

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 : 8000109		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: MICOZZIE, NICHOLAS FRIENDS OF											
Street Address: PO BOX 234											
City: CLIFTON HEIGHTS					State: PA		Zip Code: 19018-0000				
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY PRIMARY	POST-	3. X	AMENDMENT REPORT?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6.	TERMINATION REPORT?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2016	FILING METHOD () CHECK ONE			PAPER <input checked="" type="checkbox"/>	DISKETTE <input type="checkbox"/>			
Name of Office Sought by Candidate:					DATE OF ELECTION			District Number	Office Code	Party Code	County Code
					MO	DAY	YEAR	163	REP	23	
					11	8	2016	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		4	12	2016		5	16	2016			
A. Amount Brought Forward From Last Report					\$ 37,546.27						
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 40.89						
C. Total Funds Available (Sum Of Lines A and B)					\$ 37,587.16						
D. Total Expenditures (From Schedule III)					\$ 1,527.21						
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 36,059.95						
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 by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

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 of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
MICOZZIE, NICHOLAS FRIENDS OF	From: <u>4/12/2016</u> To: <u>5/16/2016</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)	\$ 0.00
TOTAL for the Reporting 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 Period (3)	\$ 0.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 40.89

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.)	\$ 40.89
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

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	Reporting Period
	From: To:

DATE			AMOUNT
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Full Name of Contributor			MO	DAY	YEAR	\$0.00
Mailing Address						
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	Reporting Period	
	From:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
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	\$ 0.00
Mailing Address							
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 MICOZZIE, NICHOLAS FRIENDS OF	Reporting Period From: <u>4/12/2016</u> To: <u>5/16/2016</u>
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				DATE	AMOUNT		
Full Name Nicholas Micozzie				MO	DAY	YEAR	\$ 9.39
Mailing Address 131 1/2 Hilldale Road				5	2	2016	
City Lansdowne	State PA	Zip Code (Plus 4) 19050					
Receipt Description Reimbursement (Stingers)							

Full Name Nicholas Micozzie				MO	DAY	YEAR	\$ 31.50
Mailing Address 131 1/2 Hilldale road				5	2	2016	
City Lansdowne	State PA	Zip Code (Plus 4) 19050					
Receipt Description Reimbursement (Anthonys)							

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

PAGE TOTAL
\$ 40.89

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: <u>4/12/2016</u> To: <u>5/16/2016</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 RECIEVED - 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:
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
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 III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
MICOZZIE, NICHOLAS FRIENDS OF	From <u>4/12/2016</u> To: <u>5/16/2016</u>

DATE				AMOUNT		
To Whom Paid Citizens Bank			MO	DAY	YEAR	\$ 14.95
Mailing Address Baltimore Ave. and Delamar Rd.			4	12	2016	
City Clifton Heights	State PA	Zip Code (Plus 4) 19018	Description of Expenditure On Line Monthly service Fee			
To Whom Paid Aol Services			MO	DAY	YEAR	\$ 10.99
Mailing Address 22000 AOL Way			5	4	2016	
City Dulles	State TN	Zip Code (Plus 4) 20166	Description of Expenditure Aol Services			
To Whom Paid Verizon			MO	DAY	YEAR	\$ 33.56
Mailing Address PO Box 28000			4	29	2016	
City Lehigh Valley	State PA	Zip Code (Plus 4) 18002-8000	Description of Expenditure 610-626-1037			
To Whom Paid Verizon			MO	DAY	YEAR	\$ 113.09
Mailing Address P.O. Box 25505			5	4	2016	
City Lehigh Valley	State PA	Zip Code (Plus 4) 18002	Description of Expenditure 610-299-0577			
To Whom Paid Springfield Dinner			MO	DAY	YEAR	\$ 31.49
Mailing Address Baltimore Pike and Leamy Ave.			4	25	2016	
City Springfield	State PA	Zip Code (Plus 4) 19064	Description of Expenditure Meeting			

To Whom Paid Philadelphia Media Network			MO	DAY	YEAR	\$ 42.25
Mailing Address P.O. 13942			4	21	2016	
City Philadelphia	State PA	Zip Code (Plus 4) 19101	Description of Expenditure Subscription			
To Whom Paid Andrew Andreozzi			MO	DAY	YEAR	\$ 150.00
Mailing Address 5360 Delmar Drive			4	21	2016	
City Clifton Heights	State PA	Zip Code (Plus 4) 19018	Description of Expenditure Photography			
To Whom Paid Stingers			MO	DAY	YEAR	\$ 9.39
Mailing Address 925 Providence Road			4	25	2016	
City Secane	State PA	Zip Code (Plus 4) 19018	Description of Expenditure Meeting			
To Whom Paid Anthonys Restorante			MO	DAY	YEAR	\$ 31.50
Mailing Address 4990 State Road			4	25	2016	
City Drexel Hill	State PA	Zip Code (Plus 4) 19026	Description of Expenditure Meeting			
To Whom Paid Friends of Dave White			MO	DAY	YEAR	\$ 500.00
Mailing Address 1005 Kedron Avenue			4	13	2016	
City Morton	State PA	Zip Code (Plus 4) 19070	Description of Expenditure Donation			
To Whom Paid Delaware County Finance Com.			MO	DAY	YEAR	\$ 400.00
Mailing Address 323 West Front Street			4	12	2016	
City Media	State PA	Zip Code (Plus 4) 19063	Description of Expenditure Donation			

To Whom Paid Amazon.com			MO	DAY	YEAR	
Mailing Address Nmico@aol.com			4	25	2016	
City Unkonwn	State PA	Zip Code (Plus 4) 19018	Description of Expenditure Supplies			

To Whom Paid Philadelphia Media Network			MO	DAY	YEAR	
Mailing Address P.O. 13942			5	11	2016	
City Philadelphia	State PA	Zip Code (Plus 4) 19101	Description of Expenditure Subscription			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 1,527.21

