

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 :		2006195		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: PASHINSKI, EDDIE DAY COM TO ELECT												
Street Address: 259 E NORTHAMPTON ST												
City: WILKES-BARRE						State: PA			Zip Code: 18702-0000			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	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. X	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2014	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	121	STH	DEM	40
						11	4	2014	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		10	21	2014		11	24	2014				
A. Amount Brought Forward From Last Report						\$ 35,109.92						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 4,060.00						
C. Total Funds Available (Sum Of Lines A and B)						\$ 39,169.92						
D. Total Expenditures (From Schedule III)						\$ 2,800.00						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 36,369.92						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 8,432.90						

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 of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

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 of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
PASHINSKI, EDDIE DAY COM TO ELECT	From: <u>10/21/2014</u> To: <u>11/24/2014</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 60.00

2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	
Contributions Received From Political Committees (Part A)	\$ 1,000.00
All Other Contributions (Part B)	\$ 0.00
TOTAL for the Reporting Period (2)	\$ 1,000.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 3,000.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 3,000.00

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.)	\$ 4,060.00
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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 PASHINSKI, EDDIE DAY COM TO ELECT	Reporting Period From: <u>10/21/2014</u> To: <u>11/24/2014</u>		
<table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;">DATE</td> <td style="width: 40%; border: none;">AMOUNT</td> </tr> </table>		DATE	AMOUNT
DATE	AMOUNT		

Full Name of Contributing Committee Insurance Agents & Brokers of PA Inc			MO	DAY	YEAR	\$ 250.00
Mailing Address 5050 Ritter Road			10	22	2014	
City Mechanicsburg	State PA	Zip Code (Plus 4) 17055				

Full Name of Contributing Committee Penn National Insurance/Inservco PAC			MO	DAY	YEAR	\$ 250.00
Mailing Address 2 North 2nd St 14th Fl			10	30	2014	
City Harrisburg	State PA	Zip Code (Plus 4) 17101				

Full Name of Contributing Committee Pennsylvania Coal PAC			MO	DAY	YEAR	\$ 250.00
Mailing Address 212 N 3rd St Ste 102			10	30	2014	
City Harrisburg	State PA	Zip Code (Plus 4) 17101				

Full Name of Contributing Committee INDEPENDENCE BLUE CROSS PAC (IBC PAC)			MO	DAY	YEAR	\$ 250.00
Mailing Address 1901 MARKET ST			10	30	2014	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191031480				

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

PAGE TOTAL
\$ 1,000.00

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 Candidate	Reporting Period
	From: To:

DATE				AMOUNT
Full Name of Contributor	MO	DAY	YEAR	\$ 0.00
Mailing Address				
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 PASHINSKI, EDDIE DAY COM TO ELECT	Reporting Period From: <u>10/21/2014</u> To: <u>11/24/2014</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee Highmark Health PAC				MO	DAY	YEAR	\$ 250.00
Mailing Address 1800 CENTER ST				10	30	2014	
City CAMP HILL	State PA	Zip Code (Plus 4) 17089					
Full Name of Contributing Committee Highmark Health PAC				MO	DAY	YEAR	\$ 250.00
Mailing Address 1800 CENTER ST				10	30	2014	
City CAMP HILL	State PA	Zip Code (Plus 4) 17089					
Full Name of Contributing Committee The Pennsylvania Insurance PAC				MO	DAY	YEAR	\$ 500.00
Mailing Address 1600 Market St Ste 1720				10	30	2014	
City Philadelphia	State PA	Zip Code (Plus 4) 19103					
Full Name of Contributing Committee Pennsylvania Amusement & Music Machine Association PAC				MO	DAY	YEAR	\$ 1,000.00
Mailing Address 200 N 3RD ST STE 1500				10	30	2014	
City Harrisburg	State PA	Zip Code (Plus 4) 17101					
Full Name of Contributing Committee PSEA-PACE FOR STATE ELECTIONS				MO	DAY	YEAR	\$ 1,000.00
Mailing Address BOX 1724, 400 N THIRD ST				10	30	2014	
City HARRISBURG	State PA	Zip Code (Plus 4) 17105-0000					

