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				port ed B		CANDI	DATE		СОМ	ITTEE	✓	LOBE	SYIST	
Name of Filing C	Committee, Candi	date or L	obbyist:		PAS	SHIN	SKI, E	DDIE DA	AY COI	и то	ELECT					
Street Address:	259 E NORT	HAMPTO	N ST													
City:	WILKES-BAR	RE						State:	PA			Zip Cod	ie: 18	3702-0	000	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA' PRIMARY	Y PRE	-	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	y pre	≣-	5.	30 DA		POST- 6.			TERMINA REPORT		Yes	No	\
report type)	ANNUAL REPOR	7. X	Year 2015					IG METHO				PAPER DISKETTE				ГТЕ
Name of Office S	Sought by Candid	ate:	-					DATE O	F ELE	CTIC	N	District Number	Office Code	Par	ty Code	County Code
								МО	DAY	ΥI	AR		10000	DEM	1	40
								11		3	2015	(SEE INSTRUCTIONS FOR CODES)				ODES)
•	Receipts and	МО	DAY	YEAR	ł			МО	DAY	Y	EAR	FC	R OFFI	CE USE	ONLY	
Expenditures	from:	11 24 2015 TO 12 31 2015														
A. Amount Bro	ught Forward Fro	m Last R	eport				\$	-		62,	546.32					
B. Total Moneta	B. Total Monetary Contributions And Receipts (From Schedule I) \$ 1,000.0									00.00						
C. Total Funds Available (Sum Of Lines A and B) \$ 63,546.32								546.32								
D. Total Expenditures (From Schedule III) \$ 534.33							34.33									
E. Ending Cash	Balance (Subtra	ct Line D	From Line (C)			\$			63,0	11.99]				
F. Value Of In-	Kind Contribution	s Receiv	ed (From So	chedu	le I	I)	\$			1,9	77.73					
G. Unpaid Debt	ts And Obligation	s (From S	Schedule IV)			\$			10,6	32.90					
				AFF	ID	AVI	T SE	CTION								
PART I - If this is	s a Committee re	ort, trea	surer sign l	here.	If th	his is	a Can	ididate re	eport, o	andi	date sig	jn here.				
I swear (or affirm) correct and comple) that this report, in ete.	cluding the	e attached sch	nedules	s file	ed on	paper (or by elect	ronic m	edium	, are to t	the best o	f my kno	wledge a	and belie	f , true
Sworn to and subs	cribed before me th day of	is	20							5	Signature	of Perso	n Submit	ting Rep	ort	
	Signat	ure					-					Prin	ted Name	e		
My Commission Ex	cpires						_					Ema	il			
	МО	D	AY	YR					Ar	ea Cod	le	Daytim	e Teleph	one Nu	mber	
Part II- If this is	a report of a car	didate's	authorized	Comn	nitte	ee, C	andida	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and beli	ef this	poli	itical	commi	ittee has n	ot viola	ted ar	y provis	ions of th	e act of J	une 3,19	937 (P.L.	1333,
Sworn to and subsc	ribed before me this	•	20								s	ignature (of Candid	ate		
	<u> </u>						-					Printe	d Name			
My Commission Exp	Signature						-					Ema	il			
my commission exp	as						•									
	МО	D	AY	YR	1				Area	Code		D	aytime T	elephon	e Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -									
Name of Filing Committee or Candidate	Reporting Period								
PASHINSKI, EDDIE DAY COM TO ELECT	From:	11/24/201	<u>.5</u> To:	12/31/2015					
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)			\$	1,000.00					
All Other Contributions (Part B)	\$	0.00							
TOTAL for the Reporting	(2)	\$	1,000.00						
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			\$	1,000.00					

