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 20	05299			Rep File	port ed B		CANI	DIC	DATE		COMN	1ITTEE	✓	LOB	BYIST		
Name of Filing C	ommittee, Can	didate or I	Lobbyist:		FRIE	END	S OF	PAT HA	\RK	INS								
Street Address:																		
City:	ERIE							State:		PA			Zip Cod	le: 16	506			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	AY PRE	-	2. X	30 DA		P	OST-	3.		AMENDM REPORT?		Yes	N	0	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	AY PRE	<u>-</u> !	5.	30 DA		P	OST-	6.		TERMINA REPORT?		Yes	N	0	\
report type)	ANNUAL REPO	RT 7.	Year 2024	ļ				NG MET		_			PAPER		\checkmark	DISK	ETTE	
Name of Office S	ought by Cand	idate:						DATE	OF	ELE(CTIC	N	District Number	Office Code	Par	ty Code	Code	
								МО		DAY	YI	AR		•	DEI	1		
								1	11		5	2024		(SEE INS	TRUCTI	ONS FOR	CODES	5)
Summary of		МО	DAY	YEAR				МО		DAY	ΥI	EAR	FO	R OFFIC	E USE	ONLY		
Expenditures	irom:		3 5	5 2	024	Т	0		4		8	2024						
A. Amount Bro	ught Forward F	rom Last I	Report				\$				27,	785.16						
B. Total Moneta	ary Contributio	ns And Re	ceipts (Fro	n Sche	dule	: I)	\$					0.00						
C. Total Funds	Available (Sum	Of Lines I	A and B)				\$				27,	785.16						
D. Total Expend	ditures (From S	chedule I	II)				\$				2,3	885.95						
E. Ending Cash	Balance (Subt	ract Line D	From Line	C)			\$				25,3	99.21						
F. Value Of In-	Kind Contributi	ons Receiv	ved (From S	Schedu	le II	:)	\$					0.00						
G. Unpaid Debt	s And Obligation	ns (From	Schedule I	V)			\$					0.00						
				AFF	IDA	\VI	T SE	CTIO	V									
PART I - If this is	a Committee	eport, tre	asurer sign	here.	If th	is is	a Cai	ndidate	re	port, c	andi	date sig	ın here.					
I swear (or affirm) correct and comple		including th	ne attached so	chedules	s filed	d on	paper	or by ele	ectro	onic me	edium	, are to t	he best of	my knov	vledge	and be	ief , tr	ue
Sworn to and subs	cribed before me day of	this	20						-		S	Signature	of Persoi	n Submitt	ing Re _l	ort		_
	Sign	ature					- -		-				Print	ed Name				_
My Commission Ex	pires						_		-				Emai	I				
	МО		DAY	YR						Are	ea Cod	le	Daytim	e Teleph	one Nu	mber		\perp
Part II- If this is	a report of a c	andidate's	authorized	d Comn	nitte	e, C	andid	ate sha	II s	ign he	ere.							
I swear (or affirm) No 320) as amende		of my know	ledge and be	lief this	polit	tical	comm	ittee has	s no	t violat	ted an	ıy provisi	ions of the	e act of Ju	ine 3,1	937 (P.	L. 133	3,
Sworn to and subsc	ribed before me t day of	his	20									Si	ignature o	f Candida	ite			_
							-						Printe	d Name				-
	Signatu	ıre					-		_				Emai	1				_
My Commission Exp	ires						_						Lina	•				_
	мо		DAY	YR	1		-			Area	Code		Da	ytime Te	lephor	e Num	ber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -						
Name of Filing Committee or Candidate	Reporting	g Period				
FRIENDS OF PAT HARKINS	From: $\frac{3/5/2024}{}$ To: $\frac{4}{}$					
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	g 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	g 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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00		

PAGE TOTAL

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					
			Fr	om:		То	•		
					DATE			AMOUNT	
Full Name of Contributing Commit	tee			МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus	4)						

nmary Page, Section 2. \$ 0.00

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

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.

