

Commonwealth of Pennsylvania

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 <input checked="" type="checkbox"/>	LOBBYIST					
Name of Filing Committee, Candidate or Lobbyist: HARKINS, PAT FRIENDS OF										
Street Address: 2665 SCHLEY ST										
City: ERIE			State: PA	Zip Code: 16508-1716						
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1. <input checked="" type="checkbox"/>	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>
	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.	Year 2006	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	STH	DEM	25	
				11	7	2006	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY	
		1	1	1	TO	3	27	2006		
A. Amount Brought Forward From Last Report				\$		100.00				
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		5,365.00				
C. Total Funds Available (Sum Of Lines A and B)				\$		5,465.00				
D. Total Expenditures (From Schedule III)				\$		3,576.75				
E. Ending Cash Balance (Subtract Line D From Line C)				\$		1,888.25				
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
 My Commission Expires _____
 MO DAY YR

 Signature of Person Submitting Report

 Printed Name

 Email

 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
 My Commission Expires _____
 MO DAY YR

 Signature of Candidate

 Printed Name

 Email

 Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period	
HARKINS, PAT FRIENDS OF	From:	To: <u>3/27/2006</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor		
TOTAL for the Reporting Period (1)	\$	3,840.00

2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)		
Contributions Received From Political Committees (Part A)	\$	175.00
All Other Contributions (Part B)	\$	1,350.00
TOTAL for the Reporting Period (2)	\$	1,525.00

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.)	\$	5,365.00
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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	
HARKINS, PAT FRIENDS OF	From:	To: <u>3/27/2006</u>
DATE		AMOUNT

Full Name of Contributing Committee	MO	DAY	YEAR	\$ 75.00
TEAMSTER JOINT COUNCIL				
Mailing Address 910 SHERATON DR. SUITE 210				
City MARS	3	25	2006	
State PA				
Zip Code (Plus 4) 160469440				

Full Name of Contributing Committee	MO	DAY	YEAR	\$ 100.00
FLO FABRIZIO				
Mailing Address 1216 WEST 26TH ST				
City ERIE	3	25	2006	
State PA				
Zip Code (Plus 4) 16508				

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

PAGE TOTAL
\$ 175.00

Full Name of Contributor AL DELUCA			MO	DAY	YEAR	\$ 100.00
Mailing Address 430 STATE ST			3	25	2006	
City ERIE	State PA	Zip Code (Plus 4) 16508				
Full Name of Contributor REV JOHN DETISCH			MO	DAY	YEAR	\$ 100.00
Mailing Address 816 WEST 26TH ST			3	6	2006	
City ERIE	State PA	Zip Code (Plus 4) 16508				
Full Name of Contributor DAVE KOSOBUCKI			MO	DAY	YEAR	\$ 100.00
Mailing Address 3228 FRENCH ST			3	2	2006	
City ERIE	State PA	Zip Code (Plus 4) 16504				
Full Name of Contributor ED SUTULA			MO	DAY	YEAR	\$ 100.00
Mailing Address 321 EAST FRONT ST			3	6	2006	
City ERIE	State PA	Zip Code (Plus 4) 16507				
Full Name of Contributor BARB SKALA			MO	DAY	YEAR	\$ 100.00
Mailing Address 5052 WOLF RUN DR.			2	27	2006	
City ERIE	State PA	Zip Code (Plus 4) 16505				
Full Name of Contributor LOUIS PEDANO			MO	DAY	YEAR	\$ 100.00
Mailing Address 5057 WOLF RUN DR.			3	12	2006	
City ERIE	State PA	Zip Code (Plus 4) 16505				

Full Name of Contributor			MO	DAY	YEAR	\$	
AL CARLSON			3	12	2006		100.00
Mailing Address 302 EAST 4TH ST.							
City ERIE	State PA	Zip Code (Plus 4) 16507					

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

PAGE TOTAL	
\$	1,350.00

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	
Mailing Address				\$ 0.00
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	
Mailing Address				\$ 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: _____

			DATE	AMOUNT	
Full Name	MO	DAY	YEAR		
Mailing Address				\$	0.00
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
PART F
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OF \$50.01 TO \$250.00**

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

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

To Whom Paid POLISH FALCONS NEST #610			MO	DAY	YEAR	
Mailing Address 413 EAST 3RD ST			3	1	2006	
City ERIE	State PA	Zip Code (Plus 4) 16507	Description of Expenditure DOWN PAYMENT RENTAL HALL			
To Whom Paid DESANTIS SIGNS			MO	DAY	YEAR	
Mailing Address 540 WEST 18TH ST			3	13	2006	
City ERIE	State PA	Zip Code (Plus 4) 165021721	Description of Expenditure YARD SIGNS WIRE FRAMES FOR SIGNS			
To Whom Paid POLISH FALCONS NEST #610			MO	DAY	YEAR	
Mailing Address 413 EAST 3RD ST			3	12	2006	
City ERIE	State PA	Zip Code (Plus 4) 16507	Description of Expenditure DINNER FUND RAISER			
To Whom Paid ST. PETERS WOMEN COUNCIL			MO	DAY	YEAR	
Mailing Address 230 WEST 10TH ST			3	21	2006	
City ERIE	State PA	Zip Code (Plus 4) 16501	Description of Expenditure ADVERTISING			
To Whom Paid			MO	DAY	YEAR	
Mailing Address			3	6	2006	
City	State	Zip Code (Plus 4)	Description of Expenditure FILING FEE			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 3,576.75

