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 201	60341			Rep File			CAND	IDATE		СОМ	ITTEE	✓	LOBI	BYIST		
Name of Filing C	Committee, Candi	date or L	obbyist:		NICH	HOL	S FOR	R PA					_				
Street Address:	PO BOX 399	8,2900 G	RAYS FERRY	AVE													
City:	PHILADELPH	IA						State:	PA			Zip Cod	ie: 19	9146			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY I PRIMARY	PRE-	. 2	2.	30 DA PRIMA		POST-	3. X		AMENDM REPORT?		Yes	No		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- 5	5.	30 DA ELECT		POST-	6.		TERMINA REPORT?		Yes	No	•	/
report type)	ANNUAL REPOR	7.	Year 2017					IG METH CHECK (PAPER		/	DISKE	TTE	
Name of Office S	Sought by Candid	ate:	•					DATE (OF ELE	CTIC	N	District Number	Office Code	Par	ty Code	Coun	
								МО	DAY	YI	EAR	11020.	1000	DEN	1		
								1:	1	7	2017		(SEE IN	STRUCTI	ONS FOR C	ODES)	1
	Receipts and	МО	DAY YI	EAR				МО	DAY	Y	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	o ii oiii.		5 2	20)17	Т	0	(6	5	2017						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			10,	152.47						
B. Total Moneta	ary Contributions	And Rec	eipts (From S	che	dule	ı)	\$			43,	275.00						
C. Total Funds	Available (Sum C	of Lines A	and B)				\$			53,	427.47						
D. Total Expend	ditures (From Sc	hedule II	I)				\$			51,7	799.35						
E. Ending Cash	Balance (Subtra	ct Line D	From Line C)				\$			1,6	28.12						
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sche	edul	e II	()	\$			1,6	511.48						
G. Unpaid Debt	s And Obligation	s (From S	Schedule IV)				\$			79,0	00.00			1			
			Α	\FF	IDA	۱۷۲	T SE	CTION									
PART I - If this is			=						- 1		_						
I swear (or affirm) correct and comple) that this report, in ete.	cluding the	attached sched	dules	filed	d on	paper o	or by elec	tronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , tru	ıe.
Sworn to and subs	cribed before me th	is	20							S	Signature	of Perso	n Submit	ting Rep	ort		_
	Signat	ure	-				- -					Prin	ted Name	e			-
My Commission Ex	_											Emai	il				-
	мо	D	AY	YR					Ar	ea Cod	ie	Daytim	e Telepi	none Nu	mber		
Part II- If this is	a report of a car	ndidate's	authorized Co	omm	itte	e, C	andida	ate shal	l sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and belief	this	politi	tical	commi	ittee has	not viola	ted ar	ıy provis	ions of the	e act of J	une 3,1	937 (P.L	. 1333	3,
Sworn to and subsc		5									s	ignature o	of Candid	ate			-
	day of						-					Drints	d Name				_
	Signature						-		_			Frinte	u Name				_
My Commission Exp	_											Ema	il				-
	МО	D	AY	YR			•		Area	Code		Da	aytime T	elephon	e Numb	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		_
NICHOLS FOR PA	From:	5/2/201	<u>7</u> To:	6/5/2017
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	Period	(1)	\$	250.00
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)			\$	1,025.00
TOTAL for the Reporting	Period	(2)	\$	1,025.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	25,500.00
All Other Contributions (Part D)			\$	16,500.00
TOTAL for the Reporting	Period	(3)	\$	42,000.00
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 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page 1			\$	43,275.00

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 Filing Committee or Candidat	e		Rep	orting Po	eriod			
NICHOLS FOR PA			Fro	m:	<u>5/2/2</u>	2017 T o) :	6/5/2017
					DATE			AMOUNT
Full Name of Contributor JULIA DANZY				МО	DAY	YEAR		
Mailing Address							\$	75.00
City	State	Zip Code (Plus 4)		6	1	2017		
Full Name of Contributor BEVERLY HAHN				МО	DAY	YEAR		
Mailing Address 1621 WINCHESTER	DR State	Zip Code (Plus 4)		5	2	2017	\$	250.00
City BLUE BELL	PA	194223527						
Full Name of Contributor STEVEN B. LAWRENCE				МО	DAY	YEAR		
Mailing Address 5219 CHURCH RD							\$	100.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191311412		5	8	2017		
Full Name of Contributor MARK F. NOWAK				МО	DAY	YEAR		
Mailing Address 2011 W GROVE DR							\$	250.00
City GIBSONIA	State PA	Zip Code (Plus 4) 150446059		5	12	2017		
Full Name of Contributor LADY SAVAGE				МО	DAY	YEAR		
Mailing Address WETHERILL ESTATE							\$	100.00
City LAVEROCK	State PA	Zip Code (Plus 4) 19038		5	3	2017		

