

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 :		20230312		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: CITIZENS FOR KOZAK												
Street Address: PO BOX 1565												
City: BEAVER FALLS						State: PA			Zip Code: 15010			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY PRIMARY	POST-	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2024	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	5	2024				
									(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		3	5	2024		4	8	2024				
A. Amount Brought Forward From Last Report						\$ 44,915.32						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 148.90						
C. Total Funds Available (Sum Of Lines A and B)						\$ 45,064.22						
D. Total Expenditures (From Schedule III)						\$ 3,251.08						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 41,813.14						
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 of Person Submitting Report

Signature

Printed Name

My Commission Expires

Email

MO DAY YR

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 of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
CITIZENS FOR KOZAK	From: <u>3/5/2024</u> To: <u>4/8/2024</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 65.62

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)	\$ 80.00
TOTAL for the Reporting Period (2)	\$ 80.00

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.)	\$ 145.62
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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	\$ 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

Name of Filing Committee or Candidate CITIZENS FOR KOZAK	Reporting Period From: <u>3/5/2024</u> To: <u>4/8/2024</u>
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					DATE			AMOUNT	
Full Name of Contributor					MO	DAY	YEAR	\$80.00	
ROBERT BOULWARE									
Mailing Address					3	29	2024		
303 SQUIRE CIRCLE		State	Zip Code (Plus 4)						
City		PITTSBURGH	PA	15212					

PAGE TOTAL	
\$	80.00

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

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	
	From:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$	0.00
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:

			DATE			AMOUNT	
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
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 From: To:
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			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		Reporting Period	
CITIZENS FOR KOZAK		From: <u>3/5/2024</u> To: <u>4/8/2024</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 RECIEVED - 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:
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
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:

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
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
CITIZENS FOR KOZAK	From <u>3/5/2024</u> To: <u>4/8/2024</u>

				DATE	AMOUNT		
To Whom Paid WINRED				MO	DAY	YEAR	\$ 0.62
Mailing Address				3	19	2024	
City	State	Zip Code (Plus 4)	Description of Expenditure DONATION PROCESSING FEE				
To Whom Paid SHEETZ				MO	DAY	YEAR	\$ 76.25
Mailing Address 3611 4TH AVENUE				1	8	2024	
City BEAVER FALLS	State PA	Zip Code (Plus 4) 15010	Description of Expenditure CONSTITUENT GIFTS				
To Whom Paid WINRED				MO	DAY	YEAR	\$ 3.28
Mailing Address				3	29	2024	
City	State	Zip Code (Plus 4)	Description of Expenditure DONATION PROCESSING FEE				
To Whom Paid THE SPORTS FACTORY				MO	DAY	YEAR	\$ 90.00
Mailing Address 917 3RD AVENUE				3	14	2024	
City NEW BRIGHTON	State PA	Zip Code (Plus 4) 15066	Description of Expenditure CAMPAIGN SHIRTS				
To Whom Paid WINRED				MO	DAY	YEAR	\$ 1.97
Mailing Address				4	8	2024	
City	State	Zip Code (Plus 4)	Description of Expenditure DONATION PROCESSING FEE				
To Whom Paid SQUARESPACE				MO	DAY	YEAR	\$ 24.38
Mailing Address 225 VARICK ST				3	14	2024	
City NEW YORK	State NY	Zip Code (Plus 4) 10014	Description of Expenditure CAMPAIGN WEBSITE				

To Whom Paid THE SPORTS FACTORY			MO	DAY	YEAR	\$ 90.00
Mailing Address 917 3RD AVENUE			3	19	2024	
City NEW BRIGHTON	State PA	Zip Code (Plus 4) 15066	Description of Expenditure CAMPAIGN SHIRTS			

To Whom Paid M7 AGENCY			MO	DAY	YEAR	\$ 1,500.00
Mailing Address 295 3RD ST			3	27	2024	
City BEAVER	State PA	Zip Code (Plus 4) 15009	Description of Expenditure VIDEO PRODUCTION			

To Whom Paid VENEZIE SPORTING GOODS			MO	DAY	YEAR	\$ 30.50
Mailing Address 512 LAWRENCE AVE, #1961			3	27	2024	
City ELLWOOD CITY	State PA	Zip Code (Plus 4) 16117	Description of Expenditure CAMPAIGN SHIRTS			

To Whom Paid DESIGNWORKS SIGNS			MO	DAY	YEAR	\$ 1,187.20
Mailing Address 1012 3RD AVENUE			4	5	2024	
City NEW BRIGHTON	State PA	Zip Code (Plus 4) 15066	Description of Expenditure CAMPAIGN SIGNS			

To Whom Paid THE HOME DEPOT			MO	DAY	YEAR	\$ 287.13
Mailing Address 2670 CONSTITUTION BLVD			4	8	2024	
City BEAVER FALLS	State PA	Zip Code (Plus 4) 15010	Description of Expenditure CAMPAIGN SIGNS			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 3,291.33

