

Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification Number : 8000109		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: MICOZZIE, NICHOLAS FRIENDS OF										
Street Address: 131 1/2 HILLDATE ROAD										
City: LANSDOWNE					State: PA		Zip Code: 19050			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY PRIMARY	POST-	3. X	AMENDMENT REPORT?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6.	TERMINATION REPORT?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2018	FILING METHOD () CHECK ONE			PAPER <input checked="" type="checkbox"/>	DISKETTE <input type="checkbox"/>		
Name of Office Sought by Candidate:					DATE OF ELECTION			District Number	Office Code	
					MO	DAY	YEAR	Party Code		County Code
					11	6	2018	REP 23		
Summary of Receipts and Expenditures from:					MO	DAY	YEAR	FOR OFFICE USE ONLY		
					5	1	2018	TO		
					6	4	2018			
A. Amount Brought Forward From Last Report					\$ 12,573.13					
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 0.00					
C. Total Funds Available (Sum Of Lines A and B)					\$ 12,573.13					
D. Total Expenditures (From Schedule III)					\$ 378.23					
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 12,194.90					
F. Value Of In-Kind Contributions Received (From Schedule II)					\$ 0.00					
G. Unpaid Debts And Obligations (From Schedule IV)					\$ 0.00					

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature

My Commission Expires

MO DAY YR

Signature of Person Submitting Report

Printed Name

Email

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature

My Commission Expires

MO DAY YR

Signature of Candidate

Printed Name

Email

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate MICOZZIE, NICHOLAS FRIENDS OF	Reporting Period From: <u>5/1/2018</u> To: <u>6/4/2018</u>
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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

Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 0.00
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PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candidate	Reporting Period
	From: To:
<div style="display: flex; justify-content: space-between;"> DATE AMOUNT </div>	

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
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 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	Reporting Period	
	From:	To:

				DATE			AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$	0.00
Mailing Address								
City		State	Zip Code (Plus 4)					

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

PAGE TOTAL
\$ 0.00

			DATE			AMOUNT
Full Name of Contributing Committee			MO	DAY	YEAR	<div>\$</div> <div>0.00</div>
Mailing Address						
City	State	Zip Code (Plus 4)				

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

PAGE TOTAL	
\$	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 Candidate	Reporting Period
	From: To:

Full Name of Contributor			DATE			AMOUNT	
			MO	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
Employer Name			Occupation				
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 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
	<div style="display: flex; justify-content: space-between;"> From: To: </div>

			DATE			AMOUNT
Full Name			MO	DAY	YEAR	
Mailing Address						\$ 0.00
City	State	Zip Code (Plus 4)				
Receipt Description						

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 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	
MICOZZIE, NICHOLAS FRIENDS OF		From: <u>5/1/2018</u> To: <u>6/4/2018</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period (1)		\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period (2)		\$	0.00
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period (3)		\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)		\$	0.00

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			MO	DAY	YEAR	
Mailing Address						\$ 0.00
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						PAGE TOTAL \$ 0.00

INCOMPLETE

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
MICOZZIE, NICHOLAS FRIENDS OF	From <u>5/1/2018</u> To: <u>6/4/2018</u>

				DATE	AMOUNT		
To Whom Paid Verizo 500404219-00002				MO	DAY	YEAR	\$ 87.61
Mailing Address PO Box 25505				5	7	2018	
City Lehigh Valley	State PA	Zip Code (Plus 4) 18002-5505	Description of Expenditure 1/2 of Subscription Fee				
To Whom Paid External Affairs Hillsdale College				MO	DAY	YEAR	\$ 25.00
Mailing Address 33 E. College Street				5	9	2018	
City Hillsdale	State MI	Zip Code (Plus 4) 49242-9989	Description of Expenditure Donation				
To Whom Paid St. Francis Assisi				MO	DAY	YEAR	\$ 86.00
Mailing Address 136 Saxer Avenue				5	9	2018	
City Springfield	State PA	Zip Code (Plus 4) 19064	Description of Expenditure Donation				
To Whom Paid AOL				MO	DAY	YEAR	\$ 7.14
Mailing Address 131 1/2 Hilldale Road				5	9	2018	
City PaLansdowne	State PA	Zip Code (Plus 4) 19050	Description of Expenditure 1/2 of Subscription Fee				
To Whom Paid DNH Hosting				MO	DAY	YEAR	\$ 63.48
Mailing Address 131 1/2 Hilldale Road				5	9	2018	
City Lansdowne	State PA	Zip Code (Plus 4) 19050	Description of Expenditure WordPress Hosting				

To Whom Paid Citizens Bank			MO	DAY	YEAR	
Mailing Address 5276 Baltimore Pike			5	17	2018	
City Clifton Heights	State PA	Zip Code (Plus 4) 19018	Description of Expenditure 1/2 of Citizens Bank Fee for this Period			

To Whom Paid Government in Exile			MO	DAY	YEAR	
Mailing Address 117 Faculty Road			5	21	2018	
City Duncannon	State PA	Zip Code (Plus 4) 17020	Description of Expenditure Donation			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 378.23
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INCOMPLETE

INCOMPLETE