

# Campaign Finance Report

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

<b>Filer Identification Number :</b>		20110285		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>		
<b>Name of Filing Committee, Candidate or Lobbyist:</b> FRIENDS OF PATTY KIM												
<b>Street Address:</b> 2418 N. 2ND STREET												
<b>City:</b> HARRISBURG						<b>State:</b> PA			<b>Zip Code:</b> 17110			
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY PRIMARY	POST-	3. X	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2017	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>				
<b>Name of Office Sought by Candidate:</b>						<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	DEM			
						11	7	2017	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
		5	2	2017		6	5	2017				
<b>A. Amount Brought Forward From Last Report</b>						\$ 5,889.16						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 22,275.00						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 28,164.16						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 1,549.31						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 26,614.85						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$ 0.00						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$ 0.00						

## AFFIDAVIT SECTION

**PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.**

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.**

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
**Detailed Summary Page**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF PATTY KIM	From: <u>5/2/2017</u> To: <u>6/5/2017</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 25.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 1,500.00
<b>All Other Contributions (Part B)</b>	\$ 3,250.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 4,750.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 5,000.00
<b>All Other Contributions (Part D)</b>	\$ 12,500.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 17,500.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)</b>	\$ 22,275.00
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**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.**

<b>Name of Filing Committee or Candidate</b>				<b>Reporting Period</b>			
FRIENDS OF PATTY KIM				From: <u>5/2/2017</u> To: <u>6/5/2017</u>			
				<b>DATE</b>		<b>AMOUNT</b>	

  

<b>Full Name of Contributing Committee</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
BIKE PAC			6	5	2017	
<b>Mailing Address</b>	PO BOX 564	<b>City</b>				
MECHANICSBURG	<b>State</b>	<b>Zip Code (Plus 4)</b>				
	PA	17055				

  

<b>Full Name of Contributing Committee</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
PA BANKERS PUBLIC AFFAIRS COMMITTEE			6	5	2017	
<b>Mailing Address</b>	3897 N. FRONT ST					
HARRISBURG	<b>State</b>	<b>Zip Code (Plus 4)</b>				
	PA	17110				

  

<b>Full Name of Contributing Committee</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
PLANNED PARENTHOOD PA PAC			5	17	2017	
<b>Mailing Address</b>	1514 N. 2ND ST.					
HARRISBURG	<b>State</b>	<b>Zip Code (Plus 4)</b>				
	PA	17102				

  

<b>Full Name of Contributing Committee</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
1776 PAC			5	11	2017	
<b>Mailing Address</b>	3031 A WALTON RD STE. 201					
PLYMOUTH MEETING	<b>State</b>	<b>Zip Code (Plus 4)</b>				
	PA	19462				

  

<b>Full Name of Contributing Committee</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
PENN NATIONAL INSURANCE/INSERVCO PAC			5	5	2017	
<b>Mailing Address</b>	2 NORTH 2ND ST.					
HARRISBURG	<b>State</b>	<b>Zip Code (Plus 4)</b>				
	PA	17101				

  

<b>Full Name of Contributing Committee</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
STEAMFITTERS LOCAL UNION 449			5	2	2017	
<b>Mailing Address</b>	1517 WOODRUFF ST.					
PITTSBURGH	<b>State</b>	<b>Zip Code (Plus 4)</b>				
	PA	15220				

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

<b>PAGE TOTAL</b>
\$ 1,500.00

# 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)**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF PATTY KIM	From: <u>5/2/2017</u> To: <u>6/5/2017</u>

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
ASGAR RIZWAN							
Mailing Address 5999 THREE RIVERS DR.				5	22	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17112					
Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
NAVA K. NAWAZ							
Mailing Address 6353 GALLEON DR.				5	22	2017	
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17050					
Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
NOOR A. OMAR							
Mailing Address 127 S. WALNUT ST. APT 1				5	22	2017	
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17055					
Full Name of Contributor				MO	DAY	YEAR	\$ 200.00
NASIR IQBAL							
Mailing Address 1150 CHADWICK CIRCLE				5	22	2017	
City HUMMELSTOWN	State PA	Zip Code (Plus 4) 17036					
Full Name of Contributor				MO	DAY	YEAR	\$ 200.00
RASHID ANJUM							
Mailing Address 24 BELLA VISTA DR.				5	22	2017	
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17050					
Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
MUHAMMAD IKRAM, MD							
Mailing Address 320 CLOUDLESS SKY DR.				5	22	2017	
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17050					

