# **Campaign Finance Report**

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

Filer Identificat	ion	0000	100		-	Repor	+		CANDI	DATE	ſ	СОМ	<b>1ITTEE</b>		LOBI	BYIST	
Number :		8000:				Filed								•			
Name of Filing C	Committee,	, Candida	ate or L	obbyist:		FRIEN	)S 0	FNI	ICK MIC	COZZIE							
Street Address:	POST	OFFICE	BOX 23	34									_				
City:	CLIFT	ON HEIG	HTS					S	tate:	PA			Zip Co	<b>de:</b> 19	018		
TYPE OF REPORT	6TH TUESE PRE-PRIMA		1.					DAY MAR		POST- 3.			AMENDN REPORT		Yes	No	$\checkmark$
(place X to the right of	6TH TUESE PRE-ELECT		4.	2ND FRIDAY PRE- ELECTION 5.X 30 DAY ELECTION						POST-	6.		TERMIN/ REPORT		Yes	No	$\checkmark$
report type)	ANNUAL F	REPORT	7.	<b>Year</b> 2014					METHO				PAPER		$\checkmark$	DISKE	TTE
Name of Office Sought by Candidate:								D	ΑΤΕ Ο	F ELEC	TIO	N	District Number	Office Code	Par	ty Code	County Code
REPRESENTATIVE IN THE GENERAL ASSEMBLY									10	DAY	YE	AR	163	STH	REP		23
REPRESENTATI		GENER	AL ASS	EMDLI					11		4	2014		(SEE IN	STRUCTI	ONS FOR (	CODES)
Summary of		and	мо	DAY	YEAR	Ł		м	10	DAY	YE	AR	FC	R OFFIC	CE USE	ONLY	
Expenditures	s from:			9 16	2	014	Ю		10	2	0	2014					
A. Amount Bro	ught Forwa	ard From	1 Last R	eport				\$			90,5	31.24					
B. Total Monet	ary Contrib	outions A	And Rec	eipts (Fron	n Sche	dule I)		\$			1	90.72					
C. Total Funds	Available (	(Sum Of	Lines A	and B)				\$			90,7	21.96					
D. Total Expen	ditures (Fr	om Sche	edule II	I)				\$			26,9	79.01					
E. Ending Cash	Balance (	Subtract	Line D	From Line	C)			\$			63,74	42.95	-				
F. Value Of In-	Kind Contr	ibutions	Receiv	ed (From S	chedu	le II)		\$				0.00	-				
G. Unpaid Deb	ts And Obli	igations	(From S	Schedule IV	')			\$				0.00			•		
					AFF	IDAV	IT S	EC	TION								
PART I - If this is		-	-	-													
I swear (or affirm correct and compl		eport, inclu	uding the	e attached sc	hedules	s filed or	pape	er or	by electi	ronic me	dium,	are to t	the best o	f my knov	wledge	and beli	ef , true
Sworn to and subs	scribed befor day of	re me this		20							Si	gnature	e of Perso	n Submitt	ting Rep	ort	
							_						Prin	ted Name	•		
My Commission E	xpires	Signatur	e										Ema	il			
	M	10	D	AY	YR		_			Are	a Code	e	Daytin	e Teleph	one Nu	mber	
Part II- If this is	a report o	of a cand	lidate's	authorized	Comn	nittee, (	Candi	idat	e shall :	sign he	re.						
I swear (or affirm) No 320) as amendo		best of m	ıy knowle	edge and beli	ef this	politica	com	mitte	ee has n	ot violat	ed any	/ provis	ions of th	e act of Jı	une 3,1	937 (P.L	. 1333,
Sworn to and subso	cribed before day of	e me this		20								S	ignature (	of Candida	ate		
													Printe	d Name			
		gnature					_						<b>F</b>				
My Commission Exp	pires												Ema				
		мо	D	AY	YR		_			Area C	Code		D	aytime To	elephon	e Numb	er

