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	6195			Rep File			CANE	DID	ATE		COMM	4ITTEE	✓ [LOB	BYIST		
Name of Filing C	ommittee, Candi	date or L	obbyist:		PASI	HIN	SKI, I	EDDIE I	DAY	/ COM	1 TO	ELECT						
Street Address:	259 E NORT	HAMPTO	N ST															
City:	WILKES-BAR	RE						State:	F	PA			Zip Cod	le: 18	702-0	000		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2	2. X	30 DA		PC	ST-	3.		AMENDM REPORT		Yes	N	0	√
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5	5.	30 DA		PC	ST-	6.		TERMINA REPORT		Yes	N	0	\
report type)	ANNUAL REPOR	7.	Year 2015					NG METI CHECK					PAPER		\	DISK	ETTE	
Name of Office S	ought by Candid	ate:			_			DATE	OF	ELE	СТІС	N	District Number	Office Code	Par	ty Cod	Cour	
								МО	1	DAY	ΥI	AR			DEN	1	40	
								1	.1		3	2015		(SEE IN	STRUCTI	ONS FOR	CODES)
Summary of		МО	DAY	YEAR	2			МО		DAY	YI	EAR	FO	R OFFIC	E USE	ONLY	,	
Expenditures	from:		3 31	2	015	T	0		5		4	2015						
A. Amount Bro	ught Forward Fro	m Last R	eport		·		\$				43,4	460.11						
B. Total Moneta	ary Contributions	And Rec	eipts (Fron	1 Sche	dule	I)	\$				4,6	560.00						
C. Total Funds Available (Sum Of Lines A and B) \$ 48,120.11																		
D. Total Expend	ditures (From Sc	nedule II	I)				\$					50.00						
E. Ending Cash	Balance (Subtra	ct Line D	From Line	C)			\$				48,0	70.11						
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	le II)	\$					0.00						
G. Unpaid Debt	s And Obligation	s (From S	Schedule IV	')			\$				8,4	132.90						
				AFF	IDA	١VI	T SE	CTION	١									
PART I - If this is			_						-									
I swear (or affirm) correct and comple	that this report, in ete.	cluding the	e attached sc	hedules	s filed	l on	paper	or by ele	ctro	nic me	edium	, are to t	he best o	f my knov	vledge	and be	ief , tr	ue
Sworn to and subs	cribed before me th day of	is	20						-		9	Signature	of Perso	n Submitt	ing Re	ort		_
	Signat	ure	_				-		-				Prin	ted Name	1			_
My Commission Ex	_								_				Ema	il				-
	мо	D	AY	YR						Are	ea Coc	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a car	ididate's	authorized	Comn	nitte	e, C	andid	ate sha	II si	ign he	ere.							
I swear (or affirm) No 320) as amende		my knowl	edge and beli	ef this	polit	ical	comm	ittee has	not	t violat	ed an	y provis	ions of th	e act of Ju	ıne 3,1	937 (P.	L. 133	з,
Sworn to and subsc		5							-			s	ignature o	of Candida	ite			-
	day of —— ————		_ 20				-		-				Printe	d Name				-
	Signature						-		_									_
My Commission Exp	_												Ema	il				
	мо	D	AY	YR			-		-	Area	Code		Da	aytime To	elephor	ne Num	ber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
PASHINSKI, EDDIE DAY COM TO ELECT	From:	<u>3/31/201</u>	<u>5</u> To:	<u>5/4/2015</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	300.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	840.00
All Other Contributions (Part B)			\$	700.00
TOTAL for the Reporting) Period	(2)	\$	1,540.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	1,000.00
All Other Contributions (Part D)			\$	1,820.00
TOTAL for the Reporting	Period	(3)	\$	2,820.00
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			\$	4,660.00

