# **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			Repor Filed I		CANE	DIDATE		COMM	AITTEE	✓	LOB	BYIST	
Name of Filing C	Committee, Candida	ate or L	obbyist:	N	MICOZ	ZIE, N	ICHOLA	S FRIE		)F					
Street Address:	131 1/2 HILLE	DATE R	DAD												
City:	LANSDOWNE						State:	PA			Zip Co	<b>de:</b> 19	050		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2. <b>X</b>	30 D. PRIM		POST-	3.		AMENDI REPORT		Yes	✓ No	)
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE-	- 5.	30 D. ELEC		POST-	6.		TERMIN REPORT		Yes	Nc	Ŷ
report type)	ANNUAL REPORT	7.	<b>Year</b> 2018				NG METI CHECK				PAPER		$\checkmark$	DISKE	TTE
Name of Office S	ought by Candidat	te:				•	DATE	OF ELE	стіо	N	District Number		Par	ty Code	County Code
							мо	DAY	YE	AR			REF	)	23
							1	1	6	2018		(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR			мо	DAY	YE	AR	FC	OR OFFIC	e use	ONLY	
Expenditures	from:		3 27	20	)18 <b>1</b>	0		4	30	2018	$\triangleright$				
A. Amount Bro	ught Forward Fron	n Last R	eport			\$			13,5	42.60	1				
B. Total Moneta	ary Contributions A	And Rec	eipts (From	Sched	lule I)	44				0.00					
C. Total Funds	Available (Sum Of	Lines A	and B)			4		$\searrow$	13,5	42.60					
D. Total Expen	ditures (From Sche	edule II	I)			4		1/	9	69.47					
E. Ending Cash	Balance (Subtract	Line D	From Line	c)		4	$\mathbf{X}$		12,5	73.13	-				
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedule	e II)	J\$				0.00	4				
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	2		\$	5			0.00					
		Í		AFFI	[DAV]	T SE	CTION	١							
PART I - If this is	s a Committee repo	ort, trea	surer sign	here. If	f this is	s a Ca	ndidate	report, o	candid	late sig	gn here.				
I swear (or affirm) correct and comple	) that this report, incluents	uding the	attached sci	hedules	filed on	paper	or by ele	ctronic m	edium,	are to t	the best o	of my knov	ledge	and beli	ef , true
Sworn to and subs	cribed before me this day of	)	20						Si	ignature	e of Perso	n Submitt	ing Rej	oort	
	Signatur	re				_					Prir	ited Name			
My Commission E						_					Ema	nil			
	мо	D	AY	YR		_		Are	ea Cod	e	Daytin	ne Teleph	one Nu	mber	
	a report of a cand that to the best of m ed.							-		y provis	ions of th	e act of Ju	ine 3,1	937 (P.L	. 1333,
Sworn to and subsc	ribed before me this									S	ignature	of Candida	te		
	day of 					_					Printe	ed Name			
My Commission Exp	Signature					_					Ema	nil			
						_									
	мо	D	AY	YR				Area	Code		D	aytime Te	lephor	ne Numb	er

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period	
MICOZZIE, NICHOLAS FRIENDS OF	From: <u>3/27/201</u>	<u>8</u> To: <u>4/30/2018</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
		7
3. Contributions Received Over \$250.00 (From Part C and Part D)		
Contributions Received From Political Committees (Part C)		<b>\$</b> 0.00
All Other Contributions (Part D)	D>	<b>\$</b> 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
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

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### PAGE 3

CONTRIBUTIONS		PART A <b>D FROM</b> 1 TO \$250.0		LIT	ICAL	сомі	мітті	EES
Use this Part to with an age		tributions r	ecei					
Name of Filing Committee or Candida	te		Re	porting	Period			
			Fro	om:		To:		
					DATE		AM	OUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address	State	Zip Code (Plus	4					0.00
City	State		4)				$\searrow$	
Enter Grand Total of Part A on Sch	edule I, Detailed Sur	nmary Page, S	ectio	n 2.		>	PAGE \$	<b>TOTAL</b> 0.00

