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 :	ion 2022	C1345			Repor Filed		CANDI	DATE	✓	СС	OMMITTE		LOB	BYIST	
	Committee, Candid	ate or L	obbyist:			-	HARKINS								
Street Address:															
City:							State:				Zip Cod	e: 16	508		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY				DAY I MARY	POST- 3.			AMENDMENT REPORT?		Yes	No	, 🔨
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	2ND FRIDAY PRE- 5. 3 ELECTION				POST-	6.		TERMINA REPORT?	Yes	No	· 🗸	
report type)	ANNUAL REPORT	7. X	Year 2022				ING METH) CHECK O				PAPER		\checkmark	DISKE	TTE
Name of Office S	L Sought by Candida	te:					DATE C	F ELEC	CTION		District Number	Office Code	Par	ty Code	County Code
DEDDECENTAT							мо	DAY	YEA	R	1	STH	DEN	1	I
REPRESENTAL	IVE IN THE GENER	KAL ASS	EMBLI				11		8	2022		(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR	2		мо	DAY	YEA	R	FOI	R OFFIC	E USE	ONLY	
Expenditures	s from:		11 29	2	022	ГО	12	. 3	1	2022					
A. Amount Bro	ught Forward From	n Last R	eport			9	\$			0.00					
B. Total Monet	ary Contributions	And Rec	eipts (From	1 Sche	dule I)	9	\$ 0.00								
C. Total Funds	Available (Sum Of	Lines A	and B)			9	\$			0.00					
D. Total Expen	ditures (From Sch	edule II	I)			9	\$			0.00					
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)			\$			0.00					
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	le II)		\$			0.00					
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	')		9	\$			0.00					
				AFF	IDAV	IT SI	ECTION								
	s a Committee rep														-6. 5
correct and compl) that this report, inc ete.	luaing the	e attached sc	neaules	s filed of	і раре	r or by elect	ronic me	aium, a	are to	the best of	ту клом	vieage	and bei	er, true
Sworn to and subs	scribed before me this day of	5	20						Sig	natur	e of Person	Submitt	ing Rep	oort	
	Signatu	re				_					Print	ed Name			
My Commission E	xpires					_					Email				
	МО	D	AY	YR				Are	a Code		Daytime	e Telepho	one Nu	mber	
	a report of a can) that to the best of r ed.							-		provis	ions of the	act of Ju	ıne 3,1	937 (P.I	1333,
-	cribed before me this									s	ignature of	f Candida	ite		
	day of					_					-				
	Signature					_					Printed	i Name			
My Commission Exp	-										Email	l			
	мо	D	AY	YR		_		Area	Code		Da	ytime Te	elephor	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reportin	Period		
	i veboi tini	g i cittu		
PATRICK J. HARKINS	From:	<u>11/29/202</u>	2 To:	<u>12/31/2022</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	J 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	\$	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	J Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)				
TOTAL for the Reporting	g 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 Candidate				Reporting Period						
			From:		То	:				
		•		DATE			AMOUNT			
Full Name of Contributing	g Committee		мо	DAY	YEAR					
Mailing Address						\$	0.00			
City	State	Zip Code (Plus 4)								
	·				•		PAGE TOTAL			
Enter Grand Total of P	art A on Schedule I, Detaile	ed Summary Page, Sec	tion 2.			\$	0.00			

PAGE 3

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)								
Name of Filing Committee or Candidat	e		-	orting P	eriod			
			Fro	m:		Тс):	
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						
								PAGE TOTAL
Enter Grand Total of Part A on S	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						
			From:			То:			
				DA	TE		А	MOUNT	
Full Name of Contributing Com	mittee			мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
						ſ		PAGE TOTAL	
Enter Grand Total of Part C o	on Schedule I, Detaile	ed Summary Pa	age, Sectio	n 3.			\$	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	Reporting Period	
	From:	То:

				D	ATE		АМС	DUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion	-		
Employer Mailing Address/Principal Pl Business	ace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sch	iedule I, Detai	led Sumr	nary Page, Secti	on 3.			PAG	GE TOTAL
	-						\$	0.00

I

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 Candidat	Name of Filing Committee or Candidate Rep			porting Period					
			From:			То:			
				D	ATE			AMOUN ⁻	г
Full Name				мо	DAY	YEAR			
Mailing Address							-	\$	0.00
City	State	Zip Code (Plus 4)						
Receipt Description									
Enter Grand Total of Part E on Sche	dule T. Detailed !	Summary Page	Section	4				PAGE TO	TAL
							\$		0.00

SCHEDULE II IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS

E THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THING DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Perio	od	
PATRICK J. HARKINS	From:	<u>11/29/2022</u> то:	<u>12/31/2022</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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 R				Reporting Period					
	From:			То:					
				DATE		АМО	UNT		
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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL		
					4	6	0.00		

0.00

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

Name of Filing Committee or Candidate					Reporting Period					
					Fro	m:		То:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(P	lus 4)						
Employer of Contributor	I		1			Occupat	tion			
Employer Mailing Address/Princ Business	ipal Place of	City		State		Zip 4)	Code(Plus	Descri	ption of	f Contribution
Enter Grand Total of Part G	on Schodulo II	In-Kind	Contributio		taile					PAGE TOTAL

	1
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.	PAC

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period				
			From			То:	
				DATE			AMOUNT
To Whom Paid			мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)	Description of Expenditure				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
						\$	0.00