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 (Reporting	Period												
PASHINSKI, EDDIE DAY COM	TO ELECT		From:	11/24/20) <u>15</u> To	:	12/31/2015								
				DATE			AMOUNT								
Full Name of Contributing Comm	nittee		МО	DAY	YEAR										
H-TECH PAC															
Mailing Address 200 S. BR	ROAD ST STE 850					\$	250.00								
City PHILADELPHIA	State	Zip Code (Plus 4	12	8	2015										
	PA	191020000													
Full Name of Contributing Comm	МО	DAY	YEAR												
IBC PAC															
Mailing Address 1901 Market St			2.4	2015	\$	250.00									
City Philadelphia	State	Zip Code (Plus 4) 11	24	2015										
	PA	19103													
Full Name of Contributing Comm	ıittee		МО	DAY	YEAR										
First Energy PAC															
Mailing Address 76 S Mair	ı St					\$	250.00								
City Akron	State	Zip Code (Plus 4) 11	24	2015										
	ОН	44308													
Full Name of Contributing Comm	nittee		МО	DAY	YEAR										
PENN NAT INS INSERVCO INS SERV PAC															
Mailing Address TWO NORTH SECOND ST						\$	250.00								
City HARRISBURG	State	Zip Code (Plus 4	11	11 24	1 24	1 24	24	24	1 24	1 24	24	24 201	2015		
	PA	17101													
		1	-			`—									

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

PAGE TOTAL 1,000.00

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 Candidat	e		Rep					
				From: To				
					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	me of Filing Committee or Candidate Repo			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 Candida	ite			Rep	orting Pe	riod			
				Froi	m:		To) :	
					D	ATE		AM	OUNT
Full Name of Contributor					МО	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus	5 4)					
Employer Name		•			Occupa	tion	•	•	
Employer Mailing Address/Principal F Business	Place of		City		•	State		Zip Code	e (Plus 4)
Enter Grand Total of Part C on So	chedule I, Deta	iled Sumr	mary Page,	Section	on 3.			P/	AGE 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	ting Perio	bd			
			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. Detaile	d Summary Page	Section	4			PAG	GE TOTAL
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	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 Pe	riod							
PASHINSKI, EDDIE DAY COM TO ELECT	From:	11/24/2015 To :	12/31/2015						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS 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)	\$	1,977.73						
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,		\$	1,977.73						

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:			To:	
				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	ле Г		PAGE TOTAL
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	,		PAGE TOTAL
						\$	0.00

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

 Name of Filing Committee or Candidate
 Reporting Period

 PASHINSKI, EDDIE DAY COM TO ELECT
 From: 11/24/2015 To: 12/31/2015

						DATE		AMOUNT		
Full Name of Contributor Mary P Delaney					мо	DAY	YEAR			
Mailing Address 831 Char	les St							\$ 296.97		
City Luzerne	State		Zip Code(I	Plus 4)	12 31 2015					
Euzerne	PA		18709							
Employer of Contributor	N/A				Occupa	tion	Retired			
Employer Mailing Address/Pr Business	incipal Place of	City		State	Zip 4)	Code(Plus	Description of Contribution			
N/A		N/A		PA	187	18709 Small gift/giveaways- advertising State Rep E Pashinski				
Full Name of Contributor Mary P Delaney					мо	DAY	YEAR			
Mailing Address 831 Char	les St							\$ 430.20		
City Luzerne	State		Zip Code(I	Plus 4)	12	31	2015			
	PA		18709							
Employer of Contributor	N/A		•		Occupa	tion	Retired			
Employer Mailing Address/Pr Business	incipal Place of	City		State	Zip 4)	Code(Plus	Descri	ption of Contribution		
N/A		N/A		PA	18709 Small gift/giveaways- advertising State Rep E Pashinski			ising State Rep E D		

								PAGE 11		
Full Name of Contributor Mary P Delaney					МО	DAY	YEAR			
Mailing Address 831 Charles St					12	31	2015	\$ 222.72		
City Luzerne	State PA		Zip Code(I 18709	Plus 4)	12	31	2013			
Employer of Contributor N/A	•		•		Occupation Retired					
Employer Mailing Address/Principal Plac Business	e of	City		State	Zi _l	Code(Plus	Description of Contribution			
/A N/A PA 1870			709		gift/giveaways- sing State Rep E D ski					
Full Name of Contributor Mary P Delaney					мо	DAY	YEAR			
Mailing Address 831 Charles St					1.3	24	2015	\$ 422.90		
City Luzerne	State PA		Zip Code(I 18709	Plus 4)	12 31		2015			
Employer of Contributor N/A					Occupation Retired					
Employer Mailing Address/Principal Plac Business	e of	City		State	Zip Code(Plus 4)		Description of Contribution			
N/A		N/A		PA	18	709		gift/giveaways- sing State Rep E D ski		
Full Name of Contributor Mary P Delaney					мо	DAY	YEAR			
Mailing Address 831 Charles St								\$ 148.90		
City Luzerne	State		Zip Code(I	Plus 4)	12	31	2015			
PA 18709										
Employer of Contributor N/A				Occup	ation	Retired				
Employer Mailing Address/Principal Plac Business	e of	City		State	Zi _l 4)	Code(Plus	Descri	ption of Contribution		
N/A N/A PA			PA	18	709	Small gift/giveaways- advertising State Rep E D Pashinski				

