

# CAMPAIGN FINANCE REPORT

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

Filer Identification Number: <input type="text"/>	Report Filed By: <input type="text"/>	CANDIDATE <sup>1.</sup> <input checked="" type="checkbox"/>	COMMITTEE <sup>2.</sup> <input type="checkbox"/>	LOBBYIST <sup>3.</sup> <input type="checkbox"/>
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Name of Filing Committee, Candidate or Lobbyist:  
**MICHAEL J. PASTON**

Street Address:  
**720 EASTWIND CIRCLE**

City: **DRESDEN** State: **PA** Zip Code: **19025-1435**

TYPE OF REPORT  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY <sup>1.</sup>	2ND FRIDAY PRE-PRIMARY <sup>2.</sup>	30 DAY POST PRIMARY <sup>3.</sup>	AMENDMENT REPORT? YES <input type="checkbox"/> NO <input type="checkbox"/>
	9TH TUESDAY PRE-ELECTION <sup>4.</sup>	2ND FRIDAY PRE-ELECTION <sup>5.</sup>	30 DAY POST ELECTION <sup>6.</sup>	TERMINATION REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
	ANNUAL REPORT <sup>7.</sup>	YEAR <input type="text"/>	FILING METHOD ( ) CHECK ONE <input type="checkbox"/>	PAPER <input checked="" type="checkbox"/> DISKETTE <input type="checkbox"/>

Name of Office Sought by Candidate: **CLERK OF COURTS**

DATE OF ELECTION: MO. **05** DAY **21** YEAR **2019**

District Number:  Office Code:  Party Code:  County Code:

(SEE INSTRUCTIONS FOR CODES)

Summary of Receipts and Expenditures from:	MO.	DAY	YEAR	To	MO.	DAY	YEAR	FOR OFFICE USE ONLY <b>RECEIVED</b> <b>OFFICE OF VOTER SERVICES</b> <b>MONTG. CO. PA</b> <b>19 MAR 29 PM 1:15</b>
	<b>01</b>	<b>01</b>	<b>2019</b>		<b>02</b>	<b>28</b>	<b>2019</b>	
A. Amount Brought Forward From Last Report	\$		<b>- 0 -</b>					
B. Total Monetary Contributions and Receipts (From Schedule I)	\$		<b>- 0 -</b>					
C. Total Funds Available (Sum of Lines A and B)	\$		<b>- 0 -</b>					
D. Total Expenditures (From Schedule III)	\$		<b>740.93</b>					
E. Ending Cash Balance (Subtract Line D from Line C)	\$		<b>- 0 -</b>					
F. Value of In-Kind Contributions Received (From Schedule II)	\$		<b>- 0 -</b>					
G. Unpaid Debts and Obligations (From Schedule IV)	\$		<b>- 0 -</b>					

### AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules, on paper or computer diskette, are to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this 29 day of MARCH 2019

Janisha Anderson Signature

Michael J. Paston Signature of Person Submitting Report  
**MICHAEL J. PASTON** Printed Name

215 Area Code 527-6121 Daytime Telephone Number

COMMONWEALTH OF PENNSYLVANIA 11 2021  
NOTARIAL SEAL MO. DAY YR.

PART II - If this is a Candidate report, Candidate's Authorized Committee, candidate shall sign here.

I swear (or affirm) that this report, including the attached schedules, on paper or computer diskette, are to the best of my knowledge and belief this political committee has not violated any provisions of the Act of June 3, 1937 (P.L. 1333, No. 320) as amended.

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

My commission expires \_\_\_\_\_ MO. \_\_\_\_\_ DAY \_\_\_\_\_ YR.

\_\_\_\_\_  
Area Code \_\_\_\_\_ Daytime Telephone Number

# STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate <b>MICHAEL J. PASTOR</b>	Reporting Period From <b>01/01/19</b> To <b>02/28/19</b>
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To Whom Paid <b>WOMEN'S DEMOCRATIC LEADERSHIP</b>	<b>MO.</b>	<b>DAY</b>	<b>YEAR</b>	Amount
Mailing Address <b>26 FURRETT AVE.</b>	<b>01</b>	<b>12</b>	<b>19</b>	<b>\$ 200.</b>
City <b>MORRISTOWN</b>	Description of Expenditure <b>DINNER</b>			
State <b>PA</b>	Zip Code (Plus 4) <b>19401-</b>			

To Whom Paid <b>TYNISLA ANDERSON</b>	<b>MO.</b>	<b>DAY</b>	<b>YEAR</b>	Amount
Mailing Address <b>PO BOX 311</b>	<b>01</b>	<b>22</b>	<b>19</b>	<b>\$ 10</b>
City <b>MORRISTOWN</b>	Description of Expenditure <b>NOTARY</b>			
State <b>PA</b>	Zip Code (Plus 4) <b>19404</b>			

To Whom Paid <b>FEDEX OFFICE</b>	<b>MO.</b>	<b>DAY</b>	<b>YEAR</b>	Amount
Mailing Address <b>461 W. GERMANTOWN PIKE</b>	<b>02</b>	<b>01</b>	<b>19</b>	<b>\$ 230.93</b>
City <b>PLYMOUTH MEETING</b>	Description of Expenditure <b>PRINTING</b>			
State <b>PA</b>	Zip Code (Plus 4) <b>19462-</b>			

To Whom Paid	<b>MO.</b>	<b>DAY</b>	<b>YEAR</b>	Amount
Mailing Address				<b>\$</b>
City	Description of Expenditure			
State	Zip Code (Plus 4)			

To Whom Paid	<b>MO.</b>	<b>DAY</b>	<b>YEAR</b>	Amount
Mailing Address				<b>\$</b>
City	Description of Expenditure			
State	Zip Code (Plus 4)			

To Whom Paid	<b>MO.</b>	<b>DAY</b>	<b>YEAR</b>	Amount
Mailing Address				<b>\$</b>
City	Description of Expenditure			
State	Zip Code (Plus 4)			

To Whom Paid	<b>MO.</b>	<b>DAY</b>	<b>YEAR</b>	Amount
Mailing Address				<b>\$</b>
City	Description of Expenditure			
State	Zip Code (Plus 4)			

To Whom Paid	<b>MO.</b>	<b>DAY</b>	<b>YEAR</b>	Amount
Mailing Address				<b>\$</b>
City	Description of Expenditure			
State	Zip Code (Plus 4)			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.	PAGE TOTAL <b>\$ 440.93</b>
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