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF NICK MICOZZIE	<u>9/16/201</u>	<u>4</u> To:	<u>10/20/2014</u>	
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 Reportin	g Period	(4)	\$	100.73
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			\$	100.73

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## 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 of	Reporting	Period					
			From:		То	:	
		I		DATE			AMOUNT
Full Name of Contributing Com	ımittee		мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)	)				
						Γ	PAGE TOTAL

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

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 Candidat	e			orting P	eriod				
	From: 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. \$ 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				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Commit	ttee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C on	Schedule I, Detail	ed Summary Pa	age, Sectio	n 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	Reporting Period	
	From:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

## 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 Cand	idate		Report	ing Perio	d			
FRIENDS OF NICK MICOZZIE			From:		<u>9/16/201</u>	<u>4</u> To:	: <u>10/20/2014</u>	
				D	ATE			AMOUNT
Full Name CITIZENS BANK				мо	DAY	YEAR		
Mailing Address 5221 BALTIM	_			\$	0.73			
City CLIFTON HEIGHTS	<b>State</b> PA	<b>Zip Code (</b> 19018	Plus 4)	9	30	2014	•	
Receipt Description								
Full Name NICHOLAS A. MICOZZIE				мо	DAY	YEAR		
Mailing Address 131 1/2 HILLI	DALE ROAD						\$	100.00
City LANSDOWNE	<b>State</b> PA	<b>Zip Code (</b> 19050	Plus 4)	10	18	2014	•	
Receipt Description ON STAR	REIMBURSEMENT	·						
Enter Grand Total of Part E on S	chadula I. Datailad	Summary Page	Section	л		[		PAGE TOTAL
	chedule 1, Detaileu	Summary Faye,	Section	7.			\$	100.73

## 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		
FRIENDS OF NICK MICOZZIE	From:	<u>9/16/2014</u> <b>то:</b>	<u>10/20/2014</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
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		\$	0.00

## SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

## VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate Re				g Period			
	From:						
				DATE		АМО	UNT
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address	Mailing Address					\$	0.00
City	State	Zip Code (Plus 4)	,				
Description of Contribution:							
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detai Section 2.				mary Pag	je,	PAGE	TOTAL
					4	6	0.00

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

Name of Filing Committee or Candidate						oorting P	eriod				
						From: To:					
							DATE			AMOUNT	
Full Name of Contributor						мо	DAY	YEAR			
Mailing Address									\$	0.00	
City	State		Zip Code(F	Plus 4)							
Employer of Contributor	Employer of Contributor						ion				
Employer Mailing Address/Principal Place of City State						Zip 4)	Code(Plus	Descri	ption o	f Contribution	

Enter Grand Total of Part G on Schedule II, I	n-Kind Contribu	tions Detaile	d	PAGE TOTAL
Summary Page, Section 3.				0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period				
FRIENDS OF NICK MICOZZIE			From	<u>9/1</u>	<u>5/2014</u>	То:	<u>10/20/2014</u>
				DATE			AMOUNT
To Whom Paid AOL				DAY	YEAR		
Mailing Address P.O. BOX 8800			9	17	2014	\$	14.95
CityBALTIMOREStateZip Code (Plus 4)MD21280			Description of Expenditure SECURITY				
To Whom Paid CLIFTON HEIGHTS POST OFFICE				DAY	YEAR		
Mailing Address 135 S. SPRINGFIELD ROAD			9	17	2014	\$	128.00
City CLIFTON HEIGHTS	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19018	Description of Expenditure CH PO PERMIT				
To Whom Paid VERIZON 50040421900002(299-0577			мо	DAY	YEAR		
Mailing Address P.O. BOX 25505			10	6	2014	\$	164.63
CityLEHIGH VALLEYStateZip Code (Plus 4)PA180025505			Description of Expenditure UTILITIES				
To Whom Paid CLIFTON HEIGHTS LIONS			мо	DAY	YEAR		
Mailing Address P.O. BOX 86			10	6	2014	\$	100.00
City CLIFTON HEIGHTS	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 9018	Description of Expenditure DONATION				
To Whom Paid FRIENDS OF KATE HARPER				DAY	YEAR		
Mailing Address P.O. BOX 510			10	8	2014	\$	200.00
City     SPRINGHIOUSE     State     Zip Code (Plus 4)       PA     19477			Description of Expenditure DONATION				

