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 2017	0269			Rep File			CAND	IDAT	E	СО	MMITTEE	√	LOBE	BYIST	
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		Cozz	zone	e for F	PA (Lt G	ov)							
Street Address:	PO Box 1385															
City:	Exton							State:	PA			Zip Co	de: 1	.9341		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	Y PRE	- 2	2.	30 DA		POST	- 3.	i	AMEND REPORT		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4. X	2ND FRIDAY ELECTION	y pre	<u>-</u> ;	5.	30 DA		POST	- 6	•	TERMIN REPORT		Yes	No	
report type)	ANNUAL REPORT	7.	Year 2018					NG METH CHECK (PAPER		\	DISKE	TTE
Name of Office S	- Sought by Candida	te:						DATE	OF E	ECT	ION	District Numbe			ty Code	County Code
								МО	DA	1	YEAR	-1	LTG	DEN	1	15
LIEUTENANT G	OVERNOR							1	1	6	20:	.8	(SEE I	NSTRUCTIO	ONS FOR (CODES)
	Receipts and	МО	DAY	YEAR	ł			МО	DA	Y	YEAR	F	OR OFF	ICE USE	ONLY	
Expenditures	from:		6 5	2	018	Т	0		9	17	20	.8				
A. Amount Bro	ught Forward Fron	n Last R	eport				\$				2,966.	.9				
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule	I)	\$				0.0	0				
C. Total Funds	Available (Sum Of	Lines A	and B)				\$				2,966.	.9				
D. Total Expen	ditures (From Sch	edule II	I)				\$				2,966.1	9				
E. Ending Cash	Balance (Subtract	t Line D	From Line (C)			\$				0.0	0				
F. Value Of In-	Kind Contributions	Receiv	ed (From So	chedu	le II)	\$				0.0	0				
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV)			\$				0.0	0		•		
				AFF	IDA	١٧٧	T SE	CTION								
PART I - If this is	s a Committee rep	ort, trea	surer sign l	nere. I	If thi	is is	a Car	ndidate	repor	t, car	ndidate	sign here				
I swear (or affirm) correct and comple) that this report, incl ete.	uding the	attached sch	nedules	s filed	d on	paper	or by elec	tronic	medi	um, are	o the best	of my kn	owledge	and belie	ef , true
Sworn to and subs	cribed before me this	•	20								Signat	ure of Pers	on Submi	itting Rep	ort	
			<u> </u>				-					Pri	nted Nan	1e		
My Commission Ex	Signatu opires	re										Em	ail			
	мо	D	AY	YR			-			Area	Code			hone Nu	mber	
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nitte	e, C	andid	ate shal	l sign	here	e.					
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and beli	ef this	polit	ical	comm	ittee has	not vi	olated	l any pro	isions of t	he act of	June 3,19	937 (P.L	. 1333,
Sworn to and subsc	ribed before me this											Signature	of Candi	date		
	day of						_					Poils :	ad Nr			
	Signature						-					Print	ed Name	1		
My Commission Exp	_											Em	ail			
	МО	D	AY	YR	l		-		Ar	ea Co	de		Daytime	Telephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	Period		
Cozzone for PA (Lt Gov)	From:	<u>6/5/201</u>	<u>8</u> To:	9/17/2018
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	J 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

		ly contributions r lue from \$50.01 t			•			
Name of Filing Committee or (Candidate		Re	porting	Period			
			Fr	om:		То	:	
					DATE			AMOUNT
Full Name of Contributing Comm	nittee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
							$\overline{}$	PAGE TOTAL

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

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 Candida	te			oorting P	eriod			
			Fro	m:		To):	
					DATE		AMOUNT	
Full Name of Contributor				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

