

Campaign Finance Report

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

Filer Identification Number : 20110285		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST	
Name of Filing Committee, Candidate or Lobbyist: KIM, PATTY FRIENDS OF								
Street Address: 2418 N 2ND ST								
City: HARRISBURG				State: PA		Zip Code: 17110		
TYPE OF REPORT (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 <input checked="" type="checkbox"/> No <input type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
	ANNUAL REPORT	7. X	Year 2020	FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/>	DISKETTE <input type="checkbox"/>	
Name of Office Sought by Candidate:				DATE OF ELECTION		District Number	Office Code	
REPRESENTATIVE IN THE GENERAL ASSEMBLY				MO	DAY	YEAR		
				11	3	2020		
				(SEE INSTRUCTIONS FOR CODES)				
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO			FOR OFFICE USE ONLY
		11	24	2020	12 31 2020			
A. Amount Brought Forward From Last Report				\$ 49,113.69				
B. Total Monetary Contributions And Receipts (From Schedule I)				\$ 0.00				
C. Total Funds Available (Sum Of Lines A and B)				\$ 49,113.69				
D. Total Expenditures (From Schedule III)				\$ 8,469.46				
E. Ending Cash Balance (Subtract Line D From Line C)				\$ 40,644.23				
F. Value Of In-Kind Contributions Received (From Schedule II)				\$ 0.00				
G. Unpaid Debts And Obligations (From Schedule IV)				\$ 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

Name of Filing Committee or Candidate	Reporting Period
KIM, PATTY FRIENDS OF	From: <u>11/24/2020</u> To: <u>12/31/2020</u>

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 0.00
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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.

Name of Filing Committee or Candidate	Reporting Period
	From: To:

DATE				AMOUNT
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Full Name of Contributing Committee			MO	DAY	YEAR	\$0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

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

PAGE TOTAL
\$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:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$	0.00
Mailing Address							
City	State	Zip Code (Plus 4)					

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL
\$ 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: To:

			DATE	AMOUNT
Full Name of Contributor			MO	DAY
Mailing Address			YEAR	\$ 0.00
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.

PAGE TOTAL
\$ 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: To:
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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.

PAGE TOTAL
\$ 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	
KIM, PATTY FRIENDS OF		From: <u>11/24/2020</u> To: <u>12/31/2020</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period		(1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period		(2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)			
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: To:
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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.						PAGE TOTAL \$ 0.00

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

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)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
KIM, PATTY FRIENDS OF	From <u>11/24/2020</u> To: <u>12/31/2020</u>

				DATE		AMOUNT	
To Whom Paid				MO	DAY	YEAR	
Panera Bread							
Mailing Address 4659 High Pointe Blvd				11	24	2020	\$ 79.42
City Harrisburg		State PA	Zip Code (Plus 4) 17111	Description of Expenditure Campaign expense			
To Whom Paid				MO	DAY	YEAR	
Shelby Rexrode							
Mailing Address PO Box 4644				11	25	2020	\$ 500.00
City Harrisburg		State PA	Zip Code (Plus 4) 17111	Description of Expenditure Services rendered			
To Whom Paid				MO	DAY	YEAR	
Angel Fox							
Mailing Address 524 S 16th St				12	1	2020	\$ 188.00
City Harrisburg		State PA	Zip Code (Plus 4) 17104	Description of Expenditure Food reimbursement for event			
To Whom Paid				MO	DAY	YEAR	
Walmart							
Mailing Address 3400 Hartzdale Dr				12	16	2020	\$ 150.00
City Camp Hill		State PA	Zip Code (Plus 4) 17011	Description of Expenditure Campaign expense			
To Whom Paid				MO	DAY	YEAR	
Fulton Bank							
Mailing Address PO Box 4887				12	17	2020	\$ 2.00
City Lancaster		State PA	Zip Code (Plus 4) 17604	Description of Expenditure bank fee			
To Whom Paid				MO	DAY	YEAR	
Sizzle Catering by SB							
Mailing Address 431 S 17th St				12	18	2020	\$ 564.00
City Harrisburg		State PA	Zip Code (Plus 4) 17104	Description of Expenditure Catering			

To Whom Paid Jaime Johnson			MO 12	DAY 21	YEAR 2020	\$ 250.00
Mailing Address 3219 N. 6th St.						
City Harrisburg	State PA	Zip Code (Plus 4) 17110	Description of Expenditure Services rendered			

To Whom Paid Calvin Hynson			MO 12	DAY 21	YEAR 2020	\$ 250.00
Mailing Address 1915 N 17th St						
City Harrisburg	State PA	Zip Code (Plus 4) 17102	Description of Expenditure Services rendered			

To Whom Paid Queens BBQ and Southern			MO 12	DAY 22	YEAR 2020	\$ 1,092.01
Mailing Address 912 N 3rd St						
City Harrisburg	State PA	Zip Code (Plus 4) 17102	Description of Expenditure Catering			

To Whom Paid Tears for Tarina			MO 12	DAY 22	YEAR 2020	\$ 500.00
Mailing Address 1521 Swatara St						
City Harrisburg	State PA	Zip Code (Plus 4) 17104	Description of Expenditure Donation			

To Whom Paid Friends of Patty Kim			MO 12	DAY 31	YEAR 2020	\$ 4,894.03
Mailing Address 2418 North Second Street						
City Harrisburg	State PA	Zip Code (Plus 4) 17110	Description of Expenditure Miscellaneous expense adjustment			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 8,469.46