To Whom Paid FRIENDS OF JAMIE SANTORA			мо	DAY	YEAR			
Mailing Address 323 FRONT STREET			10	15	2014	\$	25,000.00	
CityMEDIAStateZip Code (Plus 4)PA19063			Description of Expenditure DONATION					
To Whom Paid VERIZON 610-626-1037				мо	DAY	YEAR		
Mailing Address P.O. BOX 28999			10	15	2014	\$	41.13	
CityLEHIGH VALLEYStateZip Code (Plus 4)PA189928000			Description of Expenditure UTILITIES					
To Whom Paid AOL				мо	DAY	YEAR		
Mailing Address P.O. BOX 8800			10	17	2014	\$	14.95	
City     BALTIMORE     State     Zip Code (Plus 4)       MD     21280			Description of Expenditure SECURITY					
To Whom Paid STINGERS		<u> </u>		мо	DAY	YEAR		
	PROVIDENCE SHOP	I PING CENTER		<b>мо</b> 10	<b>DAY</b> 6	<b>YEAR</b> 2014	\$	22.00
STINGERS	PROVIDENCE SHOP	PING CENTER State PA	Zip Code (Plus 4) 19018	10	6 otion of Exp	2014		22.00
STINGERS Mailing Address		State		10 Descrip	6 otion of Exp	2014		22.00
STINGERS Mailing Address City SECANE To Whom Paid		State PA		10 Descrip MEETIN	6 Dition of Exp	2014 penditure		22.00
STINGERS Mailing Address City SECANE To Whom Paid ROMARCO REST Mailing Address	URANT	State PA		10 Descrip MEETIN MO 10	6 htion of Exp IG DAY 6 htion of Exp	2014 penditure YEAR 2014	\$	
STINGERS Mailing Address City SECANE To Whom Paid ROMARCO REST Mailing Address	URANT 451 E. BALTIMOR P	State PA IKE State	19018 Zip Code (Plus 4)	10 Descrip MEETIN MO 10 Descrip	6 htion of Exp IG DAY 6 htion of Exp	2014 penditure YEAR 2014	\$	
STINGERS Mailing Address City SECANE To Whom Paid ROMARCO REST Mailing Address City CLIFTON To Whom Paid	URANT 451 E. BALTIMOR P	State PA IKE State	19018 Zip Code (Plus 4)	10 Descrip MEETIN MO 10 Descrip MEETIN	6 Stion of Exp IG DAY 6 Stion of Exp IG	2014 penditure YEAR 2014 penditure	\$	

