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	.09				Repo Filed		:	CA	NDII	DATE		COMN	1ITTEE	✓	LOBI	BYIST		
Name of Filing C	ommittee,	Candida	te or Lo	bbyis	t:		4ICO	ZZIE	, N	ICHO	LAS	FRIEN	NDS	OF						
Street Address:	PO BO	X 234																		
City:	CLIFTO	N HEIG	HTS							State	e:	PA			Zip Cod	le: 19	018-0	000		
TYPE OF REPORT	6TH TUESDA PRE-PRIMAR		1.	2ND F PRIMA	RIDAY ARY	PRE-	2.		0 DA RIMA		Р	OST-	3.		AMENDMENT REPORT?		Yes	N	lo	\
(place X to the right of	6TH TUESDA PRE-ELECTI		4.	2ND F ELECT		PRE-	- 5.		0 DA LECT		Р	OST-	6.		TERMINATION REPORT?		Yes	٨	lo	/
report type)	ANNUAL R	EPORT	7. X	Year	2016					IG ME		_			PAPER		√	DISK	ETTE	
Name of Office S	ought by C	andidate	e:							DAT	E O	F ELE	CTIC	ON	District Number	Office Code	Par	ty Cod	e Cou	
										МО		DAY	Y	EAR	163		REP)	23	
											11		8	2016		(SEE INS	TRUCTI	ONS FO	R CODES	6)
Summary of		and	МО	DA	Y	YEAR				МО		DAY	Y	EAR	FO	R OFFIC	E USE	ONLY	′	
Expenditures	Trom:		1	.1	29	20	16	то)		12		31	2016						
A. Amount Bro	ught Forwa	rd From	Last R	eport					\$				28,	801.77						
B. Total Moneta	ary Contribu	utions A	nd Rec	eipts (From	Sched	lule I)	\$					0.00						
C. Total Funds Available (Sum Of Lines A and B)								\$				28,	801.77							
D. Total Expenditures (From Schedule III)							\$				3,	008.54								
E. Ending Cash	Balance (S	ubtract	Line D	From I	Line C)			\$				25,	793.23						
F. Value Of In-	Kind Contri	butions	Receive	ed (Fro	om Sc	hedule	e II)		\$					0.00						
G. Unpaid Debt	s And Oblig	jations (From S	chedu	ile IV)	1			\$					0.00						
						AFFI	DAV	/IT	SE	CTIC	NC									
PART I - If this is		-	•		_									_						
I swear (or affirm) correct and comple		ort, inclu	aing the	attacn	ea scn	eaules	Tilea o	оп ра	per o	ог ву е	electr	onic me	eaium	i, are to t	ne best o	r my knov	rieage	and be	eller , tr	ue
Sworn to and subs	cribed before day of	me this		20							•		:	Signature	of Perso	n Submitt	ing Rep	ort		
	_	Signature	e	•				_							Prin	ted Name				
My Commission Ex	rpires —														Emai	il				
	МС)	DA	Υ		YR						Are	ea Co	de	Daytim	e Teleph	one Nu	mber		ᆜ
Part II- If this is	a report of	f a candi	date's	authoi	rized (Commi	ittee,	Can	dida	ate sl	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende		est of my	y knowle	dge an	d belie	f this p	politica	al co	mmi	ittee h	as no	ot viola	ted a	ny provisi	ions of the	e act of Ju	ine 3,1	937 (P	.L. 133	3,
Sworn to and subsc	ribed before of	me this		20										Si	ignature o	of Candida	te			_
								_							Printe	d Name				-
	_	nature													Ema	il				_
My Commission Exp	ires																			_
		мо	D#	lΥ		YR						Area	Code		Da	ytime Te	lephor	e Num	ber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
MICOZZIE, NICHOLAS FRIENDS OF	From:	11/29/201	<u>6</u> То:	12/31/2016
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)	\$	0.00
			1	
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			\$	0.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize only with an aggregate valu							
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		-			DATE			AMOUNT
Full Name of Contribution	ng Committee			МО	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	

