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	5299			Rep File			CAI	NDI	DATE		COM	4ITTEE	V	LOBI	31131	
Name of Filing C	ommittee, Candid	late or L	obbyist:		FRIE	ND:	S OF	PAT F	IARI	KINS (C/O T	REASU	RER SU	SAN M.	KOWA	LSKI	
Street Address:																	
City:	ERIE							State	e:	PA			Zip Co	de: 1	6508-1	719	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2	2.	30 DA		P	POST-	3. X		AMENDI REPORT		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5	5.	30 DA		P	POST-	6.		TERMINATION REPORT?		Yes	No	√
report type)	ANNUAL REPORT	7.	Year 2018					IG ME					PAPER		-	DISKE.	TTE
Name of Office S	ought by Candida	ite:						DAT	ΕO	F ELE	СТІО	N	District Number		Par	ty Code	County Code
DEDDECENTATI	VE IN THE GENE	DAI ACC	EMRIV					МО		DAY	YE	AR	1	STH	DEN	1	25
REFRESENTATI	VE IN THE GENE	NAL ASS	ILIIDLI						11		6	2018		(SEE IN	ISTRUCTION	ONS FOR C	ODES)
	Receipts and	МО	DAY	YEAR	1			МО		DAY	YE	AR	FC	OR OFFI	CE USE	ONLY	
Expenditures	trom:		5 1	2	018	Т	0		6		4	2018					
A. Amount Bro	ught Forward Fro	m Last R	eport				\$				8,0	54.09					
B. Total Monetary Contributions And Receipts (From Schedule							\$					0.00					
C. Total Funds	Available (Sum O	f Lines A	and B)				\$				8,0	54.09					
D. Total Expend	ditures (From Sch	edule II	I)				\$				9	37.00					
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)			\$				7,1	17.09					
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	le II)	\$					0.00					
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	/)			\$					0.00			'		
				AFF	IDA	VI	ΓSE	CTIC	N								
	a Committee rep	-	_							-		_			wledge	and belie	ef , true
correct and comple		_						·			·						
Sworn to and subs	cribed before me thi day of —	s	20				_				s	ignature	of Perso	n Submit	tting Rep	ort	
	Signatu	ıre					-						Prin	nted Nam	е		
My Commission Ex	pires						_		·				Ema	nil			
	МО	D	AY	YR						Are	ea Cod	e	Daytin	ne Telep	hone Nu	mber	
Part II- If this is	a report of a can	didate's	authorized	Comn	nitte	e, C	andid	ate sh	nall :	sign he	ere.						
I swear (or affirm) No 320) as amende	that to the best of i	my knowl	edge and beli	ief this	polit	ical	comm	ittee h	as n	ot viola	ted an	y provis	ions of th	e act of I	lune 3,19	937 (P.L.	. 1333,
Sworn to and subsc	ribed before me this day of		20									s	ignature	of Candid	late		
							-						Printe	ed Name			
My Commission Exp	Signature ires						-						Ema	ail			—
	МО	D	AY	YR			-			Area	Code		D	aytime 1	Telephon	e Numbe	 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:	<u>5/1/201</u>	<u>8</u> To:	6/4/2018
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 Candidate			Reporting Period					
		1	From:		То	:		
		•		DATE			AMOUNT	
Full Name of Contributing Committee			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.

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.

Name of Filing Comn	nittee or Candidate		Rep	orting P	eriod			
			Fro	m:		To) :	
		•			DATE			AMOUNT
Full Name of Contribut	or			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
								PAGE TOTAL
								PAGE TO

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	Period					
			From:			То:			
				DA	TE		P	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			0.00
Mailing Address							- \$		0.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTA	AL
Enter Grand Total of Part C on Sche	dule I, Detailed Sun	nmary P	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			
			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:	<u>5/1/2018</u> To:	6/4/2018
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 Candidate			Reporting	g 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	Reporting P	eriod		
FRIENDS OF PAT HARKINS C/O TREASURER SUSAN M. KOWALSKI	From	5/1/2018	То:	<u>6/4/2018</u>

			·		DATE			AMOUNT	
To Wh	om Paid				DAY	YEAR			
HOLY	TRINITY RC CHURCH ZABAWA			МО	DAY	YEAK			
Mailin	g Address			5	1	2018	\$	200.00	
City	ERIE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		PA	16503	PROGRA	AM AD				
To Wh	om Paid			мо	DAY	YEAR			
ECBU	ALL STAR COMMITTEE (LOU RUS	SELL)		МО	DAT	ILAK			
Mailin	g Address			5	1	2018	\$	250.00	
City	ERIE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•		
		PA	16506	PROGRA	AM AD				
To Wh	om Paid			МО	DAY	YEAR			
LAKE	ERIE FANFARE PROGRAM			1-10		1 = Alix			
Mailin	g Address			5	1	2018	\$	95.00	
City	ERIE	State	Zip Code (Plus 4)	s 4) Description of Expenditure					
		PA	165041827	PROGRAM AD					
To Wh	om Paid			МО	DAY	YEAR			
HOLY	TRINITY USHERS SOCIETY								
Mailin	g Address			5	1	2018	\$	50.00	
City	ERIE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		PA	16503	PRE-ELECTION PRIMARY GET TOGETHER					
	om Paid			мо	DAY	YEAR			
	IPAOLO MEMORIAL SCHOLARSHI	P FUND INC.						150.00	
				1 5	1	2018	\$	150.00	
Mailin	g Address			3	1	2010			
Mailin City	ERIE	State	Zip Code (Plus 4)	ļ	tion of Exp				
		State PA	Zip Code (Plus 4) 16508	Descrip	Lion of Exp PONSOR M	enditure	L _ SCHOLAR	SHIP	
City			` ` ` ′	Descrip HOLE S BANQUI	Lion of Exp PONSOR M ET	enditure EMORIAL	_ SCHOLAR	SHIP	
City To Wh	ERIE		` ` ` ′	Descrip HOLE S	Lion of Exp PONSOR M	enditure	_ SCHOLAR	SHIP	
To Wh	ERIE om Paid		` ` ` ′	Descrip HOLE S BANQUI	Lion of Exp PONSOR M ET	enditure EMORIAL	SCHOLAR	SHIP 30.00	
To Wh	erie om Paid CENTRAL LABOR		` ` ` ′	Descrip HOLE S BANQUI	PONSOR MET	enditure EMORIAL YEAR 2018			

To Whom Paid WALMART Mailing Address			МО	DAY	YEAR				
			МО	DAT	TEAK				
			5	17	2018	\$	162.00		
City ERIE		State	Zip Code (Plus 4)	Descript	cription of Expenditure				
		PA	16506	GIFT CARDS-PRIZES FOR A REIMBURSE PAT HARKINS					
								PAGE TOTAL	
Enter Grand Total	of Expenditures o	on Page 1, Report (Cover Page, Item D	-			\$	937.00	
Enter Grand Total	of Expenditures o	on Page 1, Report (Cover Page, Item D				\$		
Enter Grand Total	of Expenditures o	on Page 1, Report (Cover Page, Item D				\$		
Enter Grand Total	of Expenditures o	on Page 1, Report (Cover Page, Item D				\$		
Enter Grand Total	of Expenditures o	on Page 1, Report (Cover Page, Item D				\$		
Enter Grand Total	of Expenditures o	on Page 1, Report (Cover Page, Item D				\$		