Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificat Number :	ion 2024	IC0277		_	Repo		CA	NDI	DATE	\checkmark	C	OMMITTE	E	LOB	BYIST		
	Committee, Candic	late or L	obbvist:		Filed EUGE	-	EPASO	UAL	E								
			-			-	- 1										
Street Address:												7.0.0	1F	210			
City:							State	e:				Zip Code: 15219					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. X	2ND FRIDA PRIMARY			30 D PRIN	DAY MARY		POST-	3.		AMENDM REPORT?		Yes	No)	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA	ay pri	E- 5.	30 E ELEC	DAY CTION	P	POST-	6.		TERMINATION REPORT?		Yes	No)	
report type)	ANNUAL REPORT	7.	Year 2024	1			ING ME) CHEC					PAPER		\checkmark	DISK	TTE	
Name of Office	Sought by Candida	ite:	-				DAT	ΈO	F ELE	стіо	N	District Number	Office Code	Par	ty Code	Coun Code	
ATTORNEY GE	NERAL						мо		DAY	YE	AR	-1	ATT	DEN	1		
ATTORNET GET								11		5	2024		(SEE INS	TRUCTI	ONS FOR	CODES)	
	Receipts and	мо	DAY	YEAF	2		мо		DAY	YE	AR	FO	R OFFIC	E USE	ONLY		
Expenditures	s from:		1 1	1 2	024	то		3		4	2024						
A. Amount Bro	ought Forward Fro	m Last R	eport			5	\$				0.00						
B. Total Monetary Contributions And Receipts (From Schedule							\$				0.00						
C. Total Funds	C. Total Funds Available (Sum Of Lines A and B)						\$				0.00						
D. Total Expen	ditures (From Sch	edule II	I)				\$			3,9	50.00						
E. Ending Cash	n Balance (Subtrac	t Line D	From Line	C)			\$				0.00						
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	Schedu	le II)		\$			3	25.55						
G. Unpaid Deb	ts And Obligations	(From S	Schedule I	V)			\$				0.00						
				AFF	IDAV	'IT SI	ECTI	ΟN									
PART I - If this i	s a Committee rep	ort, trea	isurer sign	here.	If this	is a Ca	andida	te re	eport, o	candid	late si	gn here.					
I swear (or affirm correct and compl) that this report, inc ete.	luding the	e attached so	chedule	s filed o	n pape	r or by o	electi	ronic m	edium,	are to	the best of	my know	vledge	and bel	ief , trı	ie,
Sworn to and sub	scribed before me thi day of	s	20							S	ignatur	e of Persor	Submitt	ing Rep	oort		-
	Signatu	Ire	_			_						Print	ed Name				-
My Commission E	-											Emai	I				-
	мо	D	AY	YR					Ar	ea Cod	e	Daytim	e Teleph	one Nu	mber		-
Part II- If this is	a report of a can	didate's	authorized	d Comr	nittee,	Candi	date s	hall :	sign h	ere.							
I swear (or affirm) No 320) as amend) that to the best of i ed.	ny knowle	edge and be	lief this	s politica	al comi	mittee ł	nas no	ot viola	ted any	y provis	ions of the	act of Ju	ine 3,1	937 (P.I	L. 1333	ŀ,
Sworn to and subse	cribed before me this day of		20								S	ignature o	f Candida	ite			-
												Printe	d Name				-
My Commission Ex	Signature											Emai	1				-
,																	_
	мо	D	AY	YF	Ł				Area	Code		Da	ytime Te	elephor	e Numb	ber	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period					
EUGENIO DEPASQUALE	From:	<u>1/1/202</u>	<u>4</u> To:	<u>3/4/2024</u>		
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	e		Reporting Period					
				From: To:				
DATE							AMOUNT	
Full Name of Contributing Committee MO DAY YEAR								
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	4)					
								PAGE TOTAL
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.							\$	0.00

Use this Part to it \$!	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									
			Fror	m:		Тс):		
					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.						\$	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				
				То:				
				DA	TE		A	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.00
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
					PAGE TOTAL			
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.					\$	0.00		

