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	80001	109				port ed B		CANI	DID	ATE		COMN	1ITTEE	✓	LOB	BYIST		
Name of Filing C	Committee	e, Candida	ate or Lo	obbyist:		MIC	OZZ	ZIE, N	ICHOLA	AS I	FRIEN	IDS (OF						
Street Address:	РО В	OX 234																	
City:	CLIFT	TON HEIG	HTS						State:	ı	PA			Zip Cod	ie: 19	018			
TYPE OF REPORT	6TH TUES PRE-PRIM		1. X	2ND FRID PRIMARY	AY PRE	-	2.	30 DA		PC	OST-	3.		AMENDMENT REPORT?		Yes	N	O	\
(place X to the right of	6TH TUES PRE-ELEC		4.	2ND FRID ELECTION		E-	5.	30 DA		PC	OST-	6.		TERMINA REPORT?		Yes	N	0	\
report type)	ANNUAL	REPORT	7.	Year 200	0				NG METI CHECK					PAPER		\	DISK	ETTE	
Name of Office S	- Sought by	Candidat	e:	-				-	DATE	OF	ELE	СТІС	N	District Number	Office Code	Pa	rty Code	Cour	
REPRESENTATI	VE IN TH	IF GENER	ΔΙ ΔSS	EMRI Y					МО	ı	DAY	YI	AR		STH	REI)	23	
KEI KESENI/KII	V	IL GLIVER	712 7133	LITEL					1	.1		7	2000		(SEE IN	STRUCTI	ONS FOR	CODES)
Summary of	•	and	МО	DAY	YEAF	2			МО	l	DAY	YI	EAR	FO	R OFFIC	E USE	ONLY		
Expenditures	Trom:			1	1	1	Т	0		2	1	L4	2000						
A. Amount Bro	ught Forv	vard From	ı Last R	eport				\$				47,4	422.03						
B. Total Moneta	ary Contr	ibutions A	And Rec	eipts (Fro	m Sche	dule	I)	\$					32.00						
C. Total Funds Available (Sum Of Lines A and B) \$ 47,454.03																			
D. Total Expend	ditures (F	rom Sche	dule II	[)				\$				2,7	779.52						
E. Ending Cash	Balance	(Subtract	Line D	From Line	e C)			\$				44,6	74.51						
F. Value Of In-	Kind Cont	ributions	Receive	ed (From	Schedu	le II	()	\$					0.00						
G. Unpaid Debt	s And Ob	ligations	(From S	chedule 1	(V)			\$					0.00						
					AFF	-ID/	٩VI	T SE	CTIO	V									
PART I - If this is		-	•	_						-	•								
I swear (or affirm) correct and comple		eport, inclu	uding the	attached s	chedule	s file	d on	paper	or by ele	ctro	onic me	edium	, are to t	he best o	f my knov	vledge	and bel	ief , tr	ue
Sworn to and subs	cribed befo	ore me this		20						-		9	Signature	of Perso	n Submitt	ing Re	port		
	_	Signatur	'A					- -		-				Prin	ted Name	1			-
My Commission Ex	cpires	Signatui	-							_				Ema	il				-
	,	мо	D/	ΑY	YR			_			Are	ea Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report	of a cand	idate's	authorize	d Comr	nitte	e, C	andid	ate sha	II si	ign he	ere.							
I swear (or affirm) No 320) as amende		e best of m	y knowle	edge and be	elief this	s polit	tical	comm	ittee has	not	t violat	ted an	y provisi	ions of the	e act of Ju	ıne 3,1	937 (P.	L. 133	3,
Sworn to and subsc		re me this								•			Si	ignature o	of Candida	ate			-
	day of —							_		-				Printe	d Name				-
		Signature						_		_									_
My Commission Exp	ires							_						Ema	ii 				_
	_	МО	D	AY	YF	₹		-		-	Area	Code		Da	aytime To	elephoi	ne Num	ber	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -			
Name of Filing Committee or Candidate	Reporting Period		
MICOZZIE, NICHOLAS FRIENDS OF	From:	To:	2/14/2000
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)	\$	32.00
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		\$	32.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
	•	·			•	•	$\overline{}$	DACE 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)	1					

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			Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary 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.)

