

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 : 20220175		Report Filed By :		CANDIDATE	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST				
Name of Filing Committee, Candidate or Lobbyist: Friends of Nick Miller										
Street Address: PO Box 1799										
City: Allentown			State: PA		Zip Code: 18105					
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6. X	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	Year 2023	FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/>		DISKETTE		
Name of Office Sought by Candidate:				DATE OF ELECTION			District Number	Office Code	Party Code	County Code
				MO	DAY	YEAR				
				11	7	2023	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY	
		10	24	2023	TO	11	27	2023		
A. Amount Brought Forward From Last Report				\$		48,366.67				
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		8,100.00				
C. Total Funds Available (Sum Of Lines A and B)				\$		56,466.67				
D. Total Expenditures (From Schedule III)				\$		162.01				
E. Ending Cash Balance (Subtract Line D From Line C)				\$		56,304.66				
F. Value Of In-Kind Contributions Received (From Schedule II)				\$		0.00				
G. Unpaid Debts And Obligations (From Schedule IV)				\$		35,000.00				

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	Reporting Period
Friends of Nick Miller	From: <u>10/24/2023</u> To: <u>11/27/2023</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)	\$ 100.00
TOTAL for the Reporting Period (2)	\$ 100.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 6,000.00
All Other Contributions (Part D)	\$ 2,000.00
TOTAL for the Reporting Period (3)	\$ 8,000.00

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 enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 8,100.00
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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:
DATE AMOUNT	

Full Name of Contributing Committee	MO	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 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
Friends of Nick Miller	From: <u>10/24/2023</u> To: <u>11/27/2023</u>

				DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR		
Roy Afflerbach					
Mailing Address 2484 Sweet Gum Cir					\$ 100.00
City York	10	24	2023		
State PA					
Zip Code (Plus 4) 174067537					

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

PAGE TOTAL
\$ 100.00

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 Period
Friends of Nick Miller	From: <u>10/24/2023</u> To: <u>11/27/2023</u>

			DATE			AMOUNT
Full Name of Contributing Committee	MO	DAY	YEAR			
1776 PAC				\$	500.00	
Mailing Address 3031 A Walton Rd Ste 201	10	31	2023			
City Plymouth Meeting State PA Zip Code (Plus 4) 194622369						
AFSCME Council 13 Political & Legislative				\$	500.00	
Mailing Address 4031 Executive Park Dr	10	24	2023			
City Harrisburg State PA Zip Code (Plus 4) 171111507						
B & B PAC				\$	500.00	
Mailing Address 24 Aqueduct Rd	10	31	2023			
City Duncannon State PA Zip Code (Plus 4) 170209614						
Capital Blue PAC				\$	500.00	
Mailing Address PO Box 60710	10	31	2023			
City Harrisburg State PA Zip Code (Plus 4) 171060710						
CPA PAC				\$	1,000.00	
Mailing Address 500 N 3rd St Ste 600A	10	31	2023			
City Harrisburg State PA Zip Code (Plus 4) 171011163						
DISPAC				\$	500.00	
Mailing Address 230 S Broad St Ste 903	10	24	2023			
City Philadelphia State PA Zip Code (Plus 4) 191024106						

Full Name of Contributing Committee Friends of Freedom & Convenience			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 2295 N Susquehanna Trl			10	24	2023	
City York	State PA	Zip Code (Plus 4) 174048495				
Full Name of Contributing Committee Highmark PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address 1800 Center St			10	31	2023	
City Camp Hill	State PA	Zip Code (Plus 4) 170111741				
Full Name of Contributing Committee School Bus PAC			MO	DAY	YEAR	\$ 500.00
Mailing Address 623 N Broad St			10	31	2023	
City Lansdale	State PA	Zip Code (Plus 4) 194462316				
Full Name of Contributing Committee Versant Strategies			MO	DAY	YEAR	\$ 500.00
Mailing Address 116 Pine St Fl 5			10	31	2023	
City Harrisburg	State PA	Zip Code (Plus 4) 171011244				