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 Ca	Name of Filing Committee or Candidate			Reporting Period					
PASHINSKI, EDDIE DAY COM T	O ELECT		From:	3/31/20) <u>15</u> To	<u>5/4/2015</u>			
				DATE			AMOUNT		
Full Name of Contributing Commit			МО	DAY	YEAR				
LAWPAC (PA ASSOC. FOR JUSTIC	CE)								
Mailing Address 800 North 7	Third St					\$	250.00		
City Harrisburg	State	Zip Code (Plus	4)	29	2015				
-	PA	17102							
Full Name of Contributing Commit	tee		МО	DAY	YEAR				
LOCAL 0690 PLUMBERS UNION P	OL ACTION FUND		140						
Mailing Address 2791 SOUTHAMPTON ROAD						\$	250.00		
City PHILADELPHIA	State	Zip Code (Plus	4) 4	29	2015				
	PA	191540000							
Full Name of Contributing Commit	tee		МО	DAY	YEAR				
Mailing Address 7441 ALLEN	NTOWN BLVD					\$	90.00		
City HARRISBURG	State	Zip Code (Plus	4) 4	29	2015				
	PA	17112							
Full Name of Contributing Commit	tee	•	МО	DAY	YEAR				
Iron Workers Local 401 PAF									
Mailing Address 1600 Norco	m Rd					\$	250.00		
City Philadelphia	State	Zip Code (Plus	4) 4	29	2015				
•	PA	19154							
	•	•	ļ.		•		PAGE TOTAL		

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

PAGE TOTAL 840.00

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 Committee or Candid	Name of Filing Committee or Candidate					
PASHINSKI, EDDIE DAY COM TO EI	_ECT		From:	3/31/	2015 T o	<u>5/4/2015</u>
				DATE		AMOUNT
Full Name of Contributor Michele L Kessler			мо	DAY	YEAR	
Mailing Address 15 Elm St						\$ 100.00
City Mountaintop	State PA	Zip Code (Plus 4) 18707	4	29	2015	
Full Name of Contributor David P & Eleanor Guzofsky			МО	DAY	YEAR	
Mailing Address 297 Mountain Vie	w Dr State PA	Zip Code (Plus 4) 18634	4	29	2015	\$ 100.00
Full Name of Contributor Christopher M Stasko			МО	DAY	YEAR	
Mailing Address 200 High St						\$ 100.00
City Warrior Run	State PA	Zip Code (Plus 4) 18706	4	29	2015	
Full Name of Contributor Frank & Doris Nowakowski			МО	DAY	YEAR	
Mailing Address 408 Espy St City Nanticoke	State PA	Zip Code (Plus 4) 18634	4	29	2015	\$ 100.00
Full Name of Contributor Donald E & Kathleen A Deremer			МО	DAY	YEAR	
Mailing Address 333 N Pennsylvan City Wilkes Barre	State PA	Zip Code (Plus 4) 18702	4	29	2015	\$ 100.00

Full Name of Contributor Glassberg & Doganiero						
Mailing Address 81 N Laurel S	it					\$ 100.00
City Hazleton	State PA	Zip Code (Plus 4) 18201	4	29	2015	
Full Name of Contributor John C Aciukewicz			МО	DAY	YEAR	
Mailing Address 458 Wyoming	Ave Ste 201		4	29	2015	\$ 100.00

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

PAGE TOTAL
\$ 700.00

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 Candid	nme of Filing Committee or Candidate Reporting								
PASHINSKI, EDDIE DAY COM TO E	ASHINSKI, EDDIE DAY COM TO ELECT From:					То:	To: 5/4/2015		
				DA	TE		АМ	IOUNT	
Full Name of Contributing Committee IBEW PAC Voluntary Fund	ee			МО	DAY	YEAR			
Mailing Address 900 Seventh St NW							\$	500.00	
City Washington	State DC	Zip Cod 20001	e (Plus 4)	4	6	2015			
Full Name of Contributing Committee POLITICAL LABOR ACTION NOW (МО	DAY	YEAR			
Mailing Address 904 N 2ND ST							\$	500.00	
City HARRISBURG	State PA	Zip Cod 17102	e (Plus 4)	4	29	2015			
		•						DACE TOTAL	

