### **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	299			Repo Filed		CAN	NDI	DIDATE COMMITTEE COBSTIST							1151	
Name of Filing C	Committee, Candid	ate or L	obbyist:		FRIEN	DS OF	PAT H	IARI	KINS %	6 TR	EASURI	R SUS	AN M. I	KOW	ALS	(I	
Street Address:							_										
City:	ERIE						State	:	PA			Zip Co	de: 1	L650	6		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 DA		P	POST-	3.		AMENDN REPORT		Ye	es	No	<b>~</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 DA		P	POST-	6.		TERMIN. REPORT		Ye	es	No	<b>\</b>
report type)	ANNUAL REPORT	7.	<b>Year</b> 2023				CHECH					PAPER		N		DISKET	TE
Name of Office S	Sought by Candida	te:	•				DATI	ΕO	F ELE	СТІО	N	District Number	Offic Code		Party	/ Code	County Code
							МО		DAY	YE	AR					•	
								2		7	2023		(SEE	INSTRU	JCTIO	NS FOR CO	DDES)
	Receipts and	МО	DAY	YEAR			МО		DAY	ΥI	AR	FC	OR OFF	ICE (	JSE (	ONLY	
Expenditures	from:		1 24	. 20	023	то		2		L7	2023						
A. Amount Bro	ught Forward Fror	n Last R	eport			\$				33,7	783.57						
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sche	dule I)	) \$					0.00						
C. Total Funds	Available (Sum Of	Lines A	and B)			\$					0.00						
D. Total Expenditures (From Schedule III)									1,0	00.00							
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)		\$				32,7	83.57						
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedu	le II)	\$					0.00						
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV	/)		\$					0.00						
				AFF	IDAV	'IT SE	CTIC	N									
	s a Committee rep	-	_								_		of my kn	owled	dge aı	nd belief	f , true
correct and comple	ete.						•										
Sworn to and subs	cribed before me this day of	•	20							S	ignature	of Perso	n Subm	itting	Repo	rt	
	Signatu	re				<u> </u>						Prin	ted Nar	ne			
My Commission Ex	cpires							•				Ema	il				
	МО	D.	AY	YR					Are	a Cod	le	Daytin	ne Tele <sub>l</sub>	phone	Num	ber	_
	a report of a cand												_			_	
No 320) as amende		ny knowle	edge and beli	ief this	politica	il comm	ittee ha	as n	ot violat	ed an	y provis	ions of th	e act of	June	3,193	37 (P.L.	1333,
Sworn to and subsc	ribed before me this day of		20								S	ignature	of Candi	date			
	_											Printe	ed Name	9			-
My Commission Exp	Signature pires											Ema	nil				-
	МО	D	AY	YR					Area	Code		D	aytime	Telep	hone	Numbe	<del></del>

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF PAT HARKINS % TREASURER SUSAN M. KOWALSKI	From:	<u>1/24/202</u>	<u>!3</u> To:	2/17/2023
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	y 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	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 Candida	te	1	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.

0.00

### 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 Committe	e or Candidate		Reportin	g Period			
			From:		To	<b>)</b> :	
		·		DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)			I		
City		2.5 code (1.125 1)					

#### **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							<b>-</b>   \$		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	eriod			
				Fron	n:		Te	<b>)</b> :	
					D	ATE			AMOUNT
Full Name of Contributor					МО	DAY	YEAR	\$	0.00
Mailing Address									
City	State	Zip	Code (Plus	s 4)					
Employer Name					Occupa	tion			
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip C	ode (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Sเ	umma	ary Page,	Section	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 % TREASURER SUSAN M. KOWALSKI	From:	1/24/2023 <b>To:</b>	2/17/2023
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 Cand				Reporting Period						
			From:			To:				
				DATE			AMOUNT			
Full Name of Contributor			МО	DAY	YEAR					
Mailing Address						<b>7</b> \$	0.00			
City	State	Zip Code (Plus 4)								
Description of Contribution:	•		•	•	•					
Enter Grand Total of Part F on	Schedule II, In-Ki	nd Contributions Detai	led Sum	mary Pag	ge,		PAGE TOTAL			
Section 2.						\$	0.00			

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate				Rep	porting	Period			
				Fro	m:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address				-				\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occup	ation			
Employer Mailing Address/Principal Plac	e of Business	City	у	State	e Zip	Code(Plus 4)	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, In-Kin	nd C	Contributions D	etaile	ed				PAGE TOTAL
Summary Page, Section 3.									0.00

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting	Period		
FRIENDS OF PAT HARKINS % TREASURER SUSAN M. KOWALSKI	From	1/24/2023	То:	2/17/2023

				DATE			AMOUNT
To Whom Paid			мо	DAY	YEAR		
MATTHEW GERGELY	МО		ILAK				
Mailing Address	1	23	2023	\$	1,000.00		
City WHITE OAK	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	15131	CAMPAI	GN DONAT	ΓΙΟΝ		
							PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							1,000.00