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 Candid	ate		Reporting Period From: To:					
					DATE		AN	4OUNT
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 Candi	date		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary 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 of	r Candidate		Report	ting Perio	od		
			From:			То:	
				D	ATE		AMOUNT
Full Name				мо	DAY	YEAR	
Mailing Address							\$ 0.0
City	State	Zip Code (Plus 4)				
Receipt Description	·	·					
Enter Grand Total of Part E	on Schedule I. Detailer	d Summary Page	Section	4			PAGE TOTAL
Linter Grand Total of Part L	on Schedule 1, Detailed	i Summary Fage,	Section	7.			\$ 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	Reporting Per	iod							
MICOZZIE, NICHOLAS FRIENDS OF	From:	<u>11/29/2016</u> To:	<u>12/31/2016</u>						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	R							
TOTAL for the Reporting Pe	eriod (1)	\$	0.00						
. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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	late		Reportin	g Period			
			From:			To:	
				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	Schedule II, In-Kir	nd Contributions Deta	iled Sum	ımary Pag	ge,		PAGE TOTAL
Section 2.						\$	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			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus	4)					
Employer of Contributor					Occupa	ation			
Employer Mailing Address/Principal Plad Business	ce of	City	Sta	ite	Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, I	n-Kind	Contributions	Deta	ailed				PAGE TOTAL
Summary Page, Section 3.									0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Can	didate		Reporti	ng Period				
MICOZZIE, NICHOLAS FRIENDS	OF		From	11/29	9/2016	То:	12/31/2016	
				DATE				
To Whom Paid Lamb Tavern			МО	DAY	YEAR			
Mailing Address 865 W. Spring	gfield Rd		12	1	2016	\$ \$	83.00	
City Springfield	PA 19064			otion of Exp	penditure			
To Whom Paid Red Iron Restaurant			МО	DAY	YEAR			
Mailing Address 650 Baltimore Pike			12	1	2016	\$	26.20	
City Springfield	State PA	Zip Code (Plus 4) 19064	Descrip Meeting	otion of Exp	penditure			
To Whom Paid Bricco Restaurant			мо	DAY	YEAR			
Mailing Address 31 S. 3rd Stre	eet		12	1	2016	\$	420.27	
City Harrisburg	State PA	Zip Code (Plus 4) 17101	Descrip Meeting	otion of Exp	penditure			
To Whom Paid Hotel Crown Plaza			МО	DAY	YEAR			
Mailing Address 3rd Street			12	1	2016	\$	214.70	
City Harrisburg	State PA	Zip Code (Plus 4) 17101	Descrip Meeting	otion of Exp	enditure			

Hotel Crown Plaza			МО	DAY	YEAR		
Mailing Address 3rd Street			12	1	2016	\$	214.70
City Harrisburg	State PA	Zip Code (Plus 4) 17101	Descrip Meeting				
To Whom Paid Aol			МО	DAY	YEAR		
Mailing Address Internet 131 1/2 Hilldale Road		12	1	2016	\$	22.97	
City Lansdowne	State PA	Zip Code (Plus 4) 19050	Description of Expenditure Internet Services				
	,	-					

To Whom Paid Lamb Tavern	мо	DAY	YEAR				
Mailing Address 865 W. Springfield Rd			12	2016	\$		35.00
City Springfield State PA	Zip Code (Plus 4) 19064	Descrip Meeting	otion of Exp	penditure			
To Whom Paid Delco Veteran Memorial Banquet			DAY	YEAR			
Mailing Address 4599 West Chester Pike			1	2016	\$		1,500.00
City Newtown Square PA	Zip Code (Plus 4) 19173	1	otion of Exp of Honor Ba		ckets		
To Whom Paid Bricco Restauraant		МО	DAY	YEAR			
Mailing Address 31 South 3rd Street			1	2016	\$		68.54
City Harrisburg State PA	Zip Code (Plus 4) 17101	Description of Expenditure Meeting					
To Whom Paid							
Springfield Diner		МО	DAY	YEAR			
Springfield Diner Mailing Address 720 Baltimore Pike		MO	1	YEAR 2016	\$		12.08
Molling Address	Zip Code (Plus 4) 19064	12	1 otion of Exp	2016	\$		12.08
Mailing Address 720 Baltimore Pike City Springfield State		12 Descrip	1 otion of Exp	2016	\$		12.08
Mailing Address 720 Baltimore Pike City Springfield State PA To Whom Paid		12 Descrip Meeting	1 Ition of Exp	2016 penditure	\$		12.08
Mailing Address 720 Baltimore Pike City Springfield State PA To Whom Paid Columbus Club		Descrip Meeting MO 11 Descrip	1 tion of Exp	2016 Penditure YEAR 2016 Penditure			
Mailing Address 720 Baltimore Pike City Springfield State PA To Whom Paid Columbus Club Mailing Address 309 South Springfield Road City Clifton Heights State	19064 Zip Code (Plus 4)	Descrip Meeting MO 11 Descrip	DAY 30	2016 Penditure YEAR 2016 Penditure			
Mailing Address 720 Baltimore Pike City Springfield State PA To Whom Paid Columbus Club Mailing Address 309 South Springfield Road City Clifton Heights State PA To Whom Paid	19064 Zip Code (Plus 4)	Descrip Meeting MO 11 Descrip Columb	DAY 30 btion of Expus Club Do	2016 YEAR 2016 Denditure conation			

