

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		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes		No	<input checked="" type="checkbox"/>	
	ANNUAL REPORT	7. X	Year 2022	FILING METHOD () CHECK ONE			PAPER	<input checked="" type="checkbox"/>	DISKETTE			
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code
REPRESENTATIVE IN THE GENERAL ASSEMBLY						MO	DAY	YEAR	103	STH	DEM	
						11	8	2022	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		11	29	2022		12	31	2022				
A. Amount Brought Forward From Last Report						\$ 31,304.32						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 0.00						
C. Total Funds Available (Sum Of Lines A and B)						\$ 31,304.32						
D. Total Expenditures (From Schedule III)						\$ 2,819.97						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 28,484.35						
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

Signature

Printed Name

My Commission Expires

Email

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>11/29/2022</u> To: <u>12/31/2022</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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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)					

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>11/29/2022</u> To: <u>12/31/2022</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>11/29/2022</u> To: <u>12/31/2022</u>

				DATE		AMOUNT	
To Whom Paid Park Harrisburg				MO	DAY	YEAR	\$ 4.35
Mailing Address 223 Walnut St., Suite 1				11	29	2022	
City Harrisburg	State PA	Zip Code (Plus 4) 17101	Description of Expenditure parking				
To Whom Paid Park Harrisburg				MO	DAY	YEAR	\$ 4.35
Mailing Address 223 Walnut St., Suite 1				12	6	2022	
City Harrisburg	State PA	Zip Code (Plus 4) 17101	Description of Expenditure parking				
To Whom Paid Friends of Sara Innamorato				MO	DAY	YEAR	\$ 250.00
Mailing Address 5166 Natrona Way				11	29	2022	
City Pittsburgh	State PA	Zip Code (Plus 4) 15201	Description of Expenditure Donation				
To Whom Paid Paragon Solution				MO	DAY	YEAR	\$ 25.00
Mailing Address 2141 East Broadway Rd, Suite 202				12	2	2022	
City Tempe	State AZ	Zip Code (Plus 4) 85282	Description of Expenditure merchant fees				
To Whom Paid Timothy White				MO	DAY	YEAR	\$ 750.00
Mailing Address 439 S 14th St				12	7	2022	
City Harrisburg	State PA	Zip Code (Plus 4) 17104	Description of Expenditure Services Rendered				
To Whom Paid Vantiv eCommerce				MO	DAY	YEAR	\$ 1.95
Mailing Address 900 Chelmsford St				12	9	2022	
City Lowell	State MA	Zip Code (Plus 4) 01852	Description of Expenditure fees				

To Whom Paid Bonefish Grill			MO	DAY	YEAR	\$ 45.46
Mailing Address 3505 Gettysburg Road			12	14	2022	
City Camp Hill	State PA	Zip Code (Plus 4) 17011	Description of Expenditure Campaign expense			

To Whom Paid Crawdaddys			MO	DAY	YEAR	\$ 29.76
Mailing Address 1500 North 6th Street			12	15	2022	
City Harrisburg	State PA	Zip Code (Plus 4) 17110	Description of Expenditure campaign expense			

To Whom Paid Fulton Bank			MO	DAY	YEAR	\$ 2.00
Mailing Address PO Box 4887			12	16	2022	
City Lancaster	State PA	Zip Code (Plus 4) 17604	Description of Expenditure fees			

To Whom Paid Patty Kim			MO	DAY	YEAR	\$ 607.10
Mailing Address 2418 N 2nd St			12	22	2022	
City Harrisburg	State PA	Zip Code (Plus 4) 17110	Description of Expenditure Holiday Party Reimbursement			

To Whom Paid Flavor 76			MO	DAY	YEAR	\$ 300.00
Mailing Address 513 Lawrence Dr			12	27	2022	
City Harrisburg	State PA	Zip Code (Plus 4) 17109	Description of Expenditure Catering			

To Whom Paid Flavor 76			MO	DAY	YEAR	\$ 800.00
Mailing Address 513 Lawrence Dr			12	29	2022	
City Harrisburg	State PA	Zip Code (Plus 4) 17109	Description of Expenditure catering			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 2,819.97

