Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

				5	Dono	, 	CANDI	DATE	СОМ	MITTEE		LOBE	BYIST	
Filer Identificat Number :	ion 200	5299			Repo Filed	By :					Y			
Name of Filing	Committee, Candi	date or L	obbyist:		HARKI	NS, PA	AT FRIENI	DS OF						
Street Address:														
City:	ERIE						State:	PA		Zip Co	de: 16	508-1	716	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	AY PRE	- 2.	30 D. PRIM		POST- 3	3.	AMENDI REPORT		Yes	No	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA		E- 5.	30 D. ELEC	AY F TION	POST- 6	.	TERMIN REPORT		Yes	No	\checkmark
report type)	ANNUAL REPOR	ORT 7. X Year 2006 FILING METHOD P () CHECK ONE P					PAPER		\checkmark	DISKE	TTE			
Name of Office	Sought by Candid	ate:					DATE O	F ELEC	TION	District Number		Par	ty Code	County Code
REPRESENTAT	IVE IN THE GENE						мо	DAY	YEAR		STH	DEN	1	25
							11	7	2006		(SEE INS	STRUCTIO	ONS FOR (CODES)
	Receipts and	мо	DAY	YEAF	2		мо	DAY	YEAR	F	OR OFFIC	E USE	ONLY	
Expenditure	s from:		1 1	1	1	ТО	12	31	L 2006	1				
A. Amount Bro	ought Forward Fro	om Last R	Report			\$			1,855.07					
B. Total Monet	tary Contributions	s And Rec	eipts (From	m Sche	dule I)	\$	5		0.00					
C. Total Funds	Available (Sum (Of Lines A	and B)			\$	5		1,855.07					
D. Total Exper	nditures (From Sc	hedule II	11)			\$	5		300.00					
E. Ending Cash	n Balance (Subtra	ct Line D	From Line	C)		\$	5		1,555.07	4				
F. Value Of In-	-Kind Contributio	ns Receiv	ed (From S	Schedu	le II)	\$	5		0.00	4				
G. Unpaid Deb	ts And Obligation	s (From	Schedule I	V)		\$	5		2,730.86					
				AFF	IDAV	IT SE	CTION							
	is a Committee re		-							-				
I swear (or affirm correct and comp	i) that this report, in lete.	cluding th	e attached so	chedule	s filed or	1 paper	or by elect	ronic med	lium, are to	the best o	of my knov	vledge	and beli	ef , true
Sworn to and sub	scribed before me th day of	nis	20						Signatur	e of Perso	on Submitt	ing Rep	oort	
	Signat	ture				_				Prir	nted Name	1		
My Commission E	-									Ema	ail			
	мо	D	AY	YR				Area	Code	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a ca	ndidate's	authorized	d Comr	nittee,	Candic	late shall	sign her	e.					
I swear (or affirm No 320) as amend) that to the best of led.	my knowl	edge and be	lief this	s politica	l comn	nittee has n	ot violate	d any provis	ions of th	e act of Ju	ıne 3,19	937 (P.L	. 1333,
Sworn to and subs	cribed before me thi day of	s	20						S	Gignature	of Candida	ite		
			-~			_				Print	ed Name			
My Commission Ex	Signature	2								Ema	ail			
-						_								
	мо	D	ΑΥ	YF	Ł			Area Co	ode	D	aytime Te	elephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period		
HARKINS, PAT FRIENDS OF	From:	То:	<u>12/31/2006</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			
TOTAL for the Reporting	9 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 ar 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 Candidat	e		Reporting Period					
1			Fro	om:		1		
		·			DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	4)					
								PAGE TOTAL
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.						\$	0.00	

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. (Exclude contributions from political committees reported in Part A)								
Name of Filing Committee or Candida	te		Rep	orting P	eriod			
			Fror	m:		Тс):	
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address		_					\$	0.00
City	State	Zip Code (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part A on	Schedule I, Detail	ed Summary Pag	je, Se	ection 2			\$	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		A	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.00
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Sched	lule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	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			Rep	Reporting Period					
			Froi	n:		Т):		
				D	ATE		АМ	IOUNT	
Full Name of Contributor				мо	DAY	YEAR	\$	0.00	
Mailing Address									
City	State	Zip Code (Pl	ıs 4)						
Employer Name				Occupat	tion				
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page	e, Sectio	on 3.			P#	AGE 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			Report	ing Peric	d				
			From:			То:			
				D	ATE			AMOUNT	r
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (Plus 4)						
Receipt Description	·	•					•		
		_						PAGE TO	TAL
Enter Grand Total of Part E on Sched	ule 1, Detailed Sumn	nary 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		
HARKINS, PAT FRIENDS OF	From:	То:	<u>12/31/2006</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, 3		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Cano	lidate		Reporting	g Period			
				From:			
				DATE			AMOUNT
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address						7 \$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:	ł		•				
Enter Grand Total of Part F on Section 2.	Schedule II, In-Kir	nd Contributions Detai	led Sum	mary Pag	je,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate			Rep	porting I	Period		
			Fro	From:			
					DATE		AMOUNT
Full Name of Contributor				мо	DAY	YEAR	
Mailing Address			-				\$ 0.00
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupa	ation		
Employer Mailing Address/Principal Plac	e of Business	City	State	e Zip	Code(Plus 4)	Descri	ption of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-Kind	d Contributions D	etaile	d			PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period			
HARKINS, PAT FRIENDS OF			From			То:	<u>12/31/2006</u>
				DATE		AMOUNT	
To Whom Paid			мо	DAY	YEAR		
GERTRUDE BARBER NATIONAL INSTITU	JTE				•		
Mailing Address			11	29	2006	\$	100.00
City ERIE State Zip Code (Plus 4)			Descrip	tion of Exp	enditure		
	PA	165071899	DANCE	FUNDRAIS	ER		
To Whom Paid			мо	DAY	YEAR		
SACRED HEART				D A.	1 EAK		
Mailing Address			12	28	2006	\$	200.00
City ERIE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	165022595	PROGR	AM ADVER	TISEMEN	т	
							PAGE TOTAL
Enter Grand Total of Expenditures o	on Page 1, Report C	over Page, Item I) .			\$	300.00

SCHEDULE IV STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate			Reporti	ng Period				
HARKINS, PAT FRIENDS OF			From:			То:		<u>12/31/2006</u>
			<u>.</u>		DATE			Outstanding Balance of Debt
Name of Creditor				мо	DAY	YEAR		
PRINTING CONCEPTS								
Mailing Address				4	13	2006	5	\$ 1,382.00
City ERIE	State	Zip Code (P	lus 4)	Descrip	tion of Deb)t		
	РА	16506		PD FOR ACC.	BY PAT H	ARKIN'S	S PE	ERSONAL CHECKING
Name of Creditor				мо	DAY	YEAR		
POSTMASTER				MO		TEAR		
Mailing Address				4	13	2006	5	\$ 1,348.86
City ERIE	State	Zip Code (P	lus 4)	Descrip	tion of Deb	t		
	РА			PD FOR ACC.	BY PAT H	ARKIN'S	S PE	ERSONAL CHECKING
								PAGE TOTAL
Enter Grand Total of Unpaid Debt	s on Page 1, Repo	ort Cover Pa	ge, Item	G.			\$	2,730.86