

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: 18101-1799			
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-PRIMARY	3.	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-ELECTION	6.	TERMINATION REPORT?	Yes <input type="checkbox"/> 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
				MO	DAY	YEAR			
				11	5	2024	(SEE INSTRUCTIONS FOR CODES)		
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO		MO	DAY	YEAR
		1	1	2024			4	8	2024
A. Amount Brought Forward From Last Report						\$ 30,273.82			
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 2,515.00			
C. Total Funds Available (Sum Of Lines A and B)						\$ 32,788.82			
D. Total Expenditures (From Schedule III)						\$ 15,065.30			
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 17,723.52			
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 0.00			
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 25,000.00			

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 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
FRIENDS OF NICK MILLER	From: <u>1/1/2024</u> To: <u>4/8/2024</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 15.00

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)	\$ 2,500.00
TOTAL for the Reporting Period (3)	\$ 2,500.00

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.)	\$ 2,515.00
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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	\$ 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	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

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 FRIENDS OF NICK MILLER	Reporting Period From: <u>1/1/2024</u> To: <u>4/8/2024</u>
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				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$2,500.00
Raymond Lahoud				1	20	2024	
Mailing Address2063 Flint Hill Rd							
CityCoopersburg		StatePA	Zip Code (Plus 4)180369211				
Employer NameNorris McLaughlin				OccupationAttorney			
Employer Mailing Address/Principal Place of Business			City		State		Zip Code (Plus 4)
515 Hamilton StSte 502			Allentown		PA		181011513

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

PAGE TOTAL
\$ 2,500.00

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	
FRIENDS OF NICK MILLER		From: <u>1/1/2024</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
FRIENDS OF NICK MILLER	From <u>1/1/2024</u> To: <u>4/8/2024</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
ActBlue				
Mailing Address 366 Summer St	4	3	2024	\$ 0.79
City Somerville	State MA	Zip Code (Plus 4) 021443132	Description of Expenditure Credit Card Processing Fee	
To Whom Paid	MO	DAY	YEAR	
ActBlue				
Mailing Address 366 Summer St	4	3	2024	\$ 92.73
City Somerville	State MA	Zip Code (Plus 4) 021443132	Description of Expenditure Credit Card Processing Fee	
To Whom Paid	MO	DAY	YEAR	
Allentown CW Presidents Council				
Mailing Address 726 1/2 W Tilghman St	4	3	2024	\$ 225.00
City Allentown	State PA	Zip Code (Plus 4) 181022324	Description of Expenditure Ad Sponsorship	
To Whom Paid	MO	DAY	YEAR	
CIRCLEquill.com				
Mailing Address Information Requested	2	8	2024	\$ 57.23
City Allentown	State PA	Zip Code (Plus 4) 18105	Description of Expenditure Office Supplies	
To Whom Paid	MO	DAY	YEAR	
Friends of Stefanies Rafes				
Mailing Address Information Requested	1	20	2024	\$ 500.00
City Harrisburg	State PA	Zip Code (Plus 4) 17101	Description of Expenditure Contribution	
To Whom Paid	MO	DAY	YEAR	
Kari Holmes				
Mailing Address Information Requested	4	5	2024	\$ 200.00
City Allentown	State PA	Zip Code (Plus 4) 18105	Description of Expenditure Ad Sponsorship	

To Whom Paid			MO	DAY	YEAR	\$ 125.00
Lehigh Valley Labor Council						
Mailing Address 526 S Berks St			4	3	2024	
City Allentown	State PA	Zip Code (Plus 4) 181046648	Description of Expenditure Ad Sponsorship			
To Whom Paid			MO	DAY	YEAR	\$ 200.00
Aidan Levinson						
Mailing Address 5271 Wheatland Dr			2	20	2024	
City Zionsville	State PA	Zip Code (Plus 4) 180922080	Description of Expenditure Campaign Work			
To Whom Paid			MO	DAY	YEAR	\$ 400.00
Aidan Levinson						
Mailing Address 5271 Wheatland Dr			2	26	2024	
City Zionsville	State PA	Zip Code (Plus 4) 180922080	Description of Expenditure Campaign Work			
To Whom Paid			MO	DAY	YEAR	\$ 500.00
Light on the Horizon						
Mailing Address 1101 W Hamilton St Ste 273			2	21	2024	
City Allentown	State PA	Zip Code (Plus 4) 181011043	Description of Expenditure Donation			
To Whom Paid			MO	DAY	YEAR	\$ 191.10
LV Print Center						
Mailing Address 1701 Union Blvd			4	3	2024	
City Allentown	State PA	Zip Code (Plus 4) 181091685	Description of Expenditure Print & Mail Services			
To Whom Paid			MO	DAY	YEAR	\$ 2,500.00
Nicole for PA						
Mailing Address 1524 High Rd			1	28	2024	
City Jefferson Hills	State PA	Zip Code (Plus 4) 150253524	Description of Expenditure Contribution			
To Whom Paid			MO	DAY	YEAR	\$ 25.00
Pressable