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	60745	5				port ed B		CAND	ANDIDATE COMMITTEE LOBBYIST						BYIST		
Name of Filing C	ommittee, C	andida	ite or Lo	obbyist:		Edd	ie D	ay Pa	shinski								•	
Street Address:																		
City:									State:				Zip Code	e:				
TYPE OF REPORT	6TH TUESDA' PRE-PRIMAR'		1.	2ND FRIDAY PRIMARY	PRE	-	2.	30 DA		POST-	3.		AMENDME REPORT?	NT	Yes	No	•	\
(place X to the right of	I INC CLECTION				30 DA		POST-	6.		TERMINAT REPORT?	ION	Yes	No		\			
report type)	ANNUAL RE	PORT	7.					NG METH CHECK C				PAPER		√	DISKE	TTE		
Name of Office S	ought by Ca	ndidat	e:						DATE (OF ELE	CTION		District Number	Office Code	Par	ty Code	Coun	
									МО	DAY	YEA	R	121	STH	DEN	1	40	
REPRESENTATIVE IN THE GENERAL ASSEMBLY									1:	L	7 2	2006		(SEE INS	TRUCTI	ONS FOR (CODES)
Summary of		nd	МО	DAY	YEAR				МО	DAY	YEA	R	FOR	OFFIC	E USE	ONLY		
Expenditures	from:			1 1		1	Т	0	Ċ)	18	2006						
A. Amount Bro	ught Forwar	d From	Last R	eport				\$			(43,800	.80)						
B. Total Moneta	ary Contribu	tions A	nd Rec	eipts (From	Sche	dule	ı)	\$			2,00	0.00						
C. Total Funds	Available (S	um Of	Lines A	and B)				\$		((41,800	.80)						
D. Total Expend	ditures (Fror	m Sche	dule II	I)				\$				0.00						
E. Ending Cash	Balance (Su	ıbtract	Line D	From Line C)			\$		(41,800	.80)						
F. Value Of In-	Kind Contrib	utions	Receive	ed (From Sch	hedu	le II	()	\$			(0.00						
G. Unpaid Debt	s And Obliga	ations ((From S	Schedule IV)				\$				0.00		,				
					AFF	IDA	٩VI	T SE	CTION									
PART I - If this is	a Committe	e repo	rt, trea	surer sign he	ere. 1	[f th	is is	a Car	ndidate r	eport,	candida	te sig	gn here.					
I swear (or affirm) correct and comple		ort, inclu	ıding the	attached sche	edules	file	d on	paper	or by elec	tronic m	edium, a	re to t	the best of 1	my know	vledge	and beli	ef , tru	ue.
Sworn to and subs	cribed before of	me this		20							Sig	nature	e of Person	Submitt	ing Rep	ort		_
		Signatur						_					Printe	d Name				_
My Commission Ex		ngilatur	-										Email					-
	мо		D/	AY	YR			_		Ar	ea Code		Daytime	Telepho	one Nu	mber		
Part II- If this is	a report of	a cand	idate's	authorized C	Comn	nitte	e, C	andid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende		est of m	y knowle	edge and belief	f this	polit	tical	comm	ittee has	not viola	ted any	orovis	ions of the	act of Ju	ine 3,1	937 (P.L	. 1333	3,
Sworn to and subsc		ne this										s	ignature of	Candida	ite			-
	day of — —							_					Printed	Name				-
	Sign	nature						-										_
My Commission Exp	ires												Email					
		мо	D	AY	YR			-		Area	Code		Day	time Te	elephon	e Numb	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period		
Eddie Day Pashinski	From:	To:	9/18/2006
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			
TOTAL for the Reporting	g 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	g 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	g Period (3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)			
TOTAL for the Reporting	g Period (4)	\$	2,000.00
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa		\$	2,000.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate value		\$2) in the			
Name of Filing Committee or Candidate				om:	renou	То	:	
		<u> </u>			DATE			AMOUNT
Full Name of Contribut	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	_		!		<u> </u>			DAGE 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))						

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 Ro			Reporting Period						
			From:			То:			
				DA	TE		Α	MOUNT	
Full Name of Contributing Commit	tee			мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary 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.)

ame of Filing Committee or Candidate				Reporting Period						
				From:				То:		
			_		D	ATE		А	MOUNT	
Full Name of Contributor					МО	DAY	YEAR			
Mailing Address								\$	0.00	
City	State	Zi	p Code (Plus	4)						
Employer Name	•				Occupa	tion	•	•		
Employer Mailing Address/Principa Business	l Place of		City		•	State		Zip Cod	de (Plus 4)	
Enter Grand Total of Part C on	Schedule I, Deta	iled Sumr	mary Page,	Section	on 3.			F \$	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 or Candidate	Name of Filing Committee or Candidate Reporti						eporting Period					
Eddie Day Pashinski			From:			To:		9/18/2006				
				D	ATE			AMOUNT				
Full Name Committee To Elect Eddie Day Pashinsk	ĸi			мо	DAY	YEAR						
Mailing Address 1089 Wyoming Ave				_			\$	2,000.00				
City Forty Fort	State PA	Zip Code (18704	Plus 4)	6	14	2006						
Receipt Description Repay Loan		·										
Enter Grand Total of Part E on Schedu	ıle I. Detailed	Summary Page.	Section	4.				PAGE TOTAL				
and a second restar of rune 2 on senede	z, z etanea	Jammary ruge,		••			\$	2,000.00				

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		
Eddie Day Pashinski	From:	To:	<u>9/18/2006</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 Candidat	Name of Filing Committee or Candidate Re						
	From:						
				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					eporting F	Period			
				Fr	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	ee of Ci	ity	State	•	Zip 4)	Code(Plus	Descri	ption o	of Contribution
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detail Summary Page, Section 3.				led				PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or (Reporting Period						
	From			То:			
				DATE			AMOUNT
To Whom Paid	МО	DAY	YEAR				
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)	Descri	ption of Ex	penditure		
							PAGE TOTAL
Enter Grand Total of Expen	Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D					\$	0.00