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

PAGE TOTAL

\$ 3,000.00

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	\$ 0.00
Mailing Address						
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

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	
PASHINSKI, EDDIE DAY COM TO ELECT		From: <u>10/21/2014</u> To: <u>11/24/2014</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period (1)		\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period (2)		\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period (3)		\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)		\$	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:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
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	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
PASHINSKI, EDDIE DAY COM TO ELECT	From <u>10/21/2014</u> To: <u>11/24/2014</u>

DATE				AMOUNT
To Whom Paid VOID	MO	DAY	YEAR	
Mailing Address N/A	10	27	2014	\$ 0.00
City N/A	State PA	Zip Code (Plus 4) 18704	Description of Expenditure CK #837 - VOID	
To Whom Paid Tom Wolf for Governor	MO	DAY	YEAR	
Mailing Address 25 Front St	10	28	2014	\$ 1,000.00
City Mt Wolf	State PA	Zip Code (Plus 4) 17347	Description of Expenditure Ck #838 - Contribution	
To Whom Paid Friends of Eileen Cipriani	MO	DAY	YEAR	
Mailing Address 117 Washington Ave	10	29	2014	\$ 500.00
City West Wyoming	State PA	Zip Code (Plus 4) 18644	Description of Expenditure Ck #839 - Contribution	
To Whom Paid VOID	MO	DAY	YEAR	
Mailing Address N/A	11	3	2014	\$ 0.00
City N/A	State PA	Zip Code (Plus 4) 18704	Description of Expenditure CK #840 - VOID	
To Whom Paid Eddie Day Pashinski	MO	DAY	YEAR	
Mailing Address 259 E Northampton St	11	4	2014	\$ 1,000.00
City Wilkes Barre	State PA	Zip Code (Plus 4) 18702	Description of Expenditure Ck #841 - Poll workers	

To Whom Paid Cassandra Coleman & Associates LLC			MO	DAY	YEAR	
Mailing Address 1109 Chicory Ct			11	10	2014	
City Exeter	State PA	Zip Code (Plus 4) 18643	Description of Expenditure Ck #842 - Political consulting fee			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 2,800.00

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 PASHINSKI, EDDIE DAY COM TO ELECT			Reporting Period From: <u>10/21/2014</u> To: <u>11/24/2014</u>		
DATE					Outstanding Balance of Debt
Name of Creditor Eddie Day Pashinski			MO 11	DAY 24	YEAR 2014
Mailing Address 259 E Northampton St					\$ 3,650.80
City Wilkes Barre	State PA	Zip Code (Plus 4) 18702	Description of Debt Loan (Original Loan Date 05/16/2006)		
DATE					Outstanding Balance of Debt
Name of Creditor Eddie Day Pashinski			MO 11	DAY 24	YEAR 2014
Mailing Address 259 E Northampton St					\$ 1,645.99
City Wilkes Barre	State PA	Zip Code (Plus 4) 18702	Description of Debt Loan (Original Loan Date 11/07/2006)		
DATE					Outstanding Balance of Debt
Name of Creditor Eddie Day Pashinski			MO 11	DAY 24	YEAR 2014
Mailing Address 259 E Northampton St					\$ 500.00
City Wilkes Barre	State PA	Zip Code (Plus 4) 18702	Description of Debt Loan (Original Loan Date 03/14/2007)		
DATE					Outstanding Balance of Debt
Name of Creditor Eddie Day Pashinski			MO 11	DAY 24	YEAR 2014
Mailing Address 259 E Northampton St					\$ 2,636.11
City Wilkes Barre	State PA	Zip Code (Plus 4) 18702	Description of Debt Best Western Genetti Hotel - Event 04/19/2007		
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.					PAGE TOTAL \$ 8,432.90

