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					port ed B		CA	NDII	DATE	√	C	OMMITTE	E	LOB	BYIST			
Name of Filing C	Committee, Can	didate (or Lo	bbyist:		HAF	RKIN	S, PA	TRIC	K J.										
Street Address:																				
City:	_								State	e:				Zip Cod	e:					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.		2ND FRIDA PRIMARY	Y PRE	-	2.	30 DA		Р	OST-	3.		AMENDM REPORT?	AMENDMENT Yes No REPORT?					
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.		2ND FRIDA ELECTION	Y PRE	<u>-</u>	5. X	30 DA		Р	OST-	6.		TERMINA REPORT?	TION	Yes	N	0	/	
report type)	ANNUAL REPO	RT 7.		Year 2006					IG ME CHEC					PAPER		/	DISK	ETTE		
Name of Office S	ought by Cand	idate:				-			DAT	E O	F ELE	CTI	ON	District Number	Office Code	Pai	ty Cod	Cour		
REPRESENTATI	VE IN THE CEN	JEDAI .	ACCE.	EMDI V					МО		DAY)	YEAR	1	STH	DEI	1	25		
REFRESENTATI	VE IN THE GET	ILNAL A	ASSL	INDLI						11		7	2006		(SEE IN	STRUCTI	ONS FOR	CODES	5)	
Summary of		МС	0	DAY	YEAR	ł			МО		DAY	١	YEAR	FO	R OFFI	CE USE	ONLY			
Expenditures	s trom:			1 1		1	Т	0		10	:	23	2006							
A. Amount Bro	ught Forward F	rom La	st Re	port				\$					0.00							
B. Total Moneta	ary Contributio	ns And	Rece	ipts (Fron	n Sche	dule	e 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 (Subt	act Lin	e D F	rom Line	C)			\$				(2,7	730.86)	1						
F. Value Of In-	Kind Contributi	ons Red	ceive	d (From S	chedu	le II	I)	\$					0.00							
G. Unpaid Debt	s And Obligation	ns (Fro	om Sc	chedule IV	/)			\$					0.00			•				
					AFF	·ID/	AVI	T SE	CTIC	N										
PART I - If this is	s a Committee I	eport,	treas	urer sign	here.	If th	nis is	a Car	ndidat	e re	port, o	cand	lidate si	gn here.						
I swear (or affirm) correct and comple		including	g the a	attached sc	hedule	s file	d on	paper	or by e	lectr	onic m	ediu	m, are to	the best of	my kno	wledge	and be	ief , tr	ue	
Sworn to and subs	cribed before me day of	this		20						•			Signatur	e of Person	Submit	ting Re	oort		_	
	Sign	ature	<u> </u>					- -						Print	ed Name	=			-	
My Commission Ex	-									-				Emai	l				_	
	мо		DA	Y	YR			_			Are	ea Co	ode	Daytime	e Teleph	one Nu	mber			
Part II- If this is	a report of a c	andidat	te's a	uthorized	Comn	nitte	ee, C	andid	ate sl	nall s	sign he	ere.								
I swear (or affirm) No 320) as amende		of my kn	nowled	dge and beli	ief this	poli	tical	comm	ittee h	as no	ot viola	ted a	any provis	sions of the	act of J	une 3,1	937 (P.	L. 133	3,	
Sworn to and subsc		his											9	ignature o	f Candid	ate			- 	
	day of 							-						Printe	d Name				- J	
	Signatu	re						-											_	
My Commission Exp	ires													Emai	I					
	мо		DA	Υ	YR	1		•			Area	Code	e	Da	ytime T	elephor	ne Num	ber	_	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period		
HARKINS, PATRICK J.	From:	То:	10/23/2006
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

Name of Filing Committe	e or Candidate		Re	porting	Period			
			Fr	om:		То	:	
			1		DATE			AMOUNT
Full Name of Contributing	Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					

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 Filling Committee of Candidate				oorting P m:	o:			
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
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:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary 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	o:		
					D	ATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								\$		0.00
City	State	Zi	p Code (Plus	4)						
Employer Name		•			Occupa	tion	•	•		
Employer Mailing Address/Principal Pla Business	ce of		City			State		Zip C	Code (Plus	4)
Enter Grand Total of Part C on Scho	edule I, Detail	led Sumr	mary Page,	Section	on 3.			\$	PAGE TO	TAL 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	ting Perio	od			
			From:			To:		
				D	ATE		AM	OUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	•	•		•	•			
Enter Grand Total of Part E o	on Schedule I. Detailer	d Summary Page	Section	4			PA	GE TOTAL
	,,,	. Junimary 1 ago,	5000.011				\$	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:	10/23/2006
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	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	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 Candid	ate		Reporting	g Period			
			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	те Г		PAGE TOTAL
Section 2.	ciicadic 11, 111 Kii	ia contributions beta	nea Sam	iiiiai y i aş	,		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:			То:		
						DAT	E			AMOUNT
Full Name of Contributor					мо	DAY	,	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(Plus	4)						
Employer of Contributor					Оссир	ation				
Employer Mailing Address/Principal Plad Business	ce of	City	Sta	ite	Zi 4)	p Code(Pl)	us	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, I	n-Kind	Contributions	Deta	ailed					PAGE TOTAL
Summary Page, Section 3.										0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or	Candidate		Reporti	ng Period			
HARKINS, PATRICK J.			From			То:	10/23/2006
				DATE			AMOUNT
To Whom Paid PRINTING CONCEPTS			мо	DAY	YEAR		
Mailing Address 4982 PAC	IFIC AVE.		4	13	2006	\$	1,382.00
City ERIE	State PA	Zip Code (Plus 4) 16506	_	otion of Exp R-LOAN TO			
To Whom Paid POSTMASTER GENERAL			мо	DAY	YEAR		
Mailing Address ERIE POS	Γ OFFICE		4	13	2006	\$	1,348.86
City	State	Zip Code (Plus 4)	1 '	otion of Exp			MPAIGN
Enter Grand Total of Exper	nditures on Page 1. Re	eport Cover Page. Item [).				PAGE TOTAL

2,730.86