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 2	006195			Report		CAND	DATE		СОМ	ITTEE	✓	LOBB	YIST	
Name of Filing C	Committee, Car	ididate or L	obbyist:	P	ASHIN	ISKI, I	DDIE D	AY COI	и то	ELECT		_			
Street Address:	259 E NOI	RTHAMPTO	N ST												
City:	WILKES-B	ARRE					State:	PA			Zip Cod	de: 18	3702-00	000	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PR PRIMARY	RE-	2.	30 DA		POST-	3.		AMENDM REPORT		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY P ELECTION	RE-	5.	30 DA		POST-	6.		TERMIN/ REPORT		Yes	No	~
report type)	ANNUAL REPO	PRT 7. X	Year 2016				IG METH CHECK O				PAPER		\checkmark	DISKE	ГТЕ
Name of Office S	Sought by Cand	lidate:	•				DATE C	ATE OF ELECTION District Office Number Code					y Code	County Code	
	,						МО	DAY	YE	AR	121	STH	DEM		40
REPRESENTATI	VE IN THE GE	NERAL ASS	SEMBLY				11		8	2016		(SEE IN	STRUCTIO	NS FOR C	ODES)
Summary of		МО	DAY YEA	AR			МО	DAY	YI	EAR	FC	R OFFI	CE USE	ONLY	
Expenditures	s trom:		11 29	20	16 T	0	12	2	31	2016					
A. Amount Bro	ught Forward	From Last R	eport			\$			50,4	416.99					
B. Total Moneta	ary Contributio	ns And Rec	eipts (From Sch	ned	ule I)	\$				0.00					
C. Total Funds Available (Sum Of Lines A and B)									50,4	416.99					
D. Total Expenditures (From Schedule III) \$ 1,001.00															
E. Ending Cash Balance (Subtract Line D From Line C)						\$			49,4	15.99					
F. Value Of In-	Kind Contribut	ions Receiv	ed (From Sched	lule	iI)	\$				0.00					
G. Unpaid Debt	ts And Obligati	ons (From	Schedule IV)			\$			10,6	32.90			1		
			AF	FI	DAVI	T SE	CTION								
PART I - If this is	s a Committee	report, trea	surer sign here	. If	this is	a Car	ndidate r	eport, o	candi	date sig	jn here.				
I swear (or affirm) correct and complete		including the	e attached schedu	les 1	filed on	paper	or by elect	tronic m	edium	, are to t	the best o	f my kno	wledge a	nd belie	f , true
Sworn to and subs	cribed before me	this	20						S	Signature	of Perso	n Submit	ting Rep	ort	
						_					Prin	ted Name	e		
My Commission Ex	_	nature									Ema	il			
	мо	D	AY Y	'R		-		Ar	ea Cod	le		ne Telepi	none Nun	nber	
Part II- If this is	a report of a	candidate's	authorized Con	nmi	ittee, C	andid	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amende		of my knowl	edge and belief th	nis p	oolitical	comm	ittee has r	not viola	ted an	y provis	ions of th	e act of J	une 3,19	37 (P.L.	1333,
Sworn to and subsc	ribed before me	this								S	ignature (of Candid	ate		
-	day of					_									
						_					Printe	d Name			
My Commission Exp	Signat pires	ure									Ema	il			
	мо	D	AY Y	ΥR		-		Area	Code		D	aytime T	elephone	e Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period				
PASHINSKI, EDDIE DAY COM TO ELECT	From:	11/29/20	<u>16</u> To:	12/31/2016		
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)	\$	0.00				
TOTAL for the Reporting	TOTAL for the Reporting Period (2)					
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		\$	0.00			

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

			to \$250.00 in the reporting period					
			From:			То	:	
					DATE			AMOUNT
Full Name of Contribut	ing Committee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	•)					
		1			<u> </u>			PAGE TOTAL

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

PAGE TOTAL \$0.00

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 Filling Committee of Candidate			Reporting Period From: To:					
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	١					

