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 60	482				Rep File			CAN	DII	DATE	√	co	MMITTEE		LOBE	BYIST		
Name of Filing C	ommittee, Can	didate	or Lo	bbyist:		HAR	KIN	S, PA	TRICK	J.									
Street Address:																			
City:									State:					Zip Code	e:				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.		2ND FRIDA PRIMARY	/ PRE-	- 2	2.	30 DA PRIMA		P	OST-	3. X		AMENDME REPORT?	NT	No		\	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.		2ND FRIDAY ELECTION	/ PRE	- 5	5.	30 DA		P	OST-	6.		TERMINAT REPORT?	TION	Yes	No		√
report type)	ANNUAL REPO	RT 7.	,	Year 2006					IG MET CHECK					PAPER		\	DISKE	TTE	
Name of Office S	ought by Candi	date:							DATE	O	F ELE	CTIC	ON	District Number	Office Code	Par	ty Code	Cour	
									МО		DAY	Y	EAR	1	STH	DEM	1	25	
REPRESENTATI	ve in the gen	IERAL /	ASSE	MBLY						11		7	2006		(SEE INS	STRUCTIO	ONS FOR	CODES)
Summary of		M	0	DAY	YEAR				МО		DAY	Y	EAR	FOF	OFFIC	E USE	ONLY		
Expenditures	from:			1 1		1	Т	0		6		5	2006						
A. Amount Bro	ught Forward F	rom La	st Re	port				\$		•			0.00						
B. Total Moneta	ary Contribution	ns And	Rece	ipts (From	Sche	dule	I)	\$					0.00						
C. Total Funds	Available (Sum	Of Line	es A a	and B)				\$					0.00						
D. Total Expend	ditures (From S	chedul	le III)				\$				2,	730.86						
E. Ending Cash	Balance (Subtr	act Lin	ne D F	rom Line (E)			\$				(2,7	30.86)						
F. Value Of In-	Kind Contribution	ons Re	ceive	d (From So	hedu	le II)	\$					0.00						
G. Unpaid Debt	s And Obligatio	ns (Fro	om So	chedule IV)			\$					0.00		,				
					AFF	IDA	VI	T SE	CTIO	N									
PART I - If this is	a Committee r	eport,	treas	urer sign l	nere. 1	(f thi	is is	a Car	ndidate	re	port, c	candi	date sig	ın here.					
I swear (or affirm) correct and comple		ncludin	g the	attached sch	edules	filed	l on	paper	or by ele	ectr	onic m	edium	ı, are to t	he best of	my knov	vledge a	and beli	ef , tr	ue
Sworn to and subs	cribed before me	this		20						•			Signature	of Person	Submitt	ing Rep	ort		_
	Sign	ature						- -		•				Printe	ed Name	ı			_
My Commission Ex	_									-				Email					-
	мо		DA	Υ	YR			_			Are	ea Co	de	Daytime	Teleph	one Nu	mber		
Part II- If this is	a report of a c	andida	te's a	uthorized	Comn	itte	e, C	andid	ate sha	all s	sign he	ere.							
I swear (or affirm) No 320) as amende		of my kn	nowled	dge and belie	ef this	polit	ical	comm	ittee ha	s no	ot viola	ted ar	ny provisi	ions of the	act of Ju	ıne 3,19	937 (P.L	. 133	3,
Sworn to and subsc		nis											Si	ignature of	Candida	ite			-
	day of ————————————————————————————————————							-						Printed	Name				-
	Signatu	re						-		_				Ema:					_
My Commission Exp	ires													Email					
	МО		DA	Y	YR			•			Area	Code		Day	time To	elephon	e Numb	er	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period		
HARKINS, PATRICK J.	From:	То:	<u>6/5/2006</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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa		\$	0.00

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.

Name of Filing Committee or Cand	Reporting Period						
		F	rom:		То	:	
		·		DATE			AMOUNT
Full Name of Contributing Committee	e		мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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

0.00

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)

Name of Filing Commit	tee or Candidate	F	Reporting F	Period			
		F	From:		To):	
		-		DATE			AMOUNT
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address						\$	0.00
_	Gt-t-	Zin Code (Blue 4)		1	I		
City	State	Zip Code (Plus 4)					

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	ndidate		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	n 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	riod			
			Fror	n:		To):	
				D	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupa	tion			
Employer Mailing Address/Principal Pla	ce of Business	City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary 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:		
		'			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	'						<u> </u>	
	- C		. .:	_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	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		
HARKINS, PATRICK J.	From:	То:	6/5/2006
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS F	PER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
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 Ca	ndidate		Reportin	g Period			
			From:			To:	
				DATE			AMOUNT
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address						- \$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:	•		•				
					Г		
Enter Grand Total of Part F of Section 2.	n Schedule II, In-Ki	nd Contributions Detai	led Sum	ımary Pa	ge,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi _l	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

2,730.86

STATEMENT OF EXPENDITURES

Name of Filing Committee or	Candidate		Reporti	ng Period				
HARKINS, PATRICK J.			From			То:	6/5/2006	
		l		DATE			AMOUNT	
To Whom Paid			МО	DAY	YEAR			
PRINTING CONCEPTS								
Mailing Address			4	13	2006	\$	1,382.00	
City ERIE	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	16506	MAILER	R-LOAN TO	CAMPAIG	SN		
To Whom Paid			МО	DAY	YEAR			
POSTMASTER GENERAL			MO	DA1	ILAK			
Mailing Address			4	13	2006	\$	1,348.86	
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
			POSTA	GE FOR MA	ILER-LOA	N TO CA	MPAIGN	
							PAGE TOTAL	