

# 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>		20110285		<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> KIM, PATTY FRIENDS OF												
<b>Street Address:</b> 2418 N 2ND ST												
<b>City:</b> HARRISBURG						<b>State:</b> PA			<b>Zip Code:</b> 17110			
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	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.	Year 2021	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b>	<input checked="" type="checkbox"/>	<b>DISKETTE</b>	<input type="checkbox"/>		
<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>
						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	DEM 22			
						11	2	2021	(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>			
		1	1	2021		5	3	2021				
<b>A. Amount Brought Forward From Last Report</b>					\$ 40,644.23							
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>					\$ 4,564.00							
<b>C. Total Funds Available (Sum Of Lines A and B)</b>					\$ 45,208.23							
<b>D. Total Expenditures (From Schedule III)</b>					\$ 2,228.32							
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>					\$ 42,979.91							
<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>
KIM, PATTY FRIENDS OF	From: <u>1/1/2021</u> To: <u>5/3/2021</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>	\$ 250.00
<b>All Other Contributions (Part B)</b>	\$ 250.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 500.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 3,000.00
<b>All Other Contributions (Part D)</b>	\$ 500.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 3,500.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 564.00

<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>	\$ 4,564.00
---	-------------

# 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.**

<b>Name of Filing Committee or Candidate</b>  KIM, PATTY FRIENDS OF	<b>Reporting Period</b>  From: <u>1/1/2021</u> To: <u>5/3/2021</u>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;"><b>DATE</b></td> <td style="width: 40%; border: none;"><b>AMOUNT</b></td> </tr> </table>		<b>DATE</b>	<b>AMOUNT</b>
<b>DATE</b>	<b>AMOUNT</b>		

<b>Full Name of Contributing Committee</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
Health Partners of Philadelphia PAC			1	14	2021	
<b>Mailing Address</b> 901 Market St., Suite 500						
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19107				

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

<b>PAGE TOTAL</b>
\$ 250.00

**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)**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
KIM, PATTY FRIENDS OF	<b>From:</b> <u>1/1/2021</u> <b>To:</b> <u>5/3/2021</u>

DATE				AMOUNT
<b>Full Name of Contributor</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
Lois Lehrman Grass				
<b>Mailing Address</b> 2000 Crums Mill Rd				\$ 250.00
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17110		

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

<b>PAGE TOTAL</b>
\$ 250.00

# 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>  KIM, PATTY FRIENDS OF	<b>Reporting Period</b>  <b>From:</b> <u>1/1/2021</u> <b>To:</b> <u>5/3/2021</u>
---	--

				DATE		AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
HIGHMARK PAC OF HIGHMARK INC				4	5	2021	
Mailing Address 1800 CENTER ST							
City CAMP HILL	State PA	Zip Code (Plus 4) 17089-0000					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 1,000.00
MCNEES PAC				4	5	2021	
Mailing Address 100 PINE ST PO BOX 1166							
City HARRISBURG	State PA	Zip Code (Plus 4) 171081166					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 500.00
PAMIC PAC				4	5	2021	
Mailing Address 4999 Louise Dr. Suite 304							
City Mechanicsburg	State PA	Zip Code (Plus 4) 17055					
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 1,000.00
CAPITAL BLUE PAC				4	5	2021	
Mailing Address PO BOX 60710							
City HARRISBURG	State PA	Zip Code (Plus 4) 17106-0710					

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

PAGE TOTAL	
\$	3,000.00

**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.)**

<b>Name of Filing Committee or Candidate</b>  KIM, PATTY FRIENDS OF	<b>Reporting Period</b>  <b>From:</b> <u>1/1/2021</u> <b>To:</b> <u>5/3/2021</u>
---	--

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$500.00
Saul Ewing Arnstein & Lehr LLP				4	5	2021	
Mailing Address		1500 Market St., 38th Floor					
City	Philadelphia	State	PA	Zip Code (Plus 4)	19102		
Employer Name				Saul Ewing Arnstein & Lehr LLP			
Employer Mailing Address/Principal Place of Business				Occupation			
Saul Ewing Arnstein & Lehr LLP				Saul Ewing Arnstein & Lehr LLP			
Employer Mailing Address/Principal Place of Business				City		State	Zip Code (Plus 4)
Same as above				Same as above		PA	19102

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

<b>PAGE TOTAL</b>
\$ 500.00

**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.**

<b>Name of Filing Committee or Candidate</b>  KIM, PATTY FRIENDS OF	<b>Reporting Period</b>  <b>From:</b> <u>1/1/2021</u> <b>To:</b> <u>5/3/2021</u>
---	--

				DATE			AMOUNT	
Full Name				MO	DAY	YEAR	\$	564.00
Sizzle Catering by SB								
Mailing Address				1	1	2021		
431 S 17th St		City	State				Zip Code (Plus 4)	
Harrisburg		PA		17104				
Receipt Description								
Refunded								

**Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.**

PAGE TOTAL	
\$	564.00

## 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>	
KIM, PATTY FRIENDS OF		From: <u>1/1/2021</u> To: <u>5/3/2021</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 RECEIVED - 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**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>  <b>From:</b> <span style="float: right;"><b>To:</b></span>
--	---