To Whom Paid MOZY CORP.				мо	DAY	YEAR			
Mailing Address 505 1ST AVENUE SUITE 600				10	6	2014	\$	8	37.89
City SEATTLE State Zip Code (Plus 4)				Descrin	tion of Ex	onditure			
WA 98104				Description of Expenditure DATA STORAGE					
To Whom Paid STINGERS				мо	DAY	YEAR			
Mailing Address PROVIDENCE SHOPPING CENTER			10	6	2014	\$	4	17.00	
City SECANE		State	Zip Code (Plus 4)	Descrip	tion of Exp	, Denditure			
		РА	19018	MEETIN					
To Whom Paid AOL				мо	DAY	YEAR			
Mailing Address P.O. BOX 8800			10	6	2014	\$		7.99	
	RE	State	Zip Code (Plus 4)	Descrip	tion of Exi	, Denditure			
MD 21280				Description of Expenditure SECURITY					
To Whom Paid DAILY TIMES		I	1	мо	DAY	YEAR			
	MILDRED AVENUE		1	<b>мо</b> 10	<b>DAY</b> 6	<b>YEAR</b> 2014	\$	32	24.96
DAILY TIMES Mailing Address	MILDRED AVENUE	State	Zip Code (Plus 4)	10	6	2014		32	24.96
DAILY TIMES Mailing Address	MILDRED AVENUE	State PA	<b>Zip Code (Plus 4)</b> 19018	10	6 otion of Exp	2014		32	24.96
DAILY TIMES Mailing Address				10 Descrip	6 otion of Exp	2014		32	24.96
DAILY TIMES Mailing Address City PRIMOS To Whom Paid		РА		10 Descrip NEWSP	6 btion of Exp APER	2014 penditure			24.96
DAILY TIMES Mailing Address City PRIMOS To Whom Paid ANTHONYS REST Mailing Address	UARANT DREXEL SHOPPING	РА		10 Descrip NEWSP MO	6 otion of Exp APER DAY 6	2014 penditure YEAR 2014	\$		
DAILY TIMES Mailing Address City PRIMOS To Whom Paid ANTHONYS REST Mailing Address	UARANT DREXEL SHOPPING	PA	19018	10 Descrip NEWSP MO	6 etion of Exp APER DAY 6 etion of Exp	2014 penditure YEAR 2014	\$		
DAILY TIMES Mailing Address City PRIMOS To Whom Paid ANTHONYS REST Mailing Address	UARANT DREXEL SHOPPING HILL	PA CENTER State	19018 Zip Code (Plus 4)	10 Descrip NEWSP MO 10 Descrip	6 etion of Exp APER DAY 6 etion of Exp	2014 penditure YEAR 2014	\$		
DAILY TIMES Mailing Address City PRIMOS To Whom Paid ANTHONYS REST Mailing Address City DREXEL H To Whom Paid	UARANT DREXEL SHOPPING HILL	PA CENTER State PA	19018 Zip Code (Plus 4)	10 Descrip NEWSP MO 10 Descrip MEETIN	6 etion of Exp APER DAY 6 etion of Exp NG	2014 penditure YEAR 2014 penditure	\$	1	

To Whom Paid ON STAR				DAY	YEAR			
Mailing Address PO BOX 15653				6	2014	\$	54.55	
City WILLIMINGTON State Zip Code (Plus 4)			Description of Expenditure					
DE 198865653				UTILITIES				
To Whom Paid ON STAR				DAY	YEAR			
Mailing Address PO BOX 15653				6	2014	\$	29.90	
City WILLIMINGTON State Zip Code (Plus 4)			Descrip	l Dtion of Exp	l penditure			
DE 198865653			SUBSCRIPTION AND PHONE					
To Whom Paid ON STAR				DAY	YEAR			
Mailing Address PO BOX 15653			10	6	2014	\$	29.90	
CityWILLIMINGTONStateZip Code (Plus 4)DE198865653				Description of Expenditure UTILITIES				
<b>To Whom Paid</b> ON STAR			мо	DAY	YEAR			
Mailing Address PO BOX 15653			10	6	2014	\$	48.54	
City WILLIMINGTON	State	Zip Code (Plus 4)	Descrip	tion of Exp	penditure			
	DE	198865653	UTILITIES					
<b>To Whom Paid</b> ON STAR			мо	DAY	YEAR			
Mailing Address PO BOX 15653			10	6	2014	\$	29.90	
City WILLIMINGTON State Zip Code (Plus 4)			Description of Expenditure					
	DE	198865653	UTILIT	IES				
<b>To Whom Paid</b> CHASE BANK			мо	DAY	YEAR			
Mailing Address PO BOX 15653			10	6	2014	\$	7.14	
City WILLMINGTON	State	Zip Code (Plus 4)	Descrip	i tion of Exp	, penditure	1		
DE 198865653			CREDIT	F AND INTE	EREST RE	FUND		
Fator Crowd Tatal of Farmers''			-				PAGE TOTAL	
Enter Grand Total of Expenditure	s on Page 1, Re	eport Cover Page, Item D	•			\$	26,979.01	