

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 :		2005299		Report Filed By :		CANDIDATE		COMMITTEE		✓		LOBBYIST	
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF PAT HARKINS													
Street Address: C/O SUSAN M. KOWALSKI TREASURER, 3224 COLONIAL AVE													
City: ERIE						State: PA				Zip Code: 16506			
TYPE OF REPORT (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	No	✓			
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	✓			
	ANNUAL REPORT	7.	Year 2024	FILING METHOD () CHECK ONE			PAPER	✓	DISKETTE				
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code	
						MO	DAY	YEAR	DEM				
						11	5	2024	(SEE INSTRUCTIONS FOR CODES)				
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY				
		3	5	2024		4	8	2024					
A. Amount Brought Forward From Last Report					\$ 27,785.16								
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 0.00								
C. Total Funds Available (Sum Of Lines A and B)					\$ 27,785.16								
D. Total Expenditures (From Schedule III)					\$ 2,385.95								
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 25,399.21								
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
FRIENDS OF PAT HARKINS	From: <u>3/5/2024</u> To: <u>4/8/2024</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 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	YEAR	\$ 0.00
Mailing Address							
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	
Mailing Address				\$ 0.00
<div style="display: flex; justify-content: space-between;"> City State Zip Code (Plus 4) </div>				
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	
FRIENDS OF PAT HARKINS		From: <u>3/5/2024</u> To: <u>4/8/2024</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 RECIEVED - 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:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
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
FRIENDS OF PAT HARKINS	From <u>3/5/2024</u> To: <u>4/8/2024</u>

				DATE		AMOUNT	
To Whom Paid GEM CITY LODGE				MO	DAY	YEAR	\$ 75.00
Mailing Address 2517 ASH STREET				1	25	2024	
City ERIE		State PA	Zip Code (Plus 4) 16502	Description of Expenditure SOUVENIR JR. AD PROGRAM HIGHLIGHTING YOUTH			
To Whom Paid SACRED HEART KNIGHTS OF COLUMBUS O/O RON JONES				MO	DAY	YEAR	\$ 266.25
Mailing Address 3505 OAKWOOD ST.				2	3	2024	
City ERIE		State PA	Zip Code (Plus 4) 16508	Description of Expenditure SACRED HEART SPAGHETTI DINENR TICKETS			
To Whom Paid P.J. DIPAOLO MEMORIAL SCHOLARSHIP FUND INC.				MO	DAY	YEAR	\$ 100.00
Mailing Address P.O. BOX 3073				2	3	2024	
City ERIE		State PA	Zip Code (Plus 4) 16508	Description of Expenditure GOLF HOLE SPONSOR			
To Whom Paid POLICE ATHLETIC LEAGUE CITY HALL				MO	DAY	YEAR	\$ 500.00
Mailing Address 626 STATE ST ROOM 111				2	22	2024	
City ERIE		State PA	Zip Code (Plus 4) 16501	Description of Expenditure PAL DINNER			
To Whom Paid SAINT PATRICK CHURCH				MO	DAY	YEAR	\$ 100.00
Mailing Address 130 EAST 4TH ST				2	22	2024	
City ERIE		State PA	Zip Code (Plus 4) 16507	Description of Expenditure SAINT PATRICK'S PARADE			

To Whom Paid CATHEDRAL PREP SCHOOL			MO	DAY	YEAR	
Mailing Address 250 WEST 10TH ST.			3	1	2024	
City ERIE	State PA	Zip Code (Plus 4) 16501	Description of Expenditure TWO TICKETS TO CATHEDRAL PREP'S LEGACY GALA			

To Whom Paid ERIE CRAWFORD CENTRAL LABOR COUNCIL			MO	DAY	YEAR	
Mailing Address 32 WEST 8TH #502			3	15	2024	
City ERIE	State PA	Zip Code (Plus 4) 16501	Description of Expenditure HALF PAGE AD & DINNER TICKET			

To Whom Paid ERIE COUNTY DEMOCRATIC PARTY SPRING DINNER			MO	DAY	YEAR	
Mailing Address P.O. BOX 1184			3	15	2024	
City ERIE	State PA	Zip Code (Plus 4) 16501	Description of Expenditure PROGRAM AD			

To Whom Paid ERIE TIMES NEWS SPECIAL OLYMPICS			MO	DAY	YEAR	
Mailing Address 8161 OLIVER ROAD			3	15	2024	
City ERIE	State PA	Zip Code (Plus 4) 16509	Description of Expenditure DONATION SPECIAL OLYMPICS			

To Whom Paid SAM'S CLUB			MO	DAY	YEAR	
Mailing Address 7200 PEACH ST			3	15	2024	
City ERIE	State PA	Zip Code (Plus 4) 16509	Description of Expenditure REIMBURSE PAT HARKINS CANDY FOR ST. PAT'S PARADE			

To Whom Paid HOLY TRINITY USHERS			MO	DAY	YEAR	
Mailing Address 2220 REED STREET			3	29	2024	
City ERIE	State PA	Zip Code (Plus 4) 16503	Description of Expenditure HOLY TRINITY PRE-ELECTION GET TOGETHER			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 2,385.95

