

Campaign Finance Report

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

Filer Identification Number :		20110285		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF PATTY KIM												
Street Address: 2418 N. 2ND ST.												
City: HARRISBURG						State: PA			Zip Code: 17110			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6. X	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2017	FILING METHOD () CHECK ONE			PAPER <input checked="" type="checkbox"/>	DISKETTE				
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code
						MO	DAY	YEAR	DEM			
						11	7	2017	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		10	24	2017		11	27	2017				
A. Amount Brought Forward From Last Report						\$ 22,988.72						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 3,025.00						
C. Total Funds Available (Sum Of Lines A and B)						\$ 26,013.72						
D. Total Expenditures (From Schedule III)						\$ 2,439.16						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 23,574.56						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 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

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF PATTY KIM	From: <u>10/24/2017</u> To: <u>11/27/2017</u>

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

2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	
Contributions Received From Political Committees (Part A)	\$ 500.00
All Other Contributions (Part B)	\$ 0.00
TOTAL for the Reporting Period (2)	\$ 500.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 2,500.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 2,500.00

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 enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 3,025.00
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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.**

Name of Filing Committee or Candidate				Reporting Period			
FRIENDS OF PATTY KIM				From: <u>10/24/2017</u> To: <u>11/27/2017</u>			
				DATE		AMOUNT	

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
PSEA PACE			10	26	2017	
Mailing Address 400 NORTH 3RD ST. PO BOX 1724						
City HARRISBURG	State PA	Zip Code (Plus 4) 17105				

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
COMCAST CORPORATION PAC			11	2	2017	
Mailing Address 1701 JFK BLVD.						
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103				

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

PAGE TOTAL
\$ 500.00

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.

Name of Filing Committee or Candidate FRIENDS OF PATTY KIM	Reporting Period From: <u>10/24/2017</u> To: <u>11/27/2017</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee PPFFA PAC-FUND				MO	DAY	YEAR	\$ 500.00
Mailing Address 240 N. THIRD ST.				10	24	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101					
Full Name of Contributing Committee VISION COMMITTEE				MO	DAY	YEAR	\$ 500.00
Mailing Address 2205 STRAWBERRY SQUARE				10	24	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101					
Full Name of Contributing Committee PSSU LOCAL 668 SEIU COPE				MO	DAY	YEAR	\$ 500.00
Mailing Address 2589 INTERSTATE DR.				10	26	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17110					
Full Name of Contributing Committee CITIZENS FOR A BETTER COMMONWEALTH				MO	DAY	YEAR	\$ 500.00
Mailing Address PO BOX 12090				10	31	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17108					
Full Name of Contributing Committee CUPAC				MO	DAY	YEAR	\$ 500.00
Mailing Address 4309 NORTH FRONT ST.				10	31	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17110					

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

PAGE TOTAL

\$ 2,500.00

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.)

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 Name				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 0.00

PART E 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	Reporting Period
	<div style="display: flex; justify-content: space-between;"> From: To: </div>

			DATE			AMOUNT
Full Name			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Receipt Description						

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 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 PATTY KIM		From: <u>10/24/2017</u> To: <u>11/27/2017</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period		(1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period		(2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
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: To:

				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.							PAGE TOTAL \$ 0.00

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

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
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

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF PATTY KIM	From <u>10/24/2017</u> To: <u>11/27/2017</u>

DATE				AMOUNT		
To Whom Paid AURORA CLUB			MO	DAY	YEAR	\$ 100.00
Mailing Address 401 DIVISION ST.			10	25	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17110	Description of Expenditure ART SUPPLIES DONATION			
To Whom Paid ZETA PHI BETA SORORITY, INC.			MO	DAY	YEAR	\$ 125.00
Mailing Address PO BOX 5236			10	25	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17110	Description of Expenditure TICKET			
To Whom Paid PATTY KIM			MO	DAY	YEAR	\$ 66.23
Mailing Address 2418 N. 2ND ST.			11	2	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17110	Description of Expenditure FOOD REIMBURSEMENT			
To Whom Paid BUTTON IT UP! LLC			MO	DAY	YEAR	\$ 34.00
Mailing Address 3210 CLOVERFIELD RD.			11	6	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17109	Description of Expenditure T-SHIRTS			
To Whom Paid MICHELE SELLITTO			MO	DAY	YEAR	\$ 197.90
Mailing Address 4424 RATHLIN CT.			11	6	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17112	Description of Expenditure FUNDRAISER REIMBURSEMENTS			

To Whom Paid MICHELE SELLITTO			MO	DAY	YEAR	
Mailing Address 4424 RATHLIN CT.			11	6	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17112	Description of Expenditure SERVICES RENDERED			

To Whom Paid SO. CENTRAL PA SICKLE CELL COUNCIL			MO	DAY	YEAR	
Mailing Address 2000 LINGLESTOWN RD. SUITE 103			11	9	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17110	Description of Expenditure TICKET			

To Whom Paid PATTY KIM			MO	DAY	YEAR	
Mailing Address 2418 N. 2ND ST.			11	12	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17110	Description of Expenditure FOOD REIMBURSEMENT			

To Whom Paid SAM'S CLUB			MO	DAY	YEAR	
Mailing Address 6781 GRAYSON RD.			11	13	2017	
City HARRISBURG	State PA	Zip Code (Plus 4) 17111	Description of Expenditure CAMPAIGN DONATIONS			

To Whom Paid FULTON BANK			MO	DAY	YEAR	
Mailing Address PO BOX 4887			11	17	2017	
City LANCASTER	State PA	Zip Code (Plus 4) 17604	Description of Expenditure BANK FEES			

To Whom Paid PFDW PAC			MO	DAY	YEAR	
Mailing Address 127 R. BATES PATCH RD.			11	23	2017	
City GREENFIELD TWP	State PA	Zip Code (Plus 4) 18407	Description of Expenditure ADVERTISEMENT			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 2,439.16

