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 200)5299			Rep File			CANDI	DATE		СОМ	4ITTEE	✓	LOBE	SYIST		
Name of Filing C	ommittee, Cand	idate or L	obbyist:		HARI	KIN	S, PA	T FRIENI	DS OF								_
Street Address:																	
City:	ERIE							State:	PA			Zip Cod	ie: 16	5508-1	716		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	2	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No	•	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- 5	5.	30 DA ELECT		POST-	6.		TERMINA REPORT		Yes	No	•	
report type)	ANNUAL REPOR	7. X	Year 2009					IG METHO CHECK O				PAPER		/	DISKE	TTE	
Name of Office S	ought by Candid	late:				_		DATE 0	F ELE	СТІО	N	District Number	Office Code	Par	ty Code	Count	ty
								МО	DAY	YE	AR		STH	DEM	1	25	
REPRESENTATI	VE IN THE GEN	ERAL ASS	EMBLY					11		3	2009		(SEE IN	STRUCTIO	ONS FOR C	ODES)	
	Receipts and	МО	DAY Y	/EAR				МО	DAY	YI	EAR	FOR OFFICE USE ONLY					
Expenditures	from:		1 1	20	009	T	0	12		31	2009						
A. Amount Bro	ught Forward Fr	om Last R	eport				\$			1,2	255.22						
B. Total Moneta	ary Contribution	s And Rec	eipts (From S	Sche	dule	I)	\$			(500.00						
C. Total Funds	Available (Sum	Of Lines A	and B)				\$			1,8	355.22						
D. Total Expend	ditures (From So	hedule II	I)				\$			1,2	293.20						
E. Ending Cash	Balance (Subtra	ct Line D	From Line C))			\$			5	62.02						
F. Value Of In-	Kind Contributio	ns Receiv	ed (From Sch	edul	e II))	\$				0.00						
G. Unpaid Debt	s And Obligation	s (From S	Schedule IV)				\$			2,9	80.86						
				AFF	IDA	VI	ΓSE	CTION									
PART I - If this is	a Committee re	port, trea	surer sign he	ere. I	f thi	is is	a Can	didate r	eport, o	candi	date sig	ın here.					
I swear (or affirm) correct and comple) that this report, in ete.	ncluding the	e attached sche	dules	filed	l on p	paper o	or by elect	ronic m	edium	, are to t	he best o	f my knov	wledge a	and belie	ef , tru	e
Sworn to and subs	cribed before me t day of	his	20							S	ignature	of Perso	n Submit	ting Rep	ort		-
	Signa	ture					-					Prin	ted Name	.			-
My Commission Ex	cpires						_					Ema	il				-
	МО	D	AY	YR					Are	ea Cod	le	Daytim	e Teleph	one Nu	mber		╝
Part II- If this is	a report of a ca	ndidate's	authorized C	omm	ittee	e, Ca	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende		f my knowl	edge and belief	this	politi	ical	commi	ittee has n	ot viola	ted an	y provis	isions of the act of June 3,1937 (P.L. 1333,					
Sworn to and subsc	ribed before me th day of	is	20								S	ignature o	of Candida	ate			-
							-					Printe	d Name				-
My Commission Exp	Signatur	e					-					Ema	il				-
																	.
	МО	D	AY	YR					Area	Code		Da	aytime T	elephon	e Numbe	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
HARKINS, PAT FRIENDS OF	From:	1/1/200	<u>9</u> To:	12/31/2009
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)			\$	100.00
TOTAL for the Reporting) Period	(2)	\$	100.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	500.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting) Period	(3)	\$	500.00
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			\$	600.00

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 Committe	ee or Candidate		Re	porting	Period			
			Fr	om:		То	:	
					DATE			AMOUNT
Full Name of Contributing	Committee			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.

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 Candidate

Reporting Period

HARKINS, PAT FRIENDS OF

From: <u>1/1/2009</u> **To:**

DATE

12/31/2009

AMOUNT

Full N	lame of Contributor			мо	DAY	YEAR	
NORA	A HARKINS			110	ואס	ILAK	
Mailir	ng Address						\$ 100.00
City	PITTSBURGH	State	Zip Code (Plus 4)	1	6	2009	
		PA	15205				

PAGE TOTAL

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

100.00 \$

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 Per	eriod					
HARKINS, PAT FRIENDS OF	From:	1/1/2009	То:	12/31/2009			

AMOUNT DATE **Full Name of Contributing Committee** МО DAY YEAR GENERAL ELECTRIC POLITICAL ACTION COMMITTEE 500.00 MULTICANDIDATE COMMITTEE 9 13 2009 **Mailing Address** WASHINGTON State Zip Code (Plus 4) DC 20004