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			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 Candidate			Rep	orting Pe	riod			
			Fron	n:		То	:	
				D	ATE		АМО	DUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plu	s 4)					
Employer Name				Occupation				
Employer Mailing Address/Principal Place of Business City					State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page,	Section	on 3.			PAG	GE 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 Co	andidate		Report	ting Perio	bd			
			From:			То:		
				D	ATE		AN	10UNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	•						
Enter Grand Total of Part E or	Schedule T Detaile	d Summary Page	Section	4			PA	GE TOTAL
Lines Grana Total of Fair 2 of	r benedule 1/ betanet	z Summary r uge,	Section	••			\$	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 Peri	od							
PASHINSKI, EDDIE DAY COM TO ELECT	From:	<u>11/29/2016</u> To:	<u>12/31/2016</u>						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	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 PART 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 Candidat	:e		Reporting	g Period			
		From: To: DATE AMOUNT					
				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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting P	Period			
				Fro	om:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occupa	tion			
Employer Mailing Address/Principal Plac Business	ce of Cit	ity	State		Zip Code(Plus 4) Description of Contrib				of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-K	Kind (Contributions De	etaile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or C	Candidate		Reporti	ng Period			
PASHINSKI, EDDIE DAY COM	TO ELECT		From	11/29	9/2016	То:	12/31/2016
		l		DATE			AMOUNT
To Whom Paid Lauren Emilie, LLC			МО	DAY	YEAR		
Mailing Address 43 N Spring	g St		12	10	2016	\$	325.00
City Glen Lyon	State PA	Zip Code (Plus 4) 18617		otion of Exp			
To Whom Paid Lauren Emilie, LLC		МО	DAY	YEAR			
Mailing Address 43 N Spring St			12	17	2016	\$	200.00
City Glen Lyon	State PA	Zip Code (Plus 4) 18617	1	otion of Exp 78 - HDCC			
To Whom Paid Mountaintop Eagle Inc	·	·	МО	DAY	YEAR		
Mailing Address PO Box 10			12	17	2016	\$	376.00
City Mountaintop	State PA	Zip Code (Plus 4) 18707		otion of Exp 79 - Advert			
To Whom Paid CYC Athletic Council		•	мо	DAY	YEAR		
Mailing Address 36 S Washington St			12	17	2016	\$	100.00
City Wilkes Barre	State PA	Zip Code (Plus 4) 18701	Description of Expenditure Ck #980 - Donation				
			L				PAGE TOTAL

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

1,001.00

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			Reportir	ng Period					
PASHINSKI, EDDIE DAY COM TO ELECT			From:	<u>11</u>	/29/2016	То:	12/31/2	<u>2016</u>	
					DATE		Outsta Balanc	nding e of Debt	
Name of Creditor Eddie Day Pashinski				мо	DAY	YEAR			
Mailing Address 259 E Northamptor	n St			12	31	2016	\$	3,650.80	
City Wilkes Barre	State PA	Zip Code (Plu 18702	ıs 4)		otion of Del Original Loa		05/16/2006)		
					DATE		Outsta Balanc	nding e of Debt	
Name of Creditor Eddie Day Pashinski				МО	DAY	YEAR			
Mailing Address 259 E Northampton St				12	31	2016	\$	1,645.99	
City Wilkes Barre	Barre State Zip Code (Plus 4) PA 18702				otion of Del Original Loa		.1/07/2006)	
					DATE		Outsta Balanc	nding e of Debt	
Name of Creditor Eddie Day Pashinski				МО	DAY	YEAR			
Mailing Address 259 E Northamptor	ı St			12	31	2016	\$	500.00	
City Wilkes Barre	State PA	Zip Code (Plu 18702	ıs 4)		otion of Del Origianl Loa		3/14/2007)	
					DATE		Outsta Balanc	nding e of Debt	
Name of Creditor Eddie Day Pashinski				МО	DAY	YEAR			
Mailing Address 259 E Northamptor	Mailing Address 259 E Northampton St			12	31	2016	\$	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	2016	\$	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	2016	\$	600.00	
City Wilkes Barre	State PA	Zip Code (Plus 4) 18702	Description of Debt Loan (Original Loan Date 10/19/2015)					
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.						\$	PAGE TOTAL 10,632.90	