe	d Name			
	Signatur	<u> </u>					-									
My Commission Exp	ires											Ema				
	мо	D	AY	YR			•		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:	11/29/201	<u>б</u> То:	12/31/2016
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)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting) Period	(3)	\$	0.00
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00

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 Candida	te		Reporting	Period			
			From:		То	:	
		•		DATE			AMOUNT
Full Name of Contributing Committee			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.

PAGE TOTAL
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 Committee	or Candidate		Rep	oorting P	eriod			
Fro			From: T			o :		
		•			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.

lame of Filing Committee or Candidate			Reporting Period							
			From:			То:				
				DA	TE		A	MOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR			0.00	
Mailing Address							- \$		0.00	
City	State	Zip Cod	e (Plus 4)							
								PAGE TOT	AL	
Enter Grand Total of Part C on School	dule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	(0.00	

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			
			Fron	n:		To	ɔ :	
				D/	ATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac	e of Business	City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Schee	dule I, Detailed Su	ımmary 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 Perio	od		
			From:			To:	
				D	ATE		AMOUNT
Full Name				мо	DAY	YEAR	\$ 0.00
Mailing Address		_					
City	State	Zip Code (Plus 4)				
Receipt Description	•	•			•	•	
		_		_			PAGE TOTAL
Enter Grand Total of Part E on Schedu	lie 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 Perio	od	
FRIENDS OF PAT HARKINS C/O TREASURER SUSAN M. KOWALSKI	From:	<u>11/29/2016</u> To:	<u>12/31/2016</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 Car	Name of Filing Committee or Candidate Re					Reporting Period				
	F					To	То:			
				DATE			AMOUNT			
Full Name of Contributor			МО	DAY	YEAR					
Mailing Address						7 \$	C	0.00		
City	State	Zip Code (Plus 4)								
Description of Contribution:	•		•	•		•				
					-					
Enter Grand Total of Part F o	n Schedule II, In-Ki	nd Contributions Detai	led Sum	mary Pa	ge,		PAGE TOTAL			
Section 2.						\$	0	.00		

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	lame 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 _l	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

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period				
FRIENDS OF PAT HARKINS C/O TREASURER SUSAN M. KOWALSKI			From	From <u>11/29/2016</u> To: <u>12</u>				
		AMOUNT						
To Whom Paid			мо	DAY	YEAR			
NATIONAL PEN CO. LLC								
Mailing Address			12	1	2016	\$	1,081.25	
City DALLAS	State	Zip Code (Plus 4)	Description of Expenditure					
	ТХ	752847203		TIONAL US PENS REIM				
To Whom Paid			мо	DAY	YEAR			
DR. GERTRUDE A. BARBER FOUNDATION			MO	DAI	ILAK			
Mailing Address	Mailing Address			4	2016	\$	360.00	
City ERIE State Zip Code (Plus 4)				tion of Exp	enditure			

165071863

2016 BARBER CHRISTMAS BALL

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