Full Name of Contributor Mary P Delaney					мо	DAY	YEAR			
Mailing Address 831 Charles St								\$ 456.04		
City Luzerne	State PA		Zip Code(P 18709	lus 4)	12	31	2015			
Employer of Contributor N/A Occupation						ion F	on Retired			
Employer Mailing Address/Principal Place of Business City State				State	Zip (4)	Code(Plus	Descri	ption of Contribution		
N/A		N/A		PA	187	09		gift/giveaways- ising State Rep E D ski		
Enter Grand Total of Part G on Sch Summary Page, Section 3.	nedule II, I	n-Kind	Contributio	ons Detaile	ed			PAGE TOTAL 1,977.73		
							1			

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period						
PASHINSKI, EDDIE DAY COM TO ELECT			From	11/24	1/2015	То:	12/31/2015		
				DATE	AMOUNT				
To Whom Paid Lauren Emilie LLC			мо	DAY	YEAR				
Mailing Address 43 N Spring St			11	29	2015	\$	325.00		
City Glen Lyon	State PA	Zip Code (Plus 4) 18617	Description of Expenditure Ck #891 - Political Consulting						
To Whom Paid Lauren Emilie LLC			мо	DAY	YEAR				
Mailing Address 43 N Spring St			12	7	2015	\$	109.33		
City Glen Lyon	State PA	Zip Code (Plus 4) 18617	Description of Expenditure Ck #892 - Reimbursement						
To Whom Paid CYC Athletic Council			мо	DAY	YEAR				
Mailing Address 36 S Washington St			12	14	2015	\$	100.00		
City Wilkes Barre	State PA	Zip Code (Plus 4) 18701	Description of Expenditure Ck #893 - Donation						

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL

534.33

\$

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 Reportin			ng Period						
PASHINSKI, EDDIE DAY COM TO ELECT From:			From:	<u>11</u>	<u>/24/2015</u>	То:	To: <u>12/31/2015</u>		
					DATE			standing ince of Debt	
Name of Creditor Eddie Day Pashinski				мо	DAY	YEAR			
Mailing Address 259 E Northampton St				12	31	2015	\$	3,650.80	
City Wilkes Barre	State Zip Code (Plus 4) 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 Northampton St				12	31	2015	\$	1,645.99	
City Wilkes Barre	State PA	Zip Code (Plu 18702	ıs 4)	Description of Debt Loan (Original Loan Date 11/07/2006)					
				Outstanding DATE Balance of Debt					
Name of Creditor Eddie Day Pashinski			МО	DAY	YEAR				
Mailing Address 259 E Northampton St			12	31	2015	\$	500.00		
City Wilkes Barre	State PA	Zip Code (Plu 18702	ıs 4)	Description of Debt Loan (Original Loan Date 03/14/2007)					
				Outstanding DATE Balance of Debt					
Name of Creditor Eddie Day Pashinski			МО	DAY	YEAR				
Mailing Address 259 E Northampton St			12	31	2015	\$	2,636.11		
City Wilkes Barre	State PA	Zip Code (Plu 18702	ıs 4)	Description of Debt Best Western Genetti Hotel - Event 04/19/2007					

			DATE			Outstanding Balance of Debt		
Name of Creditor Eddie Day Pashinski			мо	DAY	YEAR			
Mailing Address 259 E Northampton St			12	31	2015	\$	1,600.00	
City Wilkes Barre	State PA	Zip Code (Plus 4) 18702	Description of Debt Loan (Original Loan Date 07/28/2015)					
				DATE		Outstanding Balance of Debt		
Name of Creditor Eddie Day Pashinski			мо	DAY	YEAR			
Mailing Address 259 E Northampton St			12	31	2015	\$	600.00	
City Wilkes Barre	State PA	Zip Code (Plus 4) 18702	Description of Debt Loan (Original Loan Date 10/19/15)					
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.						\$	PAGE TOTAL \$ 10,632.90	