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

PAGE TOTAL\$ 1,000.00

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 Co	ommittee or Candidate				Rep	orting Pe	riod			
PASHINSKI, EDI	DIE DAY COM TO ELEC	Т			Fror	n:	<u>3/31/2</u>	015 T o	o:	<u>5/4/2015</u>
						D <i>A</i>	ATE		АМ	OUNT
Full Name of Con James & Helena						мо	DAY	YEAR		
Mailing Address	72 Hanover St								\$	360.00
City Wilkes-Ba	arre	State	Zip	Code (Plus	4)	4	29	2015	5	
		PA	18	702						
Employer Name	Self Employed					Occupat	ion (Counsel	or	
Employer Mailing Business	Address/Principal Plac	e of		City		ı	State		Zip Code	(Plus 4)
72 Hanover St				Wilkes-B	arre		PA		18702	
Full Name of Con Mark Joseph Sop						МО	DAY	YEAR		
Mailing Address	9 Manor Dr								\$	360.00
City Dallas		State	Zip	Code (Plus	4)	4	29	2015	5	
		PA	18	612						
Employer Name	CYC					Occupat	ion E	xecutiv	e Director	-
Employer Mailing Business	Address/Principal Plac	e of		City		l	State		Zip Code	(Plus 4)
36 S Washington	n St			Wilkes Ba	arre		PA		18702	
Full Name of Con	tributor						DAY	YEAR		
Kathleen Lamber	rt & John McCarthy Jr					МО	DAT	TEAR		
Mailing Address	18 Colonial Ct								\$	300.00
City Wyoming]	State	Zip	Code (Plus	4)	4	29	2015	5	
		PA	18	644						
Employer Name	McCarthy Tire					Occupation Owner				
Employer Mailing Business	Address/Principal Plac	e of		City		•	State		Zip Code	(Plus 4)
Rt 315				Wilkes Ba	arre		PA		18702	

								FA	GL 8
Full Name of Co					МО	DAY	YEAR		
Mailing Address	18 Orchard Av	e						 \$	500.00
City West N	anticoke	State PA		p Code (Plus 4)	4	29	2015		
Employer Name N/A				Occupation Retired					
Employer Mailing Address/Principal Place of Business City					Plus 4)				
N/A N/A					PA		18634		
Full Name of Contributor Angelo & Carol Answini			МО	DAY	YEAR				
Mailing Address	121 Bald Mour	ntain Rd						\$	300.00
City Wilkes	Barre	State PA		p Code (Plus 4) 3702	4	29	2015		
Employer Name	· N/A	-	•		Occupat	t ion	Retired	1	
Employer Mailin Business	g Address/Princi	pal Place of		City	<u> </u>	State		Zip Code (F	Plus 4)
N/A				N/A		PA		18702	
Enter Grand T	otal of Part C o	n Schedule I, Deta	iled Sumr	narv Page, Secti	on 3.			PAGE	TOTAL
		,	2 2	,,	- -		Ι.	+	

1,820.00

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 Car	ame of Filing Committee or Candidate			ing Perio	od			
			From:			To:		
				D	ATE		А	MOUNT
Full Name				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	·						
Enter Grand Total of Part E on	Schedule T. Detailed	d Summary Page	Section	4			P	AGE TOTAL
	2, 200 0000		22300				\$	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 Perio	d	
PASHINSKI, EDDIE DAY COM TO ELECT	From:	3/31/2015 To :	<u>5/4/2015</u>
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 Candidate			Reporting Period					
	F					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 Sche	dule II. In-Kind (Contributions Deta	iled Sum	marv Pac	ıe.		PAGE TOTAL	
Section 2.	,			,		\$	0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Reporting Period							
					Fro	m:		То	:		
					<u> </u>		DATE			,	AMOUNT
Full Name of Contributor						мо	DAY	YEAR	1		
Mailing Address									_	\$	0.00
City	State		Zip Code(F	Plus 4)							
Employer of Contributor					Occupation						
Employer Mailing Address/Principal Place of Business		City	City State			Zip Code(Plus 4)		Desc	Description of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed							PAGE TOTAL				
Summary Page, Section 3.											0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate		Reporting Period					
PASHINSKI, EDDIE DAY COM TO ELECT	From	3/31/2015	То:	<u>5/4/2015</u>			

