### **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	2022C	1124				port ed B		CAN	IDII	DATE	<b>✓</b>	co	MMITTEE		LOBE	BYIST		
Name of Filing C	ommittee, Ca	ındida	te or Lo	obbyist:		PAS	HIN	SKI, I	DWIN	N A									
Street Address:																			
City:									State	:				Zip Code	e: 18	702			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		1.	2ND FRIDA PRIMARY	AY PRE	-	2.	30 DA		Р	OST-	3. <b>X</b>		AMENDME REPORT?	No		<b>\</b>		
(place X to the right of	6TH TUESDAY PRE-ELECTION		4.	2ND FRIDA ELECTION	Y PRI	E	5.	30 DA		Р	OST-	6.		TERMINATION Yes REPORT?					<b>√</b>
report type)	ANNUAL REP	ORT	7.	<b>Year</b> 2022					CHECK					PAPER		$\checkmark$	DISKE	TTE	
Name of Office S	- Sought by Can	ıdidate	e:						DATE	E 0	F ELE	CTIC	ON	District Number	Office Code	Par	ty Code	Cour	
DEDDEGENERATI	\			<b>-14</b> -01.17					МО		DAY	ΥI	EAR	121	STH	DEM	1		
REPRESENTATI	VE IN THE GI	ENERA	AL ASSI	EMBLY						11		8	2022		(SEE INS	STRUCTIO	ONS FOR	CODES	)
Summary of		ıd	МО	DAY	YEAR	₹			МО		DAY	Y	EAR	FOF	OFFIC	E USE	ONLY		
Expenditures	from:			5 3	3 2	022	Т	0		6		6	2022						
A. Amount Bro	ught Forward	From	Last R	eport				\$				•	0.00						
B. Total Moneta	ary Contributi	ions A	nd Rece	eipts (Fror	n Sche	dule	ı)	\$					0.00						
C. Total Funds	Available (Su	m Of L	Lines A	and B)				\$					0.00						
D. Total Expenditures (From Schedule III) \$ 0.00																			
E. Ending Cash	Balance (Sub	tract	Line D	From Line	C)			\$				(9,0	96.15)						
F. Value Of In-	Kind Contribu	itions	Receive	ed (From S	chedu	le II	()	\$					0.00						
G. Unpaid Debt	s And Obligat	tions (	From S	chedule I	/)			\$					0.00		•				
					AFF	·ID/	٩VI	T SE	CTIO	N									
PART I - If this is	a Committee	e repo	rt, trea	surer sign	here.	If th	is is	a Car	ndidate	e re	port, o	candi	date sig	ın here.					
I swear (or affirm) correct and complete		t, inclu	ding the	attached so	hedule	s file	d on	paper	or by el	lectr	onic m	edium	ı, are to t	he best of	my knov	vledge a	and beli	ef , tr	ue.
Sworn to and subs	cribed before m	ie this		20						•		5	Signature	of Person	Submitt	ing Rep	ort		_
		gnature	 	-				<u>-</u>						Printe	ed Name	ı			_
My Commission Ex	-	•								-				Email					-
	мо		DA	ΛΥ	YR						Are	ea Co	de	Daytime	Teleph	one Nu	mber		
Part II- If this is	a report of a	candi	date's	authorized	Comr	nitte	e, C	andid	ate sh	all s	sign he	ere.							
I swear (or affirm) No 320) as amende		st of my	y knowle	dge and bel	ief this	polit	tical	comm	ittee ha	as no	ot viola	ted ar	ny provisi	ions of the	act of Ju	ıne 3,19	937 (P.L	. 133	3,
Sworn to and subsc	ribed before me	this:		20									Si	ignature of	Candida	ite			-
								-						Printed	Name				-
My Commission Exp	Signa	ture						-						Email					-
·								-											_
	М	5	DA	ΛY	YR	ł					Area	Code		Day	time Te	elephon	e Numb	er	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
PASHINSKI, EDWIN A	From:	5/3/202	<u>2</u> To:	6/6/2022
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	) Period	(2)	\$	0.00
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			\$	0.00

#### **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 Candidat	vame of Filing Committee or Candidate			Period			
		F	rom:		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.

### 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 Can	Name of Filing Committee or Candidate					Reporting Period						
				Fro	m:		To	):				
			·			DATE			AMOUNT			
Full Name of Contributor					МО	DAY	YEAR					
Mailing Address								\$	0.00			
City	State	Zip	Code (Plus 4)									
									PAGE TOTAL			

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

#### **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				Reporting Period						
			From:			То:					
				DA	TE		А	MOUNT			
Full Name of Contributing Committee				мо	DAY	YEAR	\$		0.00		
Mailing Address							7		0.00		
City	State	Zip Cod	e (Plus 4)								
							-	PAGE TO	TAL		
Enter Grand Total of Part C on Scheo	lule 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	me of Filing Committee or Candidate				riod					
						rom: To:				
				D	ATE			AMOUNT		
Full Name of Contributor				мо	DAY	YEAR	\$	0.00		
Mailing Address							1			
City	State	Zip Code (Plu	s 4)							
Employer Name		•		Occupa	tion					
Employer Mailing Address/Principal Pla	ce of Business	City		•	State		Zip C	ode (Plus 4)		
Enter Grand Total of Part C on Scho	dule I, Detailed S	Summary Page,	, Sectio	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 of	or Candidate		Report	ing Peri	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (I	Plus 4)					
Receipt Description	•	•			1	•	•	
Futor Coand Total of Bank	Cabadula I Detailed	Commence De	Cookie					PAGE TOTAL
Enter Grand Total of Part I	e on Schedule I, Detailed	Summary Page,	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	d	
PASHINSKI, EDWIN A	From:	<u>5/3/2022</u> <b>To:</b>	6/6/2022
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	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)	\$	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 Candid	ame of Filing Committee or Candidate Re					Reporting Period				
	Fi					То:				
		•		DATE			AMOUNT			
Full Name of Contributor			МО	DAY	YEAR					
Mailing Address						<b>7</b> \$	0.00			
City	State	Zip Code (Plus 4)								
Description of Contribution:	•	-	•	•		•				
Enter Grand Total of Part F on S	chedule II, In-Ki	nd Contributions Detai	led Sum	mary Pag	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		me of Filing Committee or Candidate				Period					
						From:			То:		
						DATE			AMOUNT		
Full Name of Contributor					мо	DAY	YEAR				
Mailing Address				-					\$	0.00	
City	State	;	Zip Code(Plus 4)								
Employer of Contributor					Occup	ation					
Employer Mailing Address/Principal Plac	e of Business	City	′	State	e Zip	Code(Plus 4)	Descr	ript	ion of Contribution	on	
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	ontributions De	etaile	ed				PAGE TOT	ΓAL	
Summary Page, Section 3.	<b></b>									0.00	

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	ame of Filing Committee or Candidate					Reporting Period				
	From			То:						
				DATE			AMOUNT			
To Whom Paid	мо	DAY	YEAR							
Mailing Address						\$	0.00			
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure					
Enter Crand Total of Evnanditures	on Dogg 1 Donowh (	Cover Dage Item F					PAGE TOTAL			
Enter Grand Total of Expenditures	on Page 1, Report C	Lover Faye, Item L	<b>,</b> .			\$	0.00			