Name of Filing Committee or Candidate			Rep	orting Pe	riod			
			Fror	n:		To) :	
				D	ATE		А	MOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupa	tion		•	
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Coo	de (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary Page	Section	on 3.			\$	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			Report	ing Perio	od			
MICOZZIE, NICHOLAS FRIENDS OF			From:			To:	-	2/14/2000
				D	ATE		Al	MOUNT
Full Name MELLON BANK				мо	DAY	YEAR		
Mailing Address							\$	32.00
City	State	Zip Code (Plus 4)	•				
Receipt Description INTEREST ON	CHECKING ACCOUN	NT						
Enter Grand Total of Part E on Sched	ule T. Detailed Sur	mmary Page	Section	4		ſ	P/	AGE TOTAL
The Grand Poter of Fare E on School	are 1, Detailed Sur	iiiiai y i ugc,	Section				\$	32.00

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		
MICOZZIE, NICHOLAS FRIENDS OF	From:	To:	<u>2/14/2000</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 Candid	ate		Reporting	g Period			
			From:			То:	
				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 S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	ле Г		PAGE TOTAL
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	,		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:	То:

						DATE		4	AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus 4)					
Employer of Contributor					Occupa	tion		l	
Employer Mailing Address/P Business	rincipal Place of	City	Stat	•	Zip 4)	Code(Plus	Descri	ption of C	ontribution
Enter Grand Total of Par Summary Page, Section		, In-Kind	Contributions I	etail	ed			ı	PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Can	didate		Reporti	ng Period			
MICOZZIE, NICHOLAS FRIENDS	OF		From			То:	2/14/2000
				DATE			AMOUNT
To Whom Paid ARCHBISHOP PRENDERGAST			мо	DAY	YEAR		
Mailing Address 401 NORTH L	ANSDOWNE		2 3 2000 \$				
State Zip Code (Plus 4) 19026			Descrip	otion of Exp	penditure		
To Whom Paid KATHY SPINELLI			МО	DAY	YEAR		
Mailing Address 905 BELMON	ΓAVENUE		2	4	2000	\$	32.92
City CLIFTON HEIGNTS	State PA	Zip Code (Plus 4) 19018	Descrip	otion of Exp	penditure		
To Whom Paid COLLEEN C OCONNOR			МО	DAY	YEAR		
Mailing Address 684 OLD SCH	OOLHOUSE LN		2	18	2000	\$	135.00
City SPRINGFIELD	State PA	Zip Code (Plus 4) 19044	1	otion of Exp			
To Whom Paid TAVERN ON THE HILL			МО	DAY	YEAR		
Mailing Address 109 HOWARD	STREET		1	31	2000	\$	195.00

To Whom Paid CLIFTON HEIGHTS POST OFFICE Mailing Address SPRINGFIELD ROAD DAY YEAR 2 2 2000 \$	
Mailing Address CDDINICELELD DOAD 2 2 2000	
SPRINGFIELD ROAD 2 2 2 2000 \$	330.00
City CLIFTON HEIGHTS State Zip Code (Plus 4) Description of Expenditure PA 19018	

Zip Code (Plus 4)