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL 500.00

\$

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	eriod			
				Fron	n:		Te) :	
					D	ATE			AMOUNT
Full Name of Contributor					МО	DAY	YEAR	\$	0.00
Mailing Address									
City	State	Zip	Code (Plus	s 4)					
Employer Name					Occupa	tion			
Employer Mailing Address/Principal Plac	e of Business		City			State		Zip C	ode (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Sเ	umma	ary 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	'	1					<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, PAT FRIENDS OF	From:	<u>1/1/2009</u> To:	12/31/2009
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER 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 Car	ndidate		Reporting Period					
			From:			To	:	
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•		•	•		•		
					-			
Enter Grand Total of Part F o	n Schedule II, In-Ki	nd Contributions Detai	led Sun	mary Pa	ge,		PAGE TOTAL	•
Section 2.						\$	(0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Rep	orting	Period				
				Fro	m:		To:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								֓֟֟֝֟֓֓֓֟֟֓֓֓֓֟֟֓֓֓֟֟֓֓֟֓֟֓֓֟֟֓֓֟֓֓֟֓֓֟֓	\$ 0	.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Plac	e of Business	Cit	ty	State	e Zi	p Code(Plus 4)	Descr	ipti	on of Contribution	1
Enter Grand Total of Part G on Sch	edule II. In-Kir	nd (Contributions D	etaile	ed				PAGE TOTA	,L
Summary Page, Section 3.									0	.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Per	iod	Reporting Period						
HARKINS, PAT FRIENDS OF	From	1/1/2009	То:	12/31/2009					

				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
GOHRS PRINTING			140	JA.	ILAK		
Mailing Address			1	5	2009	\$	445.20
City ERIE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	16503-165	1000 (6	5) PACKS C	F CRAYO	NS	
To Whom Paid			мо	DAY	YEAR		
PATRICK L. FETZNER COMI	MITTEE		140	JA.	ILAK		
Mailing Address			1	22	2009	\$	25.00
City ERIE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	16507-095	SUNDA	Y BRUNCH			
To Whom Paid			мо	DAY	YEAR		
ST. JOHNS KNIGHTS			110				
Mailing Address			1	22	2009	\$	50.00
City ERIE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	16509	PROGRA	AM AD			
To Whom Paid			МО	DAY	YEAR		
COMMITTEE TO ELECT TON	IY LOGUE, JUDGE		140	JA.	ILAK		
Mailing Address			2	16	2009	\$	50.00
City ERIE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA	16510	ELECT	TONY LOGI	JE COMM	ITTEE	
To Whom Paid			мо	DAY	YEAR		
ERIE CRAWFORD CENTRAL	. LABOR AFL-CIO		140				
Mailing Address			3	30	2009	\$	100.00
City ERIE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	I	
	PA	16501	CSC PR	OGRAM BO	ООК		
To Whom Paid			мо	DAY	YEAR		
ASSUMPTION GREEK ORTH	IODOX CHURCH		140	ואמן	ILAK		
Mailing Address			6	5	2009	\$	100.00
City ERIE State Zip Code (Plus 4)		Descrip	tion of Exp	enditure	•		
	PA	16505	FESTIV	AL SOUVE	VIR PROG	GRAM AD	

To Whom Paid					DAY	YEAR				
POLISH FALCONS NEST #610						ILAK				
Mailing Address					30	2009	\$	24.00		
City ERIE		State	Zip Code (Plus 4)	Description of Expenditure						
		PA	16507	ANNUAL NATIONAL MEMBERS AWARD BA			RD BANQUET			
To Whom Paid				мо	DAY	YEAR				
EAST SIDE FEDERATION					DAT	TEAR				
Mailing Address					9	2009	\$	200.00		
City ERIE		State	Zip Code (Plus 4)	Descript	Description of Expenditure					
		PA	16511	POLANAISE PROGRAM						
To Whom Paid					DAY	YEAR				
SANDY ROSS CUSTOMER SERVICE						ILAK				
Mailing Address					13	2009	\$	149.00		
City ERIE		State	Zip Code (Plus 4)	Description of Expenditure						
		PA	16505	EMAIL AND WEBSITE REIMBUR				AT HARKINS		
To Whom Paid				мо	DAY	YEAR				
DR. GERTRUDE BARBER NATIONAL INSTITUTE						ILAK				
Mailing Address					30	2009	\$	150.00		
City ERIE		State	Zip Code (Plus 4)	Description of Expenditure						
		PA	16507-186	CHRIST	MAS BALL	TICKETS				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL			
Enter Grand Total	of Expenditures o	on Page 1, Rep	ort Cover Page, Item D	•			\$	1,293.20		
								,		

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				Reporting Period						
HARKINS, PAT FRIENDS OF				<u>1/1/2009</u> To:			12/31/2009			
				DATE				Outstanding Balance of Debt		
Name of Creditor		мо	DAY	YEAR						
PRINTING CONCEPTS										
Mailing Address					13	2009	\$	1,382.00		
City ERIE	State	Zip Code (P	lus 4)	Description of Debt						
	PA	16509		MAILER PAID FOR BY PAT HARKINS						
Name of Creditor POSTMASTER GENERAL					DAY	YEAR				
Mailing Address					13	2006	\$	1,348.86		
City ERIE	State Zip Code (Plus 4) PA			Description of Debt						
				MAILER PAID FOR BY PAT HARKINS						
Name of Creditor ERIE FIRE PREVENTION					DAY	YEAR				
Mailing Address					31	2007	7 \$	250.00		
City ERIE	ERIE State Zip Code (Plus 4) Description of Del				ot					
PA 16502 PROGRAM AD PAI					D BY PAT HARKINS					
								PAGE TOTAL		
Enter Grand Total of Unpaid Debt	\$	2,980.86								