



Campaign Finance Report

346353

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

| | | | | | | | | | | |
|---|--------------------------|-------------------|-------------------------|---|----------------------|------------------------------|-------------------------------------|------------|-------------|--|
| Filer Identification Number : 8000646 | | Report Filed By : | CANDIDATE | COMMITTEE <input checked="" type="checkbox"/> | LOBBYIST | | | | | |
| Name of Filing Committee, Candidate or Lobbyist: LUZERNE CO DEM COM | | | | | | | | | | |
| Street Address: 1598 BALD MOUNTAIN ROAD | | | | | | | | | | |
| City: BEAR CREEK TOWNSHIP | | | State: PA | Zip Code: 18702 | | | | | | |
| TYPE OF REPORT (place X to the right of report type) | 6TH TUESDAY PRE-PRIMARY | 1. X | 2ND FRIDAY PRE-PRIMARY | 2. | 30 DAY POST-PRIMARY | 3. | AMENDMENT REPORT? | Yes | No | <input checked="" type="checkbox"/> |
| | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDAY PRE-ELECTION | 5. | 30 DAY POST-ELECTION | 6. | TERMINATION REPORT? | Yes | No | <input checked="" type="checkbox"/> |
| | ANNUAL REPORT | 7. | Year 2021 | FILING METHOD () CHECK ONE | | PAPER | <input checked="" type="checkbox"/> | DISKETTE | | |
| Name of Office Sought by Candidate: | | | DATE OF ELECTION | | | District Number | Office Code | Party Code | County Code | |
| | | | MO | DAY | YEAR | | | | | |
| | | | 11 | 2 | 2021 | (SEE INSTRUCTIONS FOR CODES) | | | | |
| Summary of Receipts and Expenditures from: | | | MO | DAY | YEAR | TO | MO | DAY | YEAR | FOR OFFICE USE ONLY |
| | | | 1 | 1 | 2021 | | 3 | 29 | 2021 | RECEIVED LUZERNE COUNTY, PA APR - 5 PM 12:45 |
| A. Amount Brought Forward From Last Report | | | | | \$ | 31,165.64 | | | | |
| B. Total Monetary Contributions And Receipts (From Schedule I) | | | | | \$ | 250.00 | | | | |
| C. Total Funds Available (Sum Of Lines A and B) | | | | | \$ | 31,415.64 | | | | |
| D. Total Expenditures (From Schedule III) | | | | | \$ | 2,901.46 | | | | |
| E. Ending Cash Balance (Subtract Line D From Line C) | | | | | \$ | 28,514.18 | | | | |
| F. Value Of In-Kind Contributions Received (From Schedule II) | | | | | \$ | 0.00 | | | | |
| G. Unpaid Debts And Obligations (From Schedule IV) | | | | | \$ | 0.00 | | | | |

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 filed on paper or electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this 3rd day of April 2021

Megan Zingaretti
Signature

My Commission Expires October 20, 2021

MO DAY YR

Gary M. Zingaretti
Signature of Person Submitting Report

GARY M. ZINGARETTI
Printed Name

garyzing@hotmail.com
Email

570-371-3527
Daytime Telephone Number

Area Code

Part II - If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that 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

My Commission Expires _____

MO DAY YR

Signature of Candidate

Printed Name

Email

Daytime Telephone Number

Area Code

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

| | | |
|---|-------------------------|----------------------|
| Name of Filing Committee or Candidate | Reporting Period | |
| LUZERNE CO DEM COM | From: <u>1/1/2021</u> | To: <u>3/29/2021</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) | \$ | 250.00 |
| TOTAL for the Reporting Period (2) | \$ | 250.00 |
| 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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.) | | \$ 250.00 |

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 Candidate | Reporting Period |
| | From: To: |

| | | |
|--|------|--------|
| | DATE | AMOUNT |
|--|------|--------|

| Full Name of Contributing Committee | MO | 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 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 LUZERNE CO DEM COM | Reporting Period From: <u>1/1/2021</u> To: <u>3/29/2021</u> |
|--|---|

| | | | | DATE | AMOUNT | | |
|---|--------------------|-----------------------------------|--|-----------|------------|-------------|-----------|
| Full Name of Contributor James Bobeck | | | | MO | DAY | YEAR | |
| Mailing Address 580 Meadowland Ave | | | | 2 | 12 | 2021 | \$ 250.00 |
| City Kingston | State PA | Zip Code (Plus 4) 18704 | | | | | |

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

| |
|-------------------|
| PAGE TOTAL |
| \$ 250.00 |

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: To: |

| Full Name of Contributing Committee | DATE | | | AMOUNT |
|-------------------------------------|--------------|--------------------------|------|---------|
| | MO | DAY | YEAR | |
| Mailing Address | | | | \$ 0.00 |
| City | State | Zip Code (Plus 4) | | |

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

| |
|-------------------|
| PAGE TOTAL |
| \$ 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 | Reporting Period |
| | From: To: |

| | | | DATE | AMOUNT |
|--|-------|-------------------|------------|-------------------|
| Full Name of Contributor | MO | DAY | YEAR | |
| Mailing Address | | | | \$ 0.00 |
| City | State | Zip Code (Plus 4) | | |
| Employer Name | | | Occupation | |
| Employer Mailing Address/Principal Place of Business | | City | State | Zip Code (Plus 4) |

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

| |
|-------------------|
| PAGE 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 | Reporting Period |
| | From: To: |

| | DATE | | | AMOUNT |
|---------------------|-------|-------------------|------|---------|
| Full Name | MO | DAY | YEAR | |
| Mailing Address | | | | \$ 0.00 |
| City | State | Zip Code (Plus 4) | | |
| Receipt Description | | | | |

