

# 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>		2005299		<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 PAT HARKINS C/O TREASURER SUSAN M. KOWALSKI												
<b>Street Address:</b> 3224 COLONIAL AVE												
<b>City:</b> ERIE						<b>State:</b> PA			<b>Zip Code:</b> 16506			
<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 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 2020	<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>
REPRESENTATIVE IN THE GENERAL ASSEMBLY						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	1	STH	DEM	25
						11	3	2020	(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>			
		10	20	2020		11	23	2020				
<b>A. Amount Brought Forward From Last Report</b>						\$ 14,156.35						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 11,300.00						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 25,456.35						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 6.00						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 25,450.35						
<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 PAT HARKINS C/O TREASURER SUSAN M. KOWALSKI	From: <u>10/20/2020</u> To: <u>11/23/2020</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 0.00

<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>	\$ 2,000.00
<b>All Other Contributions (Part B)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 2,000.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 9,300.00
<b>All Other Contributions (Part D)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 9,300.00

<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>	\$ 11,300.00
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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 PAT HARKINS C/O TREASURER SUSAN M. KOWALSKI				From: <u>10/20/2020</u> To: <u>11/23/2020</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
AFSCME COUNCIL 13 POLITICAL & LEG.			11	10	2020	
<b>Mailing Address</b>	4031 EXECUTIVE PARK DRIVE					
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>				
HARRISBURG	PA	171111507				

  

<b>Full Name of Contributing Committee</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
HIGHMARK PAC			11	5	2020	
<b>Mailing Address</b>	1800 CENTER ST					
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>				
CAMP HILL	PA	170890089				

  

<b>Full Name of Contributing Committee</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
FIRST ENERGY PAC			11	5	2020	
<b>Mailing Address</b>	76 S. MAIN ST					
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>				
AKRON	OH	443081890				

  

<b>Full Name of Contributing Committee</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
PA FRATERNAL ORDER OF POLICE PAC			11	5	2020	
<b>Mailing Address</b>	P.O. BOX 898					
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>				
MECHANICSBURG	PA	17055				

  

<b>Full Name of Contributing Committee</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
CRISCI ASSOCIATES PAC			11	5	2020	
<b>Mailing Address</b>	204 STATE STREET					
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>				
HARRISBURG	PA	17101				

Full Name of Contributing Committee ERIE MANAGEMENT GROUP LLC PAC			MO	DAY	YEAR	\$ 250.00
Mailing Address 1540 EAST LAKE RD STE 300			11	5	2020	
City ERIE	State PA	Zip Code (Plus 4) 16511				

Full Name of Contributing Committee VERIZON COMMUNICATIONS INC			MO	DAY	YEAR	\$ 250.00
Mailing Address 417 WALNUT ST. 1ST FLOOR			11	5	2020	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101				

Full Name of Contributing Committee PENNSYLVANIA COAL PAC			MO	DAY	YEAR	\$ 250.00
Mailing Address 212 N 3RD ST STE 102			11	5	2020	
City HARRISBURG	State PA	Zip Code (Plus 4) 171011505				

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

<b>PAGE TOTAL</b>
\$ 2,000.00

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)					

<b>PAGE TOTAL</b>	
\$	0.00

## 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>	<b>Reporting Period</b>
FRIENDS OF PAT HARKINS C/O TREASURER SUSAN M. KOWALSKI	<b>From:</b> <u>10/20/2020</u> <b>To:</b> <u>11/23/2020</u>

				DATE		AMOUNT	
Full Name of Contributing Committee PA TRUCK PAC				MO	DAY	YEAR	\$ 300.00
Mailing Address 910 LINDA LANE				11	5	2020	
City CAMP HILL	State PA	Zip Code (Plus 4) 17011					
Full Name of Contributing Committee DUANE MORRIS LLP GOV. COM STATE & LOCAL FUND				MO	DAY	YEAR	\$ 500.00
Mailing Address 30 SOUTH 17TH ST				11	5	2020	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103					
Full Name of Contributing Committee PENNSYLVANIA AFL-CIO COPE				MO	DAY	YEAR	\$ 500.00
Mailing Address 600 NORTH SECOND STREET				11	5	2020	
City HARRISBURG	State PA	Zip Code (Plus 4) 17101					
Full Name of Contributing Committee ABBOTT LAB EMPLOYEE PAC				MO	DAY	YEAR	\$ 500.00
Mailing Address 100 ABBOTT PARK ROAD				11	5	2020	
City ABBOTT PARK	State IL	Zip Code (Plus 4) 600646001					
Full Name of Contributing Committee PAA - PAC				MO	DAY	YEAR	\$ 500.00
Mailing Address 1925 N FRONT ST PO BOX 2955				11	5	2020	
City HARRISBURG	State PA	Zip Code (Plus 4) 17105					

<b>Full Name of Contributing Committee</b> IRONWORKERS PAC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 500.00
<b>Mailing Address</b> 1750 NEW YORK AVE. N.W.			11	5	2020	
<b>City</b> WASHINGTON	<b>State</b> DC	<b>Zip Code (Plus 4)</b> 20006				
<b>Full Name of Contributing Committee</b> PA ORTHOPAEDIC SOCIETY PAC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b> 415 MARKET ST. SUITE 210			11	5	2020	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101				
<b>Full Name of Contributing Committee</b> THE LH PAC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b> 1238 ST. MARY'S DRIVE			11	5	2020	
<b>City</b> ERIE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16509				
<b>Full Name of Contributing Committee</b> TROOPERS ASSOCIATION PAC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b> 3625 VARTAN WAY			11	5	2020	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17110				
<b>Full Name of Contributing Committee</b> POLITICAL LABOR ACTION - NOW			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 1,000.00
<b>Mailing Address</b> 904 N 2ND ST.			11	5	2020	
<b>City</b> HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17102				
<b>Full Name of Contributing Committee</b> SEIU HEALTHCARE PH COPE			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 2,500.00
<b>Mailing Address</b> 1500 N 2ND ST SUITE 12			11	5	2020	
<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>
\$ 9,300.00

**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: <span style="float: right;">To:</span>

			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.

<b>PAGE TOTAL</b>
\$ 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  From: <span style="float: right;">To:</span>
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			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.

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
FRIENDS OF PAT HARKINS C/O TREASURER SUSAN M. KOWALSKI		From: <u>10/20/2020</u> To: <u>11/23/2020</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

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# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
FRIENDS OF PAT HARKINS C/O TREASURER SUSAN M. KOWALSKI	From <u>10/20/2020</u> To: <u>11/23/2020</u>

DATE				AMOUNT
<b>To Whom Paid</b> NORTHWEST SAVINGS	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 2863 WEST 26TH ST	11	5	2020	\$ 3.00
<b>City</b> ERIE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16506	<b>Description of Expenditure</b> PAPER STATEMENT FEE	
<b>To Whom Paid</b> NORTHWEST SAVINGS	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 2863 WEST 26TH ST	11	15	2020	\$ 3.00
<b>City</b> ERIE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16506	<b>Description of Expenditure</b> PAPER STATEMENT FEE	
<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>				<b>PAGE TOTAL</b> \$ 6.00