			DATE			AMOUNT
<b>Full Name of Contributor</b>			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 0.00
<b>Mailing Address</b>						
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>				
<b>Description of Contribution:</b>						
<b>Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.</b>						<b>PAGE TOTAL</b>  \$ 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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
KIM, PATTY FRIENDS OF	From <u>1/1/2021</u> To: <u>5/3/2021</u>

DATE				AMOUNT
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
Breaking the Chainz Inc.				
<b>Mailing Address</b> 519 Division St.	1	4	2021	\$ 30.21
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17110	<b>Description of Expenditure</b> Books	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
Fulton Bank				
<b>Mailing Address</b> PO Box 4887	1	15	2021	\$ 2.00
<b>City</b> Lancaster	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17604	<b>Description of Expenditure</b> Service fee	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
Shawn Brown				
<b>Mailing Address</b> 431 S 17th St	1	26	2021	\$ 564.00
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17104	<b>Description of Expenditure</b> Event Catering	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
Tri-County Federation of Democratic Women				
<b>Mailing Address</b> 4457 Saybrook Ln	1	27	2021	\$ 100.00
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17110	<b>Description of Expenditure</b> Donation	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
Emaje Naturals				
<b>Mailing Address</b> Information Requested	1	28	2021	\$ 40.00
<b>City</b> Information Requested	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17110	<b>Description of Expenditure</b> Campaign expense	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
City Line Diner				
<b>Mailing Address</b> 3302 Derry St	2	11	2021	\$ 38.65
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17111	<b>Description of Expenditure</b> Campaign expense	

To Whom Paid Cork and Fork			MO	DAY	YEAR	\$ 31.84
Mailing Address 200 State St			2	12	2021	
City Harrisburg	State PA	Zip Code (Plus 4) 17101	Description of Expenditure Campaign Expense			

To Whom Paid Fulton Bank			MO	DAY	YEAR	\$ 2.00
Mailing Address PO Box 4887			2	17	2021	
City Lancaster	State PA	Zip Code (Plus 4) 17604	Description of Expenditure Service fee			

To Whom Paid March of Dimes			MO	DAY	YEAR	\$ 100.00
Mailing Address 3748 Sharon St			2	20	2021	
City Harrisburg	State PA	Zip Code (Plus 4) 17111	Description of Expenditure Donation			

To Whom Paid Skies the Limit, Inc.			MO	DAY	YEAR	\$ 500.00
Mailing Address 1821 Fulton St.			3	4	2021	
City Harrisburg	State PA	Zip Code (Plus 4) 17110	Description of Expenditure Donation			

To Whom Paid Friends of Justin Fleming			MO	DAY	YEAR	\$ 250.00
Mailing Address 109 Fawn Ct			3	9	2021	
City Harrisburg	State PA	Zip Code (Plus 4) 17110	Description of Expenditure Donation			

To Whom Paid Hilton Harrisburg			MO	DAY	YEAR	\$ 51.04
Mailing Address 1 North Second St.			3	10	2021	
City Harrisburg	State PA	Zip Code (Plus 4) 17101	Description of Expenditure Campaign expense			

To Whom Paid WB Mason Co			MO	DAY	YEAR	\$ 197.48
Mailing Address 3215 Espresso Way			3	10	2021	
City Manchester	State PA	Zip Code (Plus 4) 17345	Description of Expenditure Supplies			

To Whom Paid Primanti Bros Restaurant			MO	DAY	YEAR	\$ 33.50
Mailing Address 131 W Chocolate Ave			3	11	2021	
City Hershey	State PA	Zip Code (Plus 4) 17033	Description of Expenditure Campaigh expense			

<b>To Whom Paid</b> Park Harrisburg			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 5.35
<b>Mailing Address</b> 223 Walnut St., Suite 1			3	16	2021	
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101	<b>Description of Expenditure</b> Parking			

  

<b>To Whom Paid</b> Fulton Bank			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 2.00
<b>Mailing Address</b> PO Box 4887			3	17	2021	
<b>City</b> Lancaster	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17604	<b>Description of Expenditure</b> Service fee			

  

<b>To Whom Paid</b> Central PA Successful Dreams Fund			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 200.00
<b>Mailing Address</b> 2330 Green St			3	22	2021	
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17110	<b>Description of Expenditure</b> Donation			

  

<b>To Whom Paid</b> Soul House Cafe LLC			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 73.40
<b>Mailing Address</b> 1639 Paxton St			4	5	2021	
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17104	<b>Description of Expenditure</b> Campaign expense			

  

<b>To Whom Paid</b> Fulton Bank			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 2.00
<b>Mailing Address</b> PO Box 4887			4	16	2021	
<b>City</b> Lancaster	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17604	<b>Description of Expenditure</b> Service fee			

  

<b>To Whom Paid</b> Park Harrisburg			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 4.85
<b>Mailing Address</b> 223 Walnut St., Suite 1			4	21	2021	
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101	<b>Description of Expenditure</b> Parking			

  

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 2,228.32