Full Name of Contributor KEN WEINSTEIN			МО	DAY	YEAR	
Mailing Address 502 W ALLENS LN						\$ 250.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191192806	5	2	2017	

PAGE TOTAL \$ 1,025.00

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

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				
NICHOLS FOR PA			From:	<u>5/</u>	<u>/2/2017</u>	То:		6/5/2017
				DA	TE			AMOUNT
Full Name of Contributing Committee AFSCME PEOPLE				МО	DAY	YEAR		
Mailing Address 1625 L ST NW							\$	20,000.00
City WASHINGTON	State DC	Zip Code 200365	e (Plus 4) 6687	5	3	2017		
Full Name of Contributing Committee CLARK HILL THORP REED PAC				мо	DAY	YEAR		
Mailing Address 301 GRANT ST STE	14						\$	500.00
City PITTSBURGH	State PA	Zip Code 152191	e (Plus 4) 408	5	8	2017		
Full Name of Contributing Committee NORTHEAST REGIONAL COUNCIL OF CA	ARPENTERS PEC-PA	-		МО	DAY	YEAR		
Mailing Address 91 FIELDCREST AVE	FL 2						\$	5,000.00
City EDISON	State NJ	Zip Cod 088373	e (Plus 4) 627	5	5	2017	'	
		•			•		•	PAGE TOTAL
Enter Grand Total of Part C on Scheo	lule I, Detailed Sum	mary Pa	age, Sectio	n 3.			\$	25 500 00

5/3/2024 5:13:08 AM

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			
NICHOLS FOR PA				Fron	n:	<u>5/2/2</u>	017 T o) :	6/5/2017
					DA	ATE			AMOUNT
Full Name of Contributor LAW OFFICE OF SHAKA JOHNSON LLC					мо	DAY	YEAR		
Mailing 1420 WALNUT ST ST Address	E 806							\$	1,000.00
City PHILADELPHIA	State	Zip	Code (Plus	4)	5	3	2017		
	PA	19	1024008						
Employer Name					Occupat	ion		•	
Employer Mailing Address/Principal Plac Business	e of		City			State		Zip Co	ode (Plus 4)
Full Name of Contributor CAROLYN H. NICHOLS					МО	DAY	YEAR		
Mailing 6115 COBBS CREEK F	KWY							\$	15,000.00
City PHILADELPHIA	State PA		Code (Plus	4)	5	2	2017		
	.,.	1,	1+32700						
Employer Name CITY OF PHILADELPH	A				Occupat	i ion	OMMOI	N PLEA	S COURT JUDGE
Employer Mailing Address/Principal Plac Business	e of		City			State		Zip Co	ode (Plus 4)
CRIMINAL JUSTICE CENTERROOM 1416	i e		PHILADE	_PHIA		PA		1910	07
Full Name of Contributor ELOISE YOUNG					МО	DAY	YEAR		
Mailing 1601 S BROAD ST Address								\$	500.00
City PHILADELPHIA	State	Zip	Code (Plus	4)	5	30	2017		
	PA	19	1481003						
Employer Name PGW					Occupat	ion I	T PROF	ESSIO	NAL
Employer Mailing Address/Principal Place Business	e of		City			State		Zip Co	ode (Plus 4)
1601 S BROAD ST			PHILADE	_PHIA		PA		1914	48

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

PAGE TOTAL

\$ 16,500.00

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				
			From:			To:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	1		
Mailing Address							\$		0.00
City	State	Zip Code (Plus 4)						
Receipt Description	·	·		•			•		
Enter Grand Total of Part E	on Schedule I. Detailer	l Summary Page.	Section	4.				PAGE TO	ΓAL
- Communication of the Ex	Januara 1/ Betained	. Jaai y 1 ago,	Section	••			\$		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 Period		
NICHOLS FOR PA	From:	<u>5/2/2017</u> To:	<u>6/5/2017</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER 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)	\$	1,611.48
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,	•	\$	1,611.48

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			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Sche	dule II. In-Kind (Contributions Deta	iled Sum	marv Pac	ıe.		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