Г

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	e		Rep	orting P	eriod				
			Fro	m:		То	<b>):</b>		
					DATE		AMOUN	r	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4)	4						
		1			$\searrow$		PAGE T	OTAL	
Enter Grand Total of Part A on S	credule 1, Detaile	d Summary Pag		ection 2	./		\$	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	g Period				
			From:			То:		
				DA	TE			
Full Name of Contributing Committee				мо	DAY	YEAR	X N	
Mailing Address							\$	0.00
City	State	Zip Code	e (Plus 4)			$\searrow$		
Enton Crond Total of David C on Schod	ula I. Datailed Sum		E antio				PAGE T	OTAL
Enter Grand Total of Part C on Sched	ule I, Detailed Sum	mary Pa	age, Sectio	n 3.	$\searrow$		\$	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 Candida	ite		Repo	orting Pe	riod			
			From	1:		То	):	
				D	ATE			
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	s 4)				1	
Employer Name				Occupa	tion			
Employer Mailing Address/Principal F Business	Place of	City			State		Zip Code (Plus	4)
Enter Grand Total of Part C on So	chedule I, Detaile	d Summary Page,	Sectio	n 3.			PAGE TO	
			r				\$	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			Reporting Period							
			From:			То:				
				D	ATE		AMOUN	т		
Full Name				мо	DAY	YEAR				
Mailing Address								0.00		
City	State Zip Code (I			e (Plus 4)						
Receipt Description			4			$\sum$				
Enter Grand Total of Part E on Schedu	le I, Detailed Summ	nary Page,	Section	4.	$\bigvee$	Γ	PAGE TO	DTAL		
\$ 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 P	eriod	
MICOZZIE, NICHOLAS FRIENDS OF	From:	<u>3/27/2018</u> то:	<u>4/30/2018</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUT	OR	
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)	5	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, 1		\$	0.00

## SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporting	g Period			
			From:			То:	
L				DATE		AMOUNT	
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address						5	0.00
City	State	Zip Code (Plus 4	)		Ċ		
Description of Contribution:							
Enter Grand Total of Part F on Sched Section 2.	ailed Sum	mary Pag	je,	PAGE TOT	AL		
section 2. \$ 0.00							

### SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Cand	Name of Filing Committee or Candidate			Rep	porting P	eriod			
				Fro	m:		То:		
						DATE		ΑΜΟΙ	JNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								5	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occupat	tion	$\searrow$		
Employer Mailing Address/Principa Business	al Place of	City	State		Zip 4)	Code(Plus	Descri	ption of Contri	bution
Enter Grand Total of Part G or Summary Page, Section 3.	n Schedule II, I	n-Kind	Contributions De	etaile	d			PAGE	: <b>TOTAL</b> 0.00
<u> </u>							•		

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporti	ng Period			
MICOZZIE, NICHOLAS FRIENDS OF			From	<u>3/2</u>	7/2018	То:	<u>4/30/2018</u>
				DATE			AMOUNT
<b>To Whom Paid</b> CitizensBank			мо	DAY	YEAR		
Mailing Address 5276 West Baltimore	e Pole		3	27	2018	<b>S</b> • .	14.95
City Clifton Heights	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		$\rangle$
	РА	19018	Fee			$\searrow$	
<b>To Whom Paid</b> Citizens Bank			мо	DAY	YEAR		
Mailing Address 5276 west Baltimore	e Pike	4	3	30	2018	\$	3.00
City Clifton Heights	State	Zip Code (Plus 4)	Descrip	otion of Exp	penditure	1	
	PA	19018	Fee				
<b>To Whom Paid</b> St. Francis Assisi			мо	DAY	YEAR		
Mailing Address 136 Saxer Avenue			4	9	2018	\$	208.00
City Springfield	State PA	<b>Zip Code (Plus 4)</b> 19064	<b>Descrip</b> Donatio	otion of Exp on	benditure	1	
To Whom Paid Aol			мо	DAY	YEAR		
Mailing Address On Line	)		4	9	2018	\$	5.29
City Lansdowne	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19018	<b>Descrip</b> Fee	otion of Exp	oenditure	1	
To Whom Paid Verizon			мо	DAY	YEAR		
Mailing Address 731 West Sproul Ro	ad		4	9	2018	\$	461.34
City Springfield	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19064		nic Devices			

To Whom Paid DHN Hosting			мо	DAY	YEAR		
Mailing Address 131 1/2 Hilldale Roa	d		4	9	2018	\$	163.94
City On Line	State	Zip Code (Plus 4)	Descrip	tion of Exp	, penditure		
	AR	85001	Web Si	te Hosting	LIT Proje	ects etc.	
<b>To Whom Paid</b> Daily Times			мо	DAY	YEAR		
Mailing Address 628 S. Chester Aver	iue		4	11	2018	\$	95.00
City Swarthmore	State	Zip Code (Plus 4)	Descrip	tion of Ex	penditure		
	РА	19081	Subscri	iption			
<b>To Whom Paid</b> Citizens Bank			мо	DAY	YEAR		
Mailing Address 5276 W. Baltimore F	like		4	18	2018	\$	14.95
City Clifton Heights	State	Zip Code (Plus 4)	Descrip	tion of Exp	penditure		
	РА	19018	Fee	$\mathbb{C}$			
<b>To Whom Paid</b> Citizens Bank			мо	DAY	YEAR		
Mailing Address 5276 West Baltimore	e Pike		4	30	2018	\$	3.00
City Clifton Heights	State PA	<b>Zip Code (Plus 4)</b> 19018	<b>Descrip</b> Fee	otion of Exp	penditure		
		V					PAGE TOTAL
Enter Grand Total of Expenditures of	on Page 1, Report Co	over Page, Item D.				\$	969.47