Full Name of Contributor SALMAN LATEEF			MO	DAY	YEAR	\$ 200.00
Mailing Address 203 CLOUDLESS SKY DR.			5	22	2017	
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17050				
Full Name of Contributor MOHAMMAD ISMAIL			MO	DAY	YEAR	\$ 200.00
Mailing Address 13 HARPERS FERRY WAY			5	22	2017	
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17050				
Full Name of Contributor BURHANUDDIN FAROOGI			MO	DAY	YEAR	\$ 150.00
Mailing Address 465 BARBARA DR.			5	22	2017	
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17050				
Full Name of Contributor AZIZ A. MAJID, DMD			MO	DAY	YEAR	\$ 200.00
Mailing Address 1512 WOODCREST CIRCLE			5	22	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17112				
Full Name of Contributor MARYAN JACQUES			MO	DAY	YEAR	\$ 200.00
Mailing Address 612 SHIELD ST.			5	22	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17109				
Full Name of Contributor TARIQ NAWAZ			MO	DAY	YEAR	\$ 200.00
Mailing Address 5006 CHLOE LN.			5	22	2017	
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17050				
Full Name of Contributor ATIZAZUL MANSOOR			MO	DAY	YEAR	\$ 100.00
Mailing Address 1401 SUMMIT WAY			5	22	2017	
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17050				
Full Name of Contributor DZEMAL CRNKIC			MO	DAY	YEAR	\$ 100.00
Mailing Address 4900 MAIN AVE. APT 4923			5	22	2017	
City WALLINGTON	State NJ	Zip Code (Plus 4) 07057				
Full Name of Contributor MOHAMED ELNOUR			MO	DAY	YEAR	\$ 100.00
Mailing Address 425 BROOKVIEW CT.			5	22	2017	
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17050				

Full Name of Contributor MUHAMMAD BABAR			MO	DAY	YEAR	\$ 100.00
Mailing Address 6354 MERCURY DR.			5	22	2017	
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17050				
Full Name of Contributor MOHAMMED SIRAJ			MO	DAY	YEAR	\$ 100.00
Mailing Address 5696 ABERDEEN DR.			5	22	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17111				
Full Name of Contributor SHAHJAHAN MOLLA			MO	DAY	YEAR	\$ 100.00
Mailing Address 3607 WANSFORD RD.			5	22	2017	
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17050				
Full Name of Contributor ASMA NIZAM			MO	DAY	YEAR	\$ 200.00
Mailing Address 6 BELLA VISTA DR.			5	22	2017	
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17050				
Full Name of Contributor ADNAN AHMAD			MO	DAY	YEAR	\$ 200.00
Mailing Address 11 HARPERS FERRY WAY			5	22	2017	
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17050				
Full Name of Contributor SALEH A. MALIK			MO	DAY	YEAR	\$ 200.00
Mailing Address 903 KENT DR.			5	22	2017	
City MECHANICSBURG	State PA	Zip Code (Plus 4) 17050				
Full Name of Contributor AMANATHULLAH MOHAMED			MO	DAY	YEAR	\$ 100.00
Mailing Address 1028 DOGWOOD LN.			6	5	2017	
City ENOLA	State PA	Zip Code (Plus 4) 17025				

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

<b>PAGE TOTAL</b>
\$ 3,250.00

# 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.**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF PATTY KIM	<b>Reporting Period</b>  <b>From:</b> <u>5/2/2017</u> <b>To:</b> <u>6/5/2017</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee CUPAC				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 4309 NORTH FRONT ST.				5	2	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17110					
Full Name of Contributing Committee PPL PEOPLE FOR GOOD GOVERNMENT				MO	DAY	YEAR	\$ 500.00
Mailing Address 2 NORTH NINTH ST.				5	4	2017	
City ALLENTOWN	State PA	Zip Code (Plus 4) 18101					
Full Name of Contributing Committee PSSU LOCAL 668				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 2589 INTERSTATE DR.				5	17	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17110					
Full Name of Contributing Committee CARPENTERS LEGISLATIVE PROGRAM OF GREATER PA				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 650 RIDGE RD. SUITE 200				5	23	2017	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15205					
Full Name of Contributing Committee HEALTH PARTNERS OF PHILADELPHIA PAC				MO	DAY	YEAR	\$ 500.00
Mailing Address 901 MARKET ST. SUITE 500				6	5	2017	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19107					
Full Name of Contributing Committee MCNEES PAC				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 100 PINE ST PO BOX 1166				6	5	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108					