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

| |
|-------------------|
| PAGE TOTAL |
| \$ 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 LUZERNE CO DEM COM | Reporting Period From: <u>1/1/2021</u> To: <u>3/29/2021</u> |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR | |
| TOTAL for the Reporting Period (1) | \$ 0.00 |
| 2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F) | |
| TOTAL for the Reporting Period (2) | \$ 0.00 |
| 3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G) | |
| TOTAL for the Reporting Period (3) | \$ 0.00 |
| TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.) | \$ 0.00 |

**SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OF \$50.01 TO \$250.00**

| | |
|--|-------------------------------------|
| Name of Filing Committee or Candidate | Reporting Period |
| | From: _____ To: _____ |

| | | | | DATE | AMOUNT |
|---|-------|-------------------|----|------|------------------------------|
| Full Name of Contributor | | | MO | DAY | YEAR |
| Mailing Address | | | | | |
| City | State | Zip Code (Plus 4) | | | \$ 0.00 |
| Description of Contribution: | | | | | |
| Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2. | | | | | PAGE TOTAL \$ 0.00 |

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

| | |
|--|-------------------------------------|
| Name of Filing Committee or Candidate | Reporting Period |
| | From: _____ To: _____ |

| | | | | DATE | | | AMOUNT |
|--|--------------|-------------------------|-------------|-------------------|-------------------------|------------------------------------|---------------------------|
| Full Name of Contributor | | | | MO | DAY | YEAR | |
| Mailing Address | | | | | | | \$ 0.00 |
| City | State | Zip Code(Plus 4) | | | | | |
| Employer of Contributor | | | | Occupation | | | |
| Employer Mailing Address/Principal Place of Business | | | City | State | Zip Code(Plus 4) | Description of Contribution | |
| Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3. | | | | | | | PAGE TOTAL 0.00 |

SCHEDULE III STATEMENT OF EXPENDITURES

| | |
|--|---|
| Name of Filing Committee or Candidate | Reporting Period |
| LUZERNE CO DEM COM | From <u>1/1/2021</u> To: <u>3/29/2021</u> |

| | | | | DATE | AMOUNT | | |
|---|-----------------|--------------------------------|---|-----------|------------|-------------|-----------|
| To Whom Paid Center City Printing | | | | MO | DAY | YEAR | |
| Mailing Address 119 Penn Ave | | | | 1 | 15 | 2021 | \$ 916.20 |
| City Scranton | State PA | Zip Code (Plus 4) 18503 | Description of Expenditure 1st District Postcards | | | | |
| To Whom Paid namecheap.com | | | | MO | DAY | YEAR | |
| Mailing Address 11400 W Olympic Blvd | | | | 1 | 15 | 2021 | \$ 15.00 |
| City Los Angeles | State CA | Zip Code (Plus 4) 90064 | Description of Expenditure Website | | | | |
| To Whom Paid namecheap.com | | | | MO | DAY | YEAR | |
| Mailing Address 11400 W Olympic Blvd | | | | 2 | 15 | 2021 | \$ 15.00 |
| City Los Angeles | State CA | Zip Code (Plus 4) 90064 | Description of Expenditure Website | | | | |
| To Whom Paid namecheap.com | | | | MO | DAY | YEAR | |
| Mailing Address 11400 W Olympic Blvd | | | | 3 | 15 | 2021 | \$ 15.00 |
| City Los Angeles | State CA | Zip Code (Plus 4) 90064 | Description of Expenditure Website | | | | |
| To Whom Paid ActBlue | | | | MO | DAY | YEAR | |
| Mailing Address PO Box 441146 | | | | 1 | 11 | 2021 | \$ 6.12 |
| City Somerville | State MA | Zip Code (Plus 4) 02144 | Description of Expenditure Credit Card Fees | | | | |

| | | | | | | |
|--|--------------------|-----------------------------------|--|------------|-------------|----------------------------------|
| To Whom Paid ActBlue | | | MO | DAY | YEAR | |
| Mailing Address PO Box 441146 | | | 2 | 9 | 2021 | |
| City Somerville | State MA | Zip Code (Plus 4) 02144 | Description of Expenditure Credit Card Fees | | | |
| To Whom Paid ActBlue | | | MO | DAY | YEAR | |
| Mailing Address PO Box 441146 | | | 3 | 9 | 2021 | |
| City Somerville | State MA | Zip Code (Plus 4) 02144 | Description of Expenditure Credit Card Fees | | | |
| To Whom Paid Our Lady of Fatima Parish | | | MO | DAY | YEAR | |
| Mailing Address 134 S. Washington St | | | 2 | 26 | 2021 | |
| City Wilkes Barre | State PA | Zip Code (Plus 4) 18701 | Description of Expenditure Donation | | | |
| To Whom Paid RAM Buildings | | | MO | DAY | YEAR | |
| Mailing Address PO Box 147 | | | 2 | 13 | 2021 | |
| City Bloomsburg | State PA | Zip Code (Plus 4) 17815 | Description of Expenditure Rent (2 months) | | | |
| To Whom Paid Jenis Walsh | | | MO | DAY | YEAR | |
| Mailing Address 349 High Street | | | 2 | 13 | 2021 | |
| City Wilkes Barre | State PA | Zip Code (Plus 4) 18702 | Description of Expenditure Postage Reimbursement | | | |
| Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. | | | | | | PAGE TOTAL \$ 2,901.46 |

