## **Campaign Finance Report**

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

Filer Identificati	on 2005	5299			Report		CANDI	DATE		СОМІ	MITTEE	✓	LOBE	BYIST	
Number : Name of Filing C	ommittee, Candid	late or l	obbvist:			-	 PAT HAR		<u>'/О Т</u>	REASU	RER SU	SAN M K	OWA	ISKI	
					MEND				., 0 1	REA50	KER 50			LOINI	
Street Address:															
City:	ERIE						State:	PA			Zip Co	<b>de:</b> 16	506-2	232	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-		30 DA PRIMA		POST-	3.		AMENDN REPORT		Yes	No	$\checkmark$
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE-		ELECTION			TERMIN REPORT		Yes	No	$\checkmark$		
report type)	ANNUAL REPORT	7. <b>X</b>	<b>Year</b> 2020			FILING METHOD F () CHECK ONE			PAPER		$\checkmark$	DISKE	TTE		
Name of Office S	bought by Candida	te:									District Number	Office Code	Par	ty Code	County Code
							мо	DAY	YE	AR	1	STH	DEN	1	25
REPRESENTATI	VE IN THE GENE	RAL ASS	SEMBLY				11		3	2020		(SEE INS	TRUCTIO	ONS FOR (	CODES)
	Receipts and	мо	DAY	YEAR			мо	DAY	YE	AR	FC	OR OFFIC	E USE	ONLY	
Expenditures	from:		11 24	20	020 <b>T</b>	O	12	3	31	2020					
A. Amount Bro	ught Forward Fro	m Last F	Report			\$	-	-	25,4	\$50.35					
B. Total Moneta	ary Contributions	And Rec	eipts (Fron	n Schec	dule I)	\$				0.00					
C. Total Funds Available (Sum Of Lines A and B)						\$			25,4	150.35					
D. Total Expend	ditures (From Sch	edule II	1)			\$			3,5	06.00					
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)		\$			21,9	44.35					
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedul	e II)	\$				0.00	-				
G. Unpaid Debt	s And Obligations	(From	Schedule IV	/)		\$				0.00					
				AFF	IDAVIT	r se	CTION								
PART I - If this is	a Committee rep	ort, trea	asurer sign	here. I	f this is	a Car	ndidate re	eport, c	andio	date sig	gn here.				
I swear (or affirm) correct and comple	) that this report, inc ete.	luding th	e attached sc	hedules	filed on p	aper	or by elect	ronic me	edium	, are to i	the best o	f my know	ledge	and beli	ef , true
Sworn to and subs	cribed before me thi day of	S	20						s	ignature	e of Perso	n Submitt	ing Rep	oort	
	Signati	Ire				-					Prin	ted Name			
My Commission Ex	-										Ema	il			
	мо	D	AY	YR		-		Are	ea Cod	e	Daytin	ne Telepho	one Nu	mber	
Part II- If this is	a report of a can	didate's	authorized	Comm	ittee, Ca	ndid	ate shall	sign he	ere.						
I swear (or affirm) No 320) as amende	that to the best of a	ny knowl	edge and beli	ief this	political	comm	ittee has n	ot violat	ed an	y provis	ions of th	e act of Ju	ine 3,19	937 (P.L	. 1333,
Sworn to and subsc	ribed before me this									s	ignature	of Candida	te		
	day of 										Printe	ed Name			
	Signature					•									
My Commission Exp	ires										Ema	il			
	мо	D	AY	YR				Area	Code		D	aytime Te	lephon	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:	<u>11/24/202</u>	<u>0</u> То:	<u>12/31/2020</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			-	
TOTAL for the Reporting	g 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	(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	g Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)				
TOTAL for the Reporting	J Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add ar 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 Candidat	e		Reporting Period					
			From	From: To:				
		·			DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	•)					
								PAGE TOTAL
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.						\$	0.00	

Use this Part to it	emize all other 50.01 to \$250.0	1 TO \$250.00 contribution 00 in the repo	s wi ortin	ith an ng per	aggreg iod.			rom
Name of Filing Committee or Candida	te		Rep	orting P	eriod			
	From: To				):			
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address	_	_					\$	0.00
City								
								PAGE TOTAL
Enter Grand Total of Part A on	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	2.		\$	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.