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

**PAGE TOTAL**

\$ 5,000.00



**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.)**

<b>Name of Filing Committee or Candidate</b>  FRIENDS OF PATTY KIM	<b>Reporting Period</b>  From: <u>5/2/2017</u> To: <u>6/5/2017</u>
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				DATE	AMOUNT		
<b>Full Name of Contributor</b> SHAHUL HAMEED				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 300.00
<b>Mailing Address</b> 15 BETHPAGE DR.				5	22	2017	
<b>City</b> MECHANICSBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17050					
<b>Employer Name</b> INFORMATION REQUESTED				<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b>		<b>State</b>	<b>Zip Code (Plus 4)</b>	
<b>Full Name of Contributor</b> KHADER B. SHAIK				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 300.00
<b>Mailing Address</b> 117 WARM SUNDAY WAY				5	22	2017	
<b>City</b> MECHANICSBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17050					
<b>Employer Name</b> INFORMATION REQUESTED				<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b>		<b>State</b>	<b>Zip Code (Plus 4)</b>	
<b>Full Name of Contributor</b> J. ALEX HARTZLER				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b> 2921 N. 2ND ST.				5	5	2017	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17110					
<b>Employer Name</b> WCI PARTNERS				<b>Occupation</b> EXECUTIVE			
<b>Employer Mailing Address/Principal Place of Business</b> 1900 N. 2ND ST			<b>City</b> HARRISBURG		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17102	
<b>Full Name of Contributor</b> J. ALEX HARTZLER				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 900.00
<b>Mailing Address</b> 2921 N. 2ND ST.				5	19	2017	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17110					
<b>Employer Name</b> WCI PARTNERS				<b>Occupation</b> EXECUTIVE			
<b>Employer Mailing Address/Principal Place of Business</b> 1900 N. 2ND ST			<b>City</b> HARRISBURG		<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17102	

<b>Full Name of Contributor</b> J. ALEX HARTZLER			<b>MO</b> 5	<b>DAY</b> 19	<b>YEAR</b> 2017	<b>\$</b> 10,000.00
<b>Mailing Address</b> 2921 N. 2ND ST.						
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17110				
<b>Employer Name</b> WCI PARTNERS			<b>Occupation</b> EXECUTIVE			
<b>Employer Mailing Address/Principal Place of Business</b> 1900 N. 2ND ST		<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17102		

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

<b>PAGE TOTAL</b>
<b>\$</b> 12,500.00



## 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
FRIENDS OF PATTY KIM		From: <u>5/2/2017</u> To: <u>6/5/2017</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)		\$	0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)		\$	0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period (3)		\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)		\$	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: <span style="float: right;">To:</span>
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						<b>PAGE TOTAL</b>  \$ 0.00

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

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF PATTY KIM	From <u>5/2/2017</u> To: <u>6/5/2017</u>

				DATE	AMOUNT		
To Whom Paid DELTA SIGMA THETA				MO	DAY	YEAR	\$ 30.00
Mailing Address PO BOX 60733				5	2	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17106	Description of Expenditure DONATION				
To Whom Paid CAROLINA SANCHEZ				MO	DAY	YEAR	\$ 100.00
Mailing Address 806 CHAMBERS ST.				5	8	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17113	Description of Expenditure FOOD REIMBURSEMENT				
To Whom Paid RSVP OF THE CAPITAL REGION				MO	DAY	YEAR	\$ 50.00
Mailing Address 50 UTLEY DR SUITE 500				5	11	2017	
City CAMP HILL	State PA	Zip Code (Plus 4) 17011	Description of Expenditure TICKETS				
To Whom Paid TAJUANNA FRANKLIN				MO	DAY	YEAR	\$ 200.00
Mailing Address 1904 DAYBREAK CIRCLE				5	12	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17110	Description of Expenditure SERVICES RENDERED				
To Whom Paid BRIAN SILVER				MO	DAY	YEAR	\$ 100.00
Mailing Address 1919 HERR ST.				5	12	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17103	Description of Expenditure SERVICES RENDERED				
To Whom Paid FULTON BANK				MO	DAY	YEAR	\$ 2.00
Mailing Address PO BOX 4887				5	17	2017	
City LANCASTER	State PA	Zip Code (Plus 4) 17604	Description of Expenditure SERVICE FEE				

<b>To Whom Paid</b> SOUTH CENTRAL PA SICKLE CELL COUNCIL			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 500.00
<b>Mailing Address</b> 2000 LINGLESTOWN RD SUITE 103			5	19	2017	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17110	<b>Description of Expenditure</b> DONATION			

  

<b>To Whom Paid</b> TINA HYMAN			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 75.00
<b>Mailing Address</b> 27 S. 24TH ST.			5	20	2017	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17103	<b>Description of Expenditure</b> FOOD REIMBURSEMENT			

  

<b>To Whom Paid</b> YELLOW BIRD CAFE			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 214.30
<b>Mailing Address</b> 1320 N. 3RD ST.			5	20	2017	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17102	<b>Description of Expenditure</b> CAMPAIGN EXPENSE			

  

<b>To Whom Paid</b> PATTY KIM			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 278.01
<b>Mailing Address</b> 2418 N. 2ND ST.			5	20	2017	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17110	<b>Description of Expenditure</b> EVENT REIMBURSEMENTS			

  

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						<b>\$</b> 1,549.31