Description of Expenditure

State

City

ENOLD

To Whom Paid FRIENDS HELPING BRIAN			МО	DAY	YEAR			
Mailing Address 47 EDGEMONT AVE				8	2000	\$	50.00	
City CLIFTON HEIGHTS	State PA	Zip Code (Plus 4) 19018	Description of Expenditure					
To Whom Paid MELLON BANKI CASH			мо	DAY	YEAR			
Mailing Address						\$	100.00	
City	State Zip Code (Plus 4)			Description of Expenditure CAMPAIGN				
To Whom Paid KATHY SPINELLI			МО	DAY	YEAR			
Mailing Address 905 BELMON	T AVE		1	18	2000	\$	119.91	
City CLIFTON HEIGHTS	State PA	Zip Code (Plus 4) 19018	Description of Expenditure					
To Whom Paid GM GOLD CARD	<u> </u>	<u> </u>	мо	DAY	YEAR			
		,	мо	DAY 5	YEAR 2000	\$	134.00	
GM GOLD CARD	State MD	Zip Code (Plus 4) 21288	1	5 otion of Exp	2000	\$	134.00	
GM GOLD CARD Mailing Address PO BOX 8800	State		1 Descrip	5 otion of Exp	2000	\$	134.00	
GM GOLD CARD Mailing Address PO BOX 8800 City BALTIMORE To Whom Paid	State MD		1 Descrip CARDS	5 Otion of Exp	2000 penditure	\$	134.00 22.05	
GM GOLD CARD Mailing Address PO BOX 8800 City BALTIMORE To Whom Paid GM GOLD CARD	State MD		Description CARDS MO 1	DAY 5 otion of Exp	2000 penditure YEAR 2000			
GM GOLD CARD Mailing Address PO BOX 8800 City BALTIMORE To Whom Paid GM GOLD CARD Mailing Address PO BOX 8800	State MD State	21288 Zip Code (Plus 4)	Descrip CARDS MO 1 Descrip	DAY 5 otion of Exp	2000 penditure YEAR 2000			
Mailing Address PO BOX 8800 City BALTIMORE To Whom Paid GM GOLD CARD Mailing Address PO BOX 8800 City BALTIMORE	State MD State MD	21288 Zip Code (Plus 4)	Description COMPU	DAY 5 btion of Exp TER	2000 Penditure YEAR 2000 Penditure			

						FAG	L 13	
To Whom Paid			мо	DAY	YEAR			
TRAVELERS BANK								
Mailing Address PO BOX 6124			1	7	2000	\$	123.00	
City CAROL STREAM	State	Zip Code (Plus 4)	Descrip	tion of Exp	penditure			
	IL	60197	MEETIN	MEETINGS CAMPAIGN				
To Whom Paid TRAVELERS BANK			мо	DAY	YEAR			
Mailing Address PO BOX 6124			1	7	2000	\$	59.99	
City CAROL STREAM	State	Zip Code (Plus 4)	Description of Expenditure					
	IL	60197						
To Whom Paid TRAVELERS BANK			МО	DAY	YEAR			
Mailing Address PO BOX 6124			1	7	2000	\$	105.00	
City CAROL STREAM	State	Zip Code (Plus 4)	Descrip	tion of Exp	penditure			
	IL	60197						
To Whom Paid COMMITTEE TO ELECT MACKERET	TH .		МО	DAY	YEAR			
Mailing Address 21 CHESTER PIKE			1	13	2000	\$	1,000.00	
City RIDLEY PARK	State	Zip Code (Plus 4)	Description of Expenditure					
PA 19018			BEVERLEY MACKERETHS CAMPAIGN					
To Whom Paid MONSIGNAR BONNER HOCKEY			МО	DAY	YEAR			
ailing Address 29 HAMSON AVENUE			1	14	2000	\$	75.00	
City CLIFTON HEIGHTS	State	Zip Code (Plus 4)	Descrip	tion of Exp	penditure			
	PA	19018						
To Whom Paid BOY SCOUT III			МО	DAY	YEAR			
Mailing Address 360 NORTH OAK AVE			2	1	2000	\$	100.00	
City CLIFTON HEIGHTS	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	19018						

City CLIFTON HEIGHTS State PA 19018 PAGE TOTAL PAGE TOTAL							
City CLIFTON HEIGHTS State Zip Code (Plus 4) Description of Expenditure PA 19018 PAGE TOTAL Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.		SOCIATION		мо	DAY	YEAR	
PA 19018 PA 19018 PAGE TOTAL Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.	Mailing Address PO BOX 21	7		2	1	2000	\$ 75.00
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.	City CLIFTON HEIGHTS			Descrip	otion of Exp	penditure	
	Enter Grand Total of Expend	ditures on Page 1, Re	port Cover Page, Item D.				\$ PAGE TOTAL 2,779.52