 NICHOLS FOR PA
 From: 5/2/2017
 To: 6/5/2017

						DATE			AMOUNT
Full Name of Contributor CAROLYN H. NICHOLS					мо	DAY	YEAR		
Mailing Address 6115 COBBS (CREEK PKWY							\$	1,611.48
City PHILADELPHIA State Zip Code(Plus 4) PA 191432908				•	6	5	2017		
Employer of Contributor CITY	OF PHILADELPH	IA	•		Occupation COMMON PLEAS COURT			COURT JUDGE	
Employer Mailing Address/Princip Business CRIMINAL JUSTICE CENTER ROO		City	S	tate	Zip 4)	Code(Plus		DATE C.	Contribution AMPAIGN
Enter Grand Total of Part G of Summary Page, Section 3.	n Schedule II,	In-Kind	Contribution	s Detai	led		LAI LIV	<u> </u>	PAGE TOTAL 1,611.48

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reportir	ng Period			
NICHOLS FOR PA			From	<u>5/2</u>	2/2017	То:	6/5/2017
		•		DATE			AMOUNT
To Whom Paid ALLEGHENY COUNTY DEMOCRATIC COMMITTEE			мо	DAY	YEAR		
Mailing Address 22 WABASH ST STE 205			5	8	2017	\$	5,000.00
City PITTSBURGH State Zip Code (Plus 4)			Descrip	tion of Exp	enditure		
PA 152205445			SLATE CARD PRINTING AND MAILING				
To Whom Paid JOHN BRADLEY			мо	DAY	YEAR		
Mailing Address INFORMATION R	EQUESTED		5	4	2017	\$	400.00
City State Zip Code (Plus 4)			1	otion of Exp PORTATIO			
To Whom Paid DHAMANA DIXON	•	·	мо	DAY	YEAR		
Mailing Address 5808 CHRISTIAN ST			5	8	2017	\$	1,000.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191433002	Descrip SCHED	otion of Exp ULER	enditure		
To Whom Paid	<u> </u>	I	MO	DAY	YEAR		

To Whom Paid TRACY HARDY				DAY	YEAR	
Mailing Address			5	15	2017	\$ 2,000.00
City	State	Zip Code (Plus 4)	l -	otion of Exp		
To Whom Paid INDIGO BLEU			мо	DAY	YEAR	
	Address 3870 LANCASTER AVE					
Mailing Address 3870 LANCASTE	R AVE		5	8	2017	\$ 650.00

						PAGE	14
To Whom Paid KATHRYN MARTUCCI	мо	DAY	YEAR				
Mailing Address 1414 S HICKS ST			5	8	2017	\$	3,500.00
City PHILADELPHIA PA Zip Code (Plus 4) PA 191464819				otion of Exp			
To Whom Paid MINUTEMAN PRESS	мо	DAY	YEAR				
Mailing Address			5	8	2017	\$	3,865.00
City	City State Zip Code (Plus 4)			otion of Exp			
To Whom Paid MINUTEMAN PRESS			МО	DAY	YEAR		
Mailing Address			5	15	2017	\$	2,000.00
City State Zip Code (Plus 4)				tion of Exp IGN LITER			
To Whom Paid MONROE PRESS			мо	DAY	YEAR		
			MO 5	DAY 8	YEAR 2017	\$	10,000.00
MONROE PRESS	State PA	Zip Code (Plus 4) 191272001	5	8 otion of Exp	2017	\$	10,000.00
MONROE PRESS Mailing Address 4674 CANTON ST			5 Descrip	8 otion of Exp	2017	\$	10,000.00
MONROE PRESS Mailing Address 4674 CANTON ST City PHILADELPHIA To Whom Paid	PA		5 Descrip PRINTI	8 Pition of Exp	2017 penditure	\$	10,000.00
MONROE PRESS Mailing Address 4674 CANTON ST City PHILADELPHIA To Whom Paid CAROLYN H. NICHOLS	PA		5 Descrip PRINTII MO 5	Botion of Exp NG DAY 15	2017 penditure YEAR 2017		
MONROE PRESS Mailing Address 4674 CANTON ST City PHILADELPHIA To Whom Paid CAROLYN H. NICHOLS Mailing Address 6115 COBBS CREEK	PA (PKWY State	191272001 Zip Code (Plus 4)	Descrip PRINTII MO 5 Descrip	Botion of Exp NG DAY 15	2017 penditure YEAR 2017		
MONROE PRESS Mailing Address 4674 CANTON ST City PHILADELPHIA To Whom Paid CAROLYN H. NICHOLS Mailing Address 6115 COBBS CREEK City PHILADELPHIA	PA (PKWY State	191272001 Zip Code (Plus 4)	Descrip PRINTII MO 5 Descrip LUNCHI	DAY 15 Stion of Exp DAY	2017 Penditure YEAR 2017 Penditure		