L				DATE			AMOUNT
To Whom Paid St Robert Bellarmine			МО	DAY	YEAR		
Mailing Address 143 W Division St			4	30	2015	\$	50.00
City Wilkes-Barre	State PA	Zip Code (Plus 4) 18706	Description of Expenditure Ck # 865 - Donation				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL 50.00

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 Report				Reportir	ng Period					
PASHINSKI, EDDIE DAY COM TO ELECT From:					<u>3</u>	3/31/2015 To:			<u>5/4/2015</u>	
						DATE			Outstanding Balance of Debt	
Name of Creditor										
Eddie Day Pashinski					МО	DAY	YEAR			
Mailing Address	259 E Northamptor	ı St			5	4	2015	; \$	3,650.80	
City Wilkes Barre		State	ze Zip Code (Plus 4)		Descrip	tion of Del	bt			
- Wilkes barre		PA 18702				Description of Debt Loan (Original Loan Date 05/16/2006)				
						Outstanding DATE Balance of Debt				
Name of Creditor Eddie Day Pashinski					мо	DAY	YEAR			
Mailing Address	259 E Northamptor	ı St			5	4	2015	\$	1,645.99	
City Wilkes Barre		State	Zip Code (Plu	ıs 4)	Description of Debt					
PA 18702					Loan (Original Loan Date 11/07/2006)					
						DATE			Outstanding Balance of Debt	
Name of Creditor Eddie Day Pashinski					мо	DAY	YEAR			
Mailing Address 259 E Northampton St										
City William Parra State Zip Code (Plus 4)					5	4	2015	5 \$	500.00	
City Wilkes Barre	•	State	Zip Code (Plu	ıs 4)				\$	500.00	
City Wilkes Barre	•		Zip Code (Plu 18702	ıs 4)	Descrip	4 Ortion of Del Original Loa	 bt	*		
City Wilkes Barre	•	State		us 4)	Descrip	otion of Del	 bt	*		
City Wilkes Barre Name of Creditor Eddie Day Pashinski		State		us 4)	Descrip	otion of Del Original Loa	 bt	*	14/2007) Outstanding	
Name of Creditor Eddie Day Pashinski		State PA		ıs 4)	Descrip Loan (C	otion of Del Original Loa DATE	bt an Date	03/2	14/2007) Outstanding Balance of Debt	
Name of Creditor Eddie Day Pashinski Mailing Address	259 E Northamptor	State PA			Descrip Loan (C	otion of Del Original Loa DATE DAY	YEAR	03/:	14/2007) Outstanding Balance of Debt	
Name of Creditor Eddie Day Pashinski Mailing Address	259 E Northamptor	State PA 1 St	18702		Description (C	DATE DAY 4 Option of Delivery	YEAR 2015	9 03/:	14/2007) Outstanding Balance of Debt	
Name of Creditor Eddie Day Pashinski Mailing Address City Wilkes Barre	259 E Northamptor	State PA St State PA	18702 Zip Code (Plu 18702	us 4)	MO Descrip Best W	DATE DAY 4 Option of Delivery	YEAR 2015	9 03/:	Outstanding Balance of Debt	
Name of Creditor Eddie Day Pashinski Mailing Address City Wilkes Barre	259 E Northamptor	State PA St State	18702 Zip Code (Plu 18702	us 4)	MO Descrip Best W	DATE DAY 4 Option of Delivery	YEAR 2015	9 03/:	14/2007) Outstanding Balance of Debt 2,636.11 Event 04/19/2007	