Name of Filing Comm	nittee or Candidate	Re	Reporting Period					
		Fr	rom:		To) :		
				DATE			AMOUNT	
Full Name of Contribut	or		мо	DAY	YEAR			
Mailing Address						\$	0.00	
City	State	Zip Code (Plus 4)						
					1	1		
					1		PAGE TOTAL	

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 Ca	me of Filing Committee or Candidate				Reporting Period						
			From:			То:					
				DA	TE		A	MOUNT			
Full Name of Contributing Comn	nittee			мо	DAY	YEAR		0.00			
Mailing Address							*	0.00			
City	State	Zip Code	e (Plus 4)								
								PAGE TOTAL			
Enter Grand Total of Part C o	on Schedule I, Detailed	d Summary Pa	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) :	
					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 Schedule I, Detailed Summary 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	_						\neg	
City	State	Zip Code (Plus 4)					
Receipt Description	•	•		•	•	•	•	
			.	_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	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	d	
FRIENDS OF PAT HARKINS	From:	3/5/2024 To :	<u>4/8/2024</u>
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,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Car	ndidate		Reporting Period					
			From:			То:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•		•	•		•		
					-			
Enter Grand Total of Part F o	n Schedule II, In-Ki	nd Contributions Detai	led Sun	ımary Pa	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

STATEMENT OF EXPENDITURES

Name of Filing Comm	ittee or Candidate			Reportir	ng Period			
FRIENDS OF PAT HA	RKINS			From	<u>3/5</u>	5/2024	То:	4/8/2024
					DATE			AMOUNT
To Whom Paid				мо	DAY	YEAR		
GEM CITY LODGE								
Mailing Address				1	25	2024	\$	75.00
City ERIE		State	Zip Code (Plus 4)	Descript	tion of Exp	enditure		
		PA	16502	SOUVEN	NIR JR. AD	PROGRA	M HIGHLI	GHTING
To Whom Paid				мо	DAY	YEAR		
SACRED HEART KNIG	HTS OF COLUMBU	S O/O RON JONES		PIC		I Erax		
Mailing Address				2	3	2024	\$	266.25
City ERIE		State	Zip Code (Plus 4)	1) Description of Expenditure				
PA 16508				SACRED	HEART SI	PAGHETT	I DINENR	TICKETS
To Whom Paid				мо	DAY	YEAR		
P.J. DIPAOLO MEMOR	IAL SCHOLARSHIF	FUND INC.		PIC				
Mailing Address				2	3	2024	\$	100.00
City ERIE		State	Zip Code (Plus 4)	Descript	tion of Exp	enditure	<u>. </u>	
		PA	16508	GOLF H	OLE SPONS	SOR		
To Whom Paid				мо	DAY	YEAR		
POLICE ATHLETIC LE	AGUE CITY HALL							
Mailing Address				2	22	2024	\$	500.00
City ERIE		State	Zip Code (Plus 4)	Descript	tion of Exp	enditure	•	
		PA	16501	PAL DIN	INER			
To Whom Paid				мо	DAY	YEAR		
SAINT PATRICK CHU	RCH			PIC		I Erax		
Mailing Address				2	22	2024	\$	100.00
City ERIE		State	Zip Code (Plus 4)	Descript	tion of Exp	enditure	•	
		PA	16507	SAINT F	PATRICK'S	PARADE		
To Whom Paid				MO	DAY	YEAR		
To Whom Paid CATHEDRAL PREP SC	HOOL			МО	DAY	YEAR		

Zip Code (Plus 4)

16501

Description of Expenditure

GALA

TWO TICKETS TO CATHEDRAL PREP'S LEGACY

City

ERIE

State

PA

						• •	12		
To Whom Paid			wo	DAY	YEAR				
ERIE CRAWFORD CEN	TRAL LABOR COUNCIL		МО	DAY	YEAK				
Mailing Address			3	15	2024	\$	100.00		
City ERIE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	PA	16501	HALF PAGE AD & amp; DINNER TICKET						
To Whom Paid			МО.	DAY	VEAD				
ERIE COUNTY DEMOC	RATIC PARTY SPRING DINNER	R	МО	DAT	YEAR				
Mailing Address			3	15	2024	\$	300.00		
City ERIE	State	Zip Code (Plus 4)	Description of Expenditure						
	PA	16501	PROGR	AM AD					
To Whom Paid			МО	DAY	YEAR				
ERIE TIMES NEWS SP	ECIAL OLYMPICS		МО	DAI	ILAK				
Mailing Address			3	15	2024	\$	250.00		
City ERIE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	PA	16509	DONATION SPECIAL OLYMPICS						
To Whom Paid			МО	DAY	YEAR				
SAM'S CLUB			1-10		1 Z Aux				
Mailing Address			3	15	2024	\$	319.70		
City ERIE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	PA	16509	REIMBU PARADI		HARKINS	CANDY F	OR ST. PAT'S		
To Whom Paid			МО.	DAY	VEAD				
HOLY TRINITY USHER	S		МО	DAY	YEAR				
Mailing Address			3	29	2024	\$	75.00		
City ERIE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
PA 16503				HOLY TRINITY PRE-ELECTION GET TOGETHER					
							PAGE TOTAL		
Enter Grand Total o	inter Grand Total of Expenditures on Page 1, Report Cover Page, Item I					\$	2,385.95		