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 or Co	andidate		Report	ting Perio	bd			
			From:			То:		
				D	ATE		AN	10UNT
Full Name				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	•						
Enter Grand Total of Part E or	Schedule T Detaile	d Summary Page	Section	4			PA	GE TOTAL
Lines Grana Fotal of Fair 2 of	r benedule 1/ betanet	z Sammary r age,	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	I	
Cozzone for PA (Lt Gov)	From:	6/5/2018 To:	9/17/2018
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	TF)		
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:			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	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	те 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 Candidat	e				Re	porting F	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor	•		•			Occupa	tion		•	
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, I	In-Kind	Contributi	ons De	taile	ed				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candi	date		Reporti	ng Period			
Cozzone for PA (Lt Gov)			From	<u>6/</u>	5/2018	То:	9/17/2018
				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
AAA Downingtown							
Mailing Address 105 Quarry Rd			6	7	2018	\$	4.00
City Downingtown	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
-	PA	193353419	Notary				
To Whom Paid	•		МО	DAY	YEAR		
Adams County Democratic Commit	tee						
Mailing Address			6	6	2018	\$	60.00
City	State	Zip Code (Plus 4)	Descrip	otion of Exp	penditure		
To Whom Paid Adams County Democratic Commit	tee		МО	DAY	YEAR		
Mailing Address			7	31	2018	\$	24.70
City	State	Zip Code (Plus 4)		otion of Exp e Reimburs			
To Whom Paid			МО	DAY	YEAR		
Committee to Elect Kathi Cozzone					12/11		
Committee to Elect Kathi Cozzone Mailing Address 23 Andover Dr			8	2	2018	\$	1,726.78
Mailing Adduses	State	Zip Code (Plus 4)	8	2 Otion of Exp	2018		1,726.78
Mailing Address 23 Andover Dr	State PA	Zip Code (Plus 4) 193411502	8	otion of Exp	2018		1,726.78
Mailing Address 23 Andover Dr			8 Descrip Transfe	otion of Exper	2018 penditure		1,726.78
Mailing Address 23 Andover Dr City Exton			8 Descrip	otion of Exp	2018		1,726.78
Mailing Address 23 Andover Dr City Exton To Whom Paid			8 Descrip Transfe	otion of Exper	2018 penditure		1,726.78 8.49

Ads

мо	DAY	YEAR			
6	8	2018	\$		110.42
Descrip t Ads	tion of Exp	enditure			
мо	DAY	YEAR			
6	18	2018	\$		1.21
Descrip t Ads	tion of Exp	l <u> </u>			
мо	DAY	YEAR			
7	2	2018	\$		4.04
МО	DAY	YEAR			
MO 8	2	YEAR 2018	\$		2.50
8 Descrip		2018 penditure	\$		2.50
8 Descrip t Merchar	2 tion of Exp	2018 penditure	\$		2.50
8 Descrip t Merchar	2 tion of Exp nt Bank Fe	2018 Denditure	\$		2.50
8 Descript Merchar MO 9 Descript	2 tion of Exp nt Bank Fe	2018 Denditure Des 2018 2018 Denditure			
8 Descript Merchar MO 9 Descript Merchar	tion of Exp nt Bank Fe DAY 4	2018 Denditure Des 2018 2018 Denditure			
8 Descript Merchar MO 9 Descript Merchar	tion of Exp nt Bank Fe DAY 4 tion of Exp	2018 Penditure Pes YEAR 2018 Penditure Pes			
Ad MC Ad MC	escrip ds 6 escrip ds 7	DAY 6 18 escription of Expension of Expens	DAY YEAR 6 18 2018 escription of Expenditure 7 2018 6 DAY YEAR DAY YEAR	escription of Expenditure ds DAY YEAR 18 2018 \$ escription of Expenditure ds DAY YEAR 7 2 2018 \$ escription of Expenditure	escription of Expenditure ds DAY YEAR 18 2018 \$ escription of Expenditure ds DAY YEAR 7 2 2018 \$ escription of Expenditure

To Whom Paid Diane O'Dwyer			мо	DAY	YEAR		
Mailing Address 4607 Adams Ct			6	6	2018	\$	750.00
City Chester Springs	State PA	Zip Code (Plus 4) 194258767	Description of Expenditure Consulting Fee				
To Whom Paid PA Democratic Latino Caucus			МО	DAY	YEAR		
Mailing Address			6	15	2018	\$	125.00
City	State	Zip Code (Plus 4)	Description of Expenditure Event Ticket				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
						\$	2,966.19