

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 :		2024C0891		Report Filed By :	CANDIDATE	<input checked="" type="checkbox"/>	COMMITTEE	<input type="checkbox"/>	LOBBYIST	<input type="checkbox"/>	
Name of Filing Committee, Candidate or Lobbyist: CIESIELSKI, NICKOLAS MARK											
Street Address:											
City:					State:		Zip Code: 15601				
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. X	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2024	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	Party Code	County Code
STATE TREASURER					MO	DAY	YEAR	-1	TRE	LIB	65
					11	5	2024	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		5	14	2024		9	16	2024			
A. Amount Brought Forward From Last Report					\$ 0.00						
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 468.64						
C. Total Funds Available (Sum Of Lines A and B)					\$ 468.64						
D. Total Expenditures (From Schedule III)					\$ 468.64						
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 0.00						
F. Value Of In-Kind Contributions Received (From Schedule II)					\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)					\$ 338.64						

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

Printed Name

Signature

Email

My Commission Expires

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
CIESIELSKI, NICKOLAS MARK	From: <u>5/14/2024</u> To: <u>9/16/2024</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 75.00

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)	\$ 55.00
TOTAL for the Reporting Period (2)	\$ 55.00

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)	\$ 338.64

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.)	\$ 468.64
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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 CIESIELSKI, NICKOLAS MARK	Reporting Period From: <u>5/14/2024</u> To: <u>9/16/2024</u>
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				DATE			AMOUNT	
Full Name of Contributor Gretchen Brocard				MO	DAY	YEAR	\$ 55.00	
Mailing Address 496 Sybil Lane				8	3	2024		
City	Marietta	State	Zip Code (Plus 4)					
		GA	30067					

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

PAGE TOTAL
\$ 55.00

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	
	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 CIESIELSKI, NICKOLAS MARK	Reporting Period From: <u>5/14/2024</u> To: <u>9/16/2024</u>
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				DATE		AMOUNT	
Full Name				MO	DAY	YEAR	\$ 338.64
Nick Ciesielski							
Mailing Address							
1346 Denton St							
City		State	Zip Code (Plus 4)	9	16	2024	
Greensburg		PA	15601				
Receipt Description							
Loan to campaign to cover expenses							

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

PAGE TOTAL
\$ 338.64

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	
CIESIELSKI, NICKOLAS MARK		From: <u>5/14/2024</u> To: <u>9/16/2024</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
CIESIELSKI, NICKOLAS MARK	From <u>5/14/2024</u> To: <u>9/16/2024</u>

				DATE		AMOUNT	
To Whom Paid Signs on the Cheap				MO	DAY	YEAR	\$ 168.67
Mailing Address 11525A Stonehollow Dr Ste 100				9	10	2024	
City Austin		State TX	Zip Code (Plus 4) 78758	Description of Expenditure Printing Costs Yard Signs			
To Whom Paid FedEx				MO	DAY	YEAR	\$ 20.72
Mailing Address 5109 US-30				7	18	2024	
City Greensburg		State PA	Zip Code (Plus 4) 15601	Description of Expenditure Printing Costs			
To Whom Paid A2 Hosting				MO	DAY	YEAR	\$ 71.88
Mailing Address PO BOX 2998				5	14	2024	
City Ann Arbor		State MI	Zip Code (Plus 4) 48106	Description of Expenditure Utilities for Campaign Website			
To Whom Paid Vista Print				MO	DAY	YEAR	\$ 109.78
Mailing Address 275 Wyman St				9	15	2024	
City Waltham		State MA	Zip Code (Plus 4) 02451	Description of Expenditure Printing Costs			
To Whom Paid Staples				MO	DAY	YEAR	\$ 97.59
Mailing Address 6207 Rte 30				5	14	2024	
City Greensburg		State PA	Zip Code (Plus 4) 15601	Description of Expenditure Printing Costs			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL \$ 468.64

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 CIESIELSKI, NICKOLAS MARK	Reporting Period From: <u>5/14/2024</u> To: <u>9/16/2024</u>
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				DATE	Outstanding Balance of Debt		
Name of Creditor Nick Ciesielski				MO	DAY	YEAR	\$ 338.64
Mailing Address 1346 Denton St				9	16	2024	
City Greensburg		State PA	Zip Code (Plus 4) 15601	Description of Debt Loan to Campaign to Cover Expenses			
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL \$ 338.64