							PAGE	
To Whom Paid PHILADELPHIA DEMOCRATIC CITY COM	мо	DAY	YEAR					
Mailing Address 219 SPRING GARDE	N ST		5	15	2017	\$		15,000.00
City PHILADELPHIA PA Zip Code (Plus 4) PA 191232925				otion of Exp				
To Whom Paid PNC MERCHANT SERVICES				DAY	YEAR			
Mailing Address 8340 GERMANTOWN	N AVE		6	2	2017	\$		67.10
City PHILADELPHIA State Zip Code (Plus 4) PA 191183404				ction of Exp		G		
To Whom Paid PREMIERE BRAND, LLC				DAY	YEAR			
Mailing Address	Mailing Address				2017	\$		225.00
City State Zip Code (Plus 4)			Descrip INVOIC	tion of Exp	enditure			
To Whom Paid PREMIERE BRAND, LLC		<u> </u>	МО	DAY	YEAR			
	ı		MO 5	DAY 8	YEAR 2017	\$		1,250.00
PREMIERE BRAND, LLC	State	Zip Code (Plus 4)	5	8 tion of Exp	2017	\$		1,250.00
PREMIERE BRAND, LLC Mailing Address	State	Zip Code (Plus 4)	5 Descrip	8 tion of Exp	2017	\$		1,250.00
PREMIERE BRAND, LLC Mailing Address City To Whom Paid	State	Zip Code (Plus 4)	5 Descrip INVOIC	8 Ition of Exp	2017 penditure	\$		1,250.00 3,500.00
PREMIERE BRAND, LLC Mailing Address City To Whom Paid JASMINE SESSOMS	State	Zip Code (Plus 4) Zip Code (Plus 4)	Descrip INVOIC	8 tion of Exp E	2017 penditure YEAR 2017 penditure			
PREMIERE BRAND, LLC Mailing Address City To Whom Paid JASMINE SESSOMS Mailing Address			Descrip INVOIC	Bution of Exp	2017 penditure YEAR 2017 penditure			
PREMIERE BRAND, LLC Mailing Address City To Whom Paid JASMINE SESSOMS Mailing Address City To Whom Paid			Descrip FINANC	Bution of Exp	2017 Penditure YEAR 2017 Penditure OR			

To Whom Paid TML COMMUNICATIONS				DAY	YEAR	
Mailing Address PO BOX 138	5	8	2017	\$ 2,000.00		
City ABINGTON	State PA	1	otion of Exp			
To Whom Paid US MAILROOM			мо	DAY	YEAR	
Mailing Address 45 E CITY AV	E		5	8	2017	\$ 19.27
City BALA CYNWYD	State PA	Zip Code (Plus 4) 190042421	Descrip MAILIN	otion of Exp	penditure	
Enter Grand Total of Expendi	tures on Page 1 Pe	port Cover Page Item D				PAGE TOTAL
Linter Grand Total of Expendit	luies on Page 1, Re	port cover rage, Item D	•			\$ 51,799.35

STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate Reportin			ng Period					
NICHOLS FOR PA			From:		<u>5/2/2017</u>	То:		6/5/2017
					DATE			Outstanding Balance of Debt
Name of Creditor CAROLYN H. NICHOLS	CAROLYN H. NICHOLS			мо	DAY	YEAR		
Mailing Address 6115 COBBS CREEK PKWY			12	15	2016	\$	25,000.00	
City PHILADELPHIA State Zip Code (Plus 4) PA 191432908				otion of Del	ot			
					DATE			Outstanding Balance of Debt
Name of Creditor CAROLYN H. NICHOLS				МО	DAY	YEAR		
Mailing Address 6115 COBBS CREE	K PKWY			2	8	2017	\$	20,000.00
City PHILADELPHIA	State PA	Zip Code (Pl 191432908		Description of Debt LOAN RECEIVED				
					DATE			Outstanding Balance of Debt
Name of Creditor CAROLYN H. NICHOLS				МО	DAY	YEAR		
Mailing Address 6115 COBBS CREE	K PKWY			4	3	2017	\$	14,000.00
City PHILADELPHIA	State PA	Zip Code (Pl 191432908	_		otion of Del	ot		
					DATE			Outstanding Balance of Debt
Name of Creditor CAROLYN H. NICHOLS				МО	DAY	YEAR		
Mailing Address 6115 COBBS CREE	K PKWY			4	10	2017	\$	5,000.00
City PHILADELPHIA	State PA	Zip Code (Pl 191432908			otion of Del	ot		

				DATE			Outstanding Balance of Debt
Name of Creditor CAROLYN H. NICHOLS			МО	DAY	YEAR		
Mailing Address 6115 COBE	3S CREEK PKWY		5	2	2017	\$	15,000.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191432908		otion of Del	bt	•	
Enter Grand Total of Unpa	iid Debts on Page 1	., Report Cover Page, Iten	ı G.			\$	79,000.00