To Whom Paid						
Anthonys Restaurant	мо	DAY	YEAR			
Mailing Address 4990 State Road	12	29	2016	\$		82.00
CityLansdowneStateZip Code (PlusPA19050	Descrip	Description of Expenditure Meeting				
To Whom Paid Verizon	мо	DAY	YEAR			
Mailing Address PO Box 25505	12	29	2016	\$		113.11
CityLehigh ValleyStateZip Code (PlusPA18002	Descri	Description of Expenditure Utilities				
To Whom Paid Verizon	мо	DAY	YEAR			
Mailing Address PO Box 25505	12	1	2016	\$		113.09
	4)	Description of Expenditure Utilities				
CityLehigh ValleyStateZip Code (PlusPA18002	Descri		enaiture			
Lenigh valley	Descri		YEAR			
To Whom Paid	Utilities	5 		\$		73.66
To Whom Paid Tecca Restaurant	Utilities MO 12	DAY 29 ption of Exp	YEAR 2016	\$		73.66
To Whom Paid Tecca Restaurant Mailing Address Rte. 252 City Newtown Square State Zip Code (Plus	MO 12 4) Descri	DAY 29 ption of Exp	YEAR 2016	\$		73.66
To Whom Paid Tecca Restaurant Mailing Address Rte. 252 City Newtown Square State PA 19073 To Whom Paid	MO 12 4) Description Meetin	DAY 29 ption of Exp	YEAR 2016 Denditure	\$		73.66
To Whom Paid Tecca Restaurant Mailing Address Rte. 252 City Newtown Square State PA 19073 To Whom Paid Citizens Bank	MO 12 4) Description Meetin MO 12	DAY 29 ption of Exp	YEAR 2016 Penditure YEAR 2016	\$		
To Whom Paid Tecca Restaurant Mailing Address Rte. 252 City Newtown Square State PA 19073 To Whom Paid Citizens Bank Mailing Address Baltimore Pike and Delamar Road City Clifton Heights State Zip Code (Plus 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	MO 12 4) Description MO 12 4) Description MO 12 4) Description MO	DAY 29 ption of Exp 9 DAY 30	YEAR 2016 Penditure YEAR 2016	\$		
To Whom Paid Tecca Restaurant Mailing Address Rte. 252 City Newtown Square State PA 19073 To Whom Paid Citizens Bank Mailing Address Baltimore Pike and Delamar Road City Clifton Heights State PA 19018 To Whom Paid	MO 12 4) Description Mo 12 4) Description Mo 12 4) Description Mo 12	DAY 29 DAY DAY 30 ption of Exp	YEAR 2016 Penditure 2016 Penditure	\$		

To Whom Paid Citizens Bank			мо	DAY	YEAR	
Mailing Address Baltimore Pk. and Delmar Road		12	31	2016	\$ 3.00	
City Clifton Heights	State PA	Zip Code (Plus 4) 19018	Descrip Fee	otion of Exp	penditure	
Enter Grand Total of Expend	litures on Page 1, Re	port Cover Page, Item D.				\$ PAGE TOTAL 3,008.54