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			Rep	orting Pe	riod			
			Froi	n:		Т	То:	
				D	ATE		АМ	IOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Pl	ıs 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page	e, Sectio	on 3.			P#	AGE 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			Report	ing Peric	d				
			From:			То:			
				D	ATE			AMOUNT	r
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (Plus 4)						
Receipt Description	·	•					•		
		_						PAGE TO	TAL
nter Grand Total of Part 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		
EUGENIO DEPASQUALE	From:	<u>1/1/2024</u> To:	<u>3/4/2024</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	80.71
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	280.39
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, 1		\$	361.10

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporting	Period			
EUGENIO DEPASQUALE			From: <u>1/1/202</u>			То:	<u>3/4/2024</u>
				DATE			AMOUNT
Full Name of Contributor			мо	DAY	YEAR		
EUGENIO DEPASQUALE			MO		TEAK	\$	115.00
Mailing Address		1	1	24	2024	۲,	115.00
City PITTSBURGH	State	Zip Code (Plus 4)					
	PA	15219					
Description of Contribution: AMTRAK	FOR RAIL TRAVEL	•					
Full Name of Contributor			мо	DAY	YEAR		
EUGENIO DEPASQUALE			MO	DAT	TEAR	\$	165.39
Mailing Address						ך 1	105.59
City PITTSBURGH	State	Zip Code (Plus 4)					
	PA	15219					
Description of Contribution: LITITZ H	LIDAY INN FOR LO	, DDGING	•				
				_			
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	le,		PAGE TOTAL
					:	\$	280.39

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

Name of Filing Committee or Candidate			Re	porting I	Period		
			Fro	From:			
					DATE		AMOUNT
Full Name of Contributor				мо	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupa	ation		·
Employer Mailing Address/Principal Plac	e of Business	City	Stat	e Zip	Code(Plus 4)	Descri	ption of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-Kind	d Contributions D	etaile	ed			PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name	e of Filing Committee or Candidate			Reporti	ng Period			
EUGE	ENIO DEPASQUALE			From	<u>1/:</u>	1/2024	То:	<u>3/4/2024</u>
					DATE			AMOUNT
To Wh	nom Paid			мо	DAY	YEAR		
DEPAS	SQUALE FOR AG			140	2	- Lyax		
Mailin	g Address			3	4	2024	\$	3,200.00
City	PITTSBURGH	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	15219	CONTRIBUTION				
	nom Paid			мо	DAY	YEAR		
	EWELL DEMOCRATS							150.00
Mailin	g Address		-	1	7	2024	\$	150.00
City	CRAFTON	State	Zip Code (Plus 4)	Descrip				
		PA	15205	CONTRIBUTION				
				мо	DAY	YEAR		
	MONROE COUNTY DEMOCRATIC PARTY						250.00	
Mailin	Mailing Address		1	9	2024	\$	250.00	
City	STOUDSBURGH	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		РА	18360	CONTRI	BUTION			
To Wh	nom Paid			мо	DAY	YEAR		
LUZEF	RNE COUNTY FEDERATION OF DE	MOCRATIC WOMEN						
Mailin	g Address			1	15	2024	\$	100.00
City	WILKES-BARRE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	18701	PURCHA TICKET	ASE OF FUI S	NDRAISI	NG EVEN	IT EVENT
To Wh	nom Paid			мо	DAY	YEAR		
BEAVI	ER COUNTY DEMOCRATIC COMMI	TTEE						
Mailin	g Address			1	18	2024	\$	40.00
City	ROCHESTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		РА	150704	DONAT	ION .			
To Wh	nom Paid			мо	DAY	YEAR		
PHILA	DELPHIA 8TH WARD DEMOCRATI	C COMMITTEE						
Mailin	g Address			1	21	2024	\$	50.00
City	PHILADELPHIA	State	Zip Code (Plus 4)	s 4) Description of Expenditure				
		РА	19103	CONTRIBUTION				

-	om Paid RE COUNTY DEMOCRATIC PARTY			мо	DAY	YEAR		
	g Address			1	22	2024	\$	10.00
City STATE COLLEGE State Zip Code (Plus 4)			Description of Expenditure					
PA 16801					BUTION			
To Whom Paid				мо	DAY	YEAR		
FINDL	AY TWP DEMOCRATIC COMMITTE	EE (PA)						
Mailing	g Address			1	29	2024	\$	150.00
City	PITTSBURGH	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		РА	15220	CONTRI	BUTION			
								PAGE TOTAL
Enter	inter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	3,950.00