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	8000	109			Rep File			CAN	DIE	DATE		COMN	1ITTEE	✓	LOB	BYIS	ST	
Name of Filing C	Committee	e, Candida	ate or Lo	obbyist:		MIC	OZZ	IE, N	ICHOL	AS	FRIEN	IDS (OF	_					
Street Address:	РО В	OX 234																	
City:	CLIFT	TON HEIG	HTS						State:		PA			Zip Cod	le: 19	018-0	000		_
TYPE OF REPORT	6TH TUES PRE-PRIM		1. X	2ND FRIDA PRIMARY	Y PRE	- 2	2.	30 DA		P	OST-	3.		AMENDM REPORT?		Yes	/	No	
(place X to the right of	6TH TUES PRE-ELEC		4.	2ND FRIDA ELECTION	AY PRE	- 5	5.	30 DA		P	OST-	6.		TERMINA REPORT?		Yes		No	\
report type)	ANNUAL	REPORT	7.	Year 2018					NG MET CHECK					PAPER		\	DIS	KETT	E
Name of Office S	- Sought by	Candidat	e:			-			DATE	OF	ELE(CTIC	N	District Number	Office Code	Pai	ty C	ode Co	unty de
									МО		DAY	ΥI	EAR		10000	REF)	23	
										11		6	2018		(SEE IN	STRUCTI	ONS F	OR COD	ES)
Summary of		and	МО	DAY	YEAR	1			МО		DAY	Y	EAR	FO	R OFFI	E USE	ON	LY	
Expenditures	from:			1 1	. 20	018	T	0		3	2	26	2018						
A. Amount Bro	ught Forv	vard From	Last R	eport		•		\$	•	•		14,	336.59						
B. Total Moneta	ary Contr	ibutions A	and Rec	eipts (Fron	n Sche	dule	I)	\$					0.00						
C. Total Funds	Available	(Sum Of	Lines A	and B)				\$				14,	336.59						
D. Total Expend	ditures (F	rom Sche	dule II	I)				\$				8	311.94						
E. Ending Cash	Balance	(Subtract	Line D	From Line	C)			\$				13,5	24.65						
F. Value Of In-	Kind Cont	ributions	Receive	ed (From S	chedu	le II)	\$					0.00						
G. Unpaid Debt	s And Ob	ligations	(From S	chedule IV	/)			\$					0.00						
					AFF	IDA	VI	ΓSE	CTIO	N									
PART I - If this is		•	•	-															
I swear (or affirm) correct and comple		eport, inclu	uding the	attached sc	hedules	filed	l on I	paper	or by ele	ectr	onic me	edium	, are to t	he best o	f my knov	vledge	and	belief ,	true
Sworn to and subs	cribed befo	ore me this		20						-		5	Signature	of Perso	1 Submitt	ing Re	oort		
	_	Signatur						-		-				Prin	ted Name	1			_
My Commission Ex	cpires	Signatui	e							-				Emai	i				—
	,	мо	D/	AY	YR			-		-	Are	a Cod	de	Daytim	e Teleph	one Nu	mbe	r	_
Part II- If this is	a report	of a cand	idate's	authorized	Comn	nitte	e, Ca	andid	ate sha	all s	ign he	ere.							
I swear (or affirm) No 320) as amende		e best of m	y knowle	edge and beli	ief this	polit	ical	comm	ittee ha	s no	t viola	ed ar	ıy provisi	ions of the	e act of J	ıne 3,1	937	(P.L. 13	33,
Sworn to and subsc	ribed befo	re me this											Si	ignature o	f Candida	ate			— <u> </u>
	day of —							-						Drinto	d Name				<u> </u>
		Signature						-		_						_			
My Commission Exp		J								_				Ema	il				_
	_	мо	D	AY	YR			•		•	Area	Code		Da	ytime T	elephoi	ne Nu	ımber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	Period		
MICOZZIE, NICHOLAS FRIENDS OF	From:	1/1/201	<u>8</u> To:	3/26/2018
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
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

	this Part to itemize onl with an aggregate val								
Name of Filing Comm	nittee or Candidate		Reporting Period						
		From:			То	:			
		•			DATE			AMOUNT	
Full Name of Contributi	ing Committee			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.