Name of Filing Committee or Candidate			Reporting	Period					
						То:			
				DA	TE		A	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			0.00
Mailing Address							\$		0.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTA	۹L
Enter Grand Total of Part C on Sched	lule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	C	0.00

### 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			Rep	orting Pe	riod			
			Froi	From:			То:	
				D	ATE		АМ	IOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Pl	ıs 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page	e, Sectio	on 3.			P#	<b>AGE 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			Report	ing Peric	d				
			From:			То:			
				D	ATE			AMOUNT	r
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (	Plus 4)						
Receipt Description	·	•					•		
		_						PAGE TO	TAL
Enter Grand Total of Part E on Sched	ule 1, Detailed Sumn	nary Page,	Section	4.			\$		0.00

### PAGE 8

### 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>11/24/2020</u> То	<u>12/31/2020</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIB	JTOR	
TOTAL for the Reporting Pe	eriod (1	) \$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
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, 3		r \$	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:			То:	
				DATE			AMOUNT
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address	-	_				<b>\$</b>	0.00
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.					ie,	F	PAGE TOTAL
						\$	0.00

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

Name of Filing Committee or Candidate			Re	porting I	Period		
			Fro	om:		То:	
					DATE		AMOUNT
Full Name of Contributor				мо	DAY	YEAR	
Mailing Address							<b>\$</b> 0.00
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupa	ation		·
Employer Mailing Address/Principal Plac	e of Business	City	Stat	e Zip	Code(Plus 4)	Descri	ption of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-Kind	d Contributions D	etaile	ed			<b>PAGE TOTAL</b> 0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period					
FRIENDS OF PAT HARKINS C/O TREAS	URER SUSAN M. KOV	VALSKI	From	<u>11/24</u>	<u>4/2020</u>	То:	<u>12/31/2020</u>		
				DATE			AMOUNT		
To Whom Paid			мо	DAY	YEAR				
HOUSING & amp; NEIGHBORHOOD DE	ELOPMENT SERVICE								
Mailing Address			11	27	2020	\$	500.00		
City ERIE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	РА	16501	DONAT	ION FOR C	OMMUNI	TY PROJ	ECTS		
To Whom Paid			мо	DAY	YEAR				
NORTHWEST SAVINGS									
Mailing Address			12	13	2020	\$	3.00		
City ERIE	State	Zip Code (Plus 4)	Description of Expenditure						
	РА	16506	PAPER STATEMENT FEE						
To Whom Paid GECAC			мо	DAY	YEAR				
Mailing Address				13	2020	\$	500.00		
City ERIE	State	Zip Code (Plus 4)	Descrip	l tion of Exp	enditure	I			
	РА	16501	DONATION TO GREATER ERIE COM. ACTION COM.						
To Whom Paid			мо	DAY	YEAR				
BARBER NATIONAL INSTITUTE									
Mailing Address			12	13	2020	\$	500.00		
City ERIE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	PA	16507	DONAT	ION FOR B	ARBER N	ATIONA	L INSTITUTE		
To Whom Paid			мо	DAY	YEAR				
EMMAUS MINISTRIES									
Mailing Address			12	13	2020	\$	1,000.00		
City ERIE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
PA 16503			DONAT	ΙΟΝ ΤΟ ΕΜ	MAUS MI	INISTRIE	S		
To Whom Paid			мо	DAY	YEAR				
ERIE PLAYHOUSE									
Mailing Address		12	13	2020	\$	500.00			
City ERIE	State	Zip Code (Plus 4)	Description of Expenditure						
	PA	16501	DONAT	DONATION TO ERIE PLAYHOUSE					

To Whom Paid				DAY	YEAR			
ERIE ZOOLOGICAL SOCIETY			мо	DAY	TEAR			
Mailing Address			12	13	2020	\$	500.00	
City ERIE	State	Zip Code (Plus 4)	Description of Expenditure					
PA 16508				ON TO ER	IE ZOOLO	DGICAL	SOCIETY	
To Whom Paid			мо	DAY	YEAR			
NORTHWEST SAVINGS			MO		TEAR			
Mailing Address			12	30	2020	\$	3.00	
City ERIE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	16506	PAPER S	STATEMEN	T FEE			
							PAGE TOTAL	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	3,506.00	