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

PAGE TOTAL
\$ 6,000.00

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 Friends of Nick Miller	Reporting Period From: <u>10/24/2023</u> To: <u>11/27/2023</u>
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				DATE			AMOUNT
Full Name of Contributor	MO	DAY	YEAR	\$			
Jennifer Mann				500.00			
Mailing Address 2845 Parkway Blvd	11	14	2023				
City Allentown State PA Zip Code (Plus 4) 181045377							
Employer Name JLMann Consulting	Occupation Consultant						
Employer Mailing Address/Principal Place of Business 2845 Parkway Blvd	City Allentown		State PA	Zip Code (Plus 4) 181045377			
Michael Krajca				500.00			
Mailing Address 624 State Rd	11	26	2023				
City Coopersburg State PA Zip Code (Plus 4) 180361701							
Employer Name Retired	Occupation Retired						
Employer Mailing Address/Principal Place of Business 624 State Rd	City Coopersburg		State PA	Zip Code (Plus 4) 180361701			
Janet Gross				500.00			
Mailing Address 2804 W Gordon St	11	6	2023				
City Allentown State PA Zip Code (Plus 4) 181044851							
Employer Name Not Employed	Occupation Not Employed						
Employer Mailing Address/Principal Place of Business 2804 W Gordon St	City Allentown		State PA	Zip Code (Plus 4) 181044851			
Arjana Etchason				500.00			
Mailing Address 128 N Main St	11	12	2023				
City Allentown State PA Zip Code (Plus 4) 181045354							
Employer Name Not Employed	Occupation Not Employed						
Employer Mailing Address/Principal Place of Business 128 N Main St	City Allentown		State PA	Zip Code (Plus 4) 181045354			

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

PAGE TOTAL
\$ 2,000.00

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: _____ To: _____

			DATE	AMOUNT	
Full Name	MO	DAY	YEAR	\$	
					0.00
Mailing Address					
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 Friends of Nick Miller	Reporting Period From: <u>10/24/2023</u> To: <u>11/27/2023</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

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

Name of Filing Committee or Candidate	Reporting Period From: _____ To: _____
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				DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR		
Mailing Address				\$	0.00
City	State	Zip Code(Plus 4)			
Employer of Contributor			Occupation		
Employer Mailing Address/Principal Place of Business	City	State	Zip Code(Plus 4)	Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.				PAGE TOTAL	0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
Friends of Nick Miller	From <u>10/24/2023</u> To: <u>11/27/2023</u>

				DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR		
ActBlue	11	8	2023	\$	18.73
Mailing Address 366 Summer St					
City Somerville	State MA	Zip Code (Plus 4) 021443132	Description of Expenditure Processing Fees		
ActBlue	11	15	2023	\$	18.73
Mailing Address 366 Summer St					
City Somerville	State MA	Zip Code (Plus 4) 021443132	Description of Expenditure Processing Fees		
ActBlue	11	16	2023	\$	18.73
Mailing Address 366 Summer St					
City Somerville	State MA	Zip Code (Plus 4) 021443132	Description of Expenditure Processing Fees		
Pressable Inc.	11	20	2023	\$	25.00
Mailing Address 110 E Houston St # 140					
City San Antonio	State TX	Zip Code (Plus 4) 782052990	Description of Expenditure Website		
State Farm	11	7	2023	\$	50.08
Mailing Address 3438 Hamilton Blvd					
City Allentown	State PA	Zip Code (Plus 4) 181034539	Description of Expenditure Office Insurance		
Wix	11	12	2023	\$	30.74
Mailing Address 500 Terry A Francois Blvd					
City San Francisco	State CA	Zip Code (Plus 4) 941582354	Description of Expenditure Website		
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.					PAGE TOTAL \$ 162.01

SCHEDULE IV
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 Friends of Nick Miller	Reporting Period From: <u>10/24/2023</u> To: <u>11/27/2023</u>
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	DATE			Outstanding Balance of Debt
Name of Creditor	MO	DAY	YEAR	
Nicholas P Miller				
Mailing Address 202 N 17th St	4	8	2022	\$ 10,000.00
City Allentown				
State PA				
Zip Code (Plus 4) 181045605				
Description of Debt Loan to Campaign				
Nicholas P Miller				
Mailing Address 202 N 17th St	4	29	2022	\$ 10,000.00
City Allentown				
State PA				
Zip Code (Plus 4) 181045605				
Description of Debt Loan to Campaign				
Nicholas P Miller				
Mailing Address 202 N 17th St	10	26	2022	\$ 15,000.00
City Allentown				
State PA				
Zip Code (Plus 4) 181045605				
Description of Debt Loan to Campaign				

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.	PAGE TOTAL
	\$ 35,000.00