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 Canadate					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 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	Candidate		Report	ting Perio	bd			
			From:			To:		
				D	ATE		AM	OUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	•	•		•	•	•	_	
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			PAG	GE TOTAL
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	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 Perio	od	
MICOZZIE, NICHOLAS FRIENDS OF	From:	<u>1/1/2018</u> To :	3/26/2018
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTOR	l	
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 Candidat	:e		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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Re	porting l	Period			
					Fro	om:		To:		
					•		DATE			AMOUNT
Full Name of Contributor						МО	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupa	ition		•	
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iption	of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, I	in-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Co	andidate		Reportir	ng Period				
MICOZZIE, NICHOLAS FRIEND)S OF		From	<u>1/:</u>	1/2018	То:	3/26/2018	
				DATE			AMOUNT	
To Whom Paid AOL			мо	DAY	YEAR			
Mailing Address On Line			1	3	2018	! \$	14.74	
City Lansdowne	State	Zip Code (Plus 4)	Description of Expenditure					
Lundowne	PA	19050	Interne		-	•		
To Whom Paid Slimware	МО	DAY	YEAR					
Mailing Address PO Box 102			1	3	2018	\$	99.99	
City New York	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
NY 11747				re and Con				
To Whom Paid St. Eugene			мо	DAY	YEAR			
Mailing Address 200 North (Oak Avenue		1	3	2018	\$	250.00	
City Clifton Heights	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	<u> </u>		
3	PA	19018	Donatio					
To Whom Paid Columbus Club			МО	DAY	YEAR			
Mailing Address 293 S. Spri	ngfield Road		2	2	2018	\$	75.00	
City Clifton Heights	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	19018	Donatio					
To Whom Paid Lansdowne Cancer Society			МО	DAY	YEAR			
Mailing Address 1626 Locus	t Street		1	11	2018	\$	25.00	
City Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	1		
	54	10103	1	-				

19103

Donation

PΑ

							PAGE 12	
To Whom Paid Special Olympics			мо	DAY	YEAR			
Mailing Address PO Box 3010			2	5	2018	\$	25.00	
City Norristown	State PA	Zip Code (Plus 4) 19404-3010	Descrip Donation	otion of Exp	penditure			
	PA PA	LW 13404-2010			Donation			
To Whom Paid Daily Times			МО	DAY	YEAR			
Mailing Address 500 Mildred Ave.			2	2	2018	\$	30.00	
City Primos	State	Zip Code (Plus 4)	Descrip	tion of Exp	l penditure			
1111103	PA	19018	Subscription					
To Whom Paid Upper Darby Campaign Committee			МО	DAY	YEAR			
Mailing Address 5035 Township Road			3	2	2018	\$	100.00	
City Drexel Hill	State	Zip Code (Plus 4)	Descrip	tion of Exp	penditure			
	PA	19026	Donation					
To Whom Paid Daily Times			МО	DAY	YEAR			
Mailing Address 500 Mildred Avenue			3	2	2018	\$	91.00	
City Primos	State	Zip Code (Plus 4)	Descrip	tion of Exp	oenditure			
	PA	19018	Subscription					
To Whom Paid Daily Times			МО	DAY	YEAR			
Mailing Address 500 Mildred Avenue			3	5	2018	\$	35.00	
City Primos	State	Zip Code (Plus 4)	Descrip	tion of Exp	penditure			
	PA	19050	Subscription					
To Whom Paid Verizon 500404219-00002			МО	DAY	YEAR			
Mailing Address PO Box 25505			3	2	2018	\$	66.21	
City Lehigh Valley	State	Zip Code (Plus 4)	Description of Expenditure Utilities					
Lemgn valley	ОН	18002						
		•	-				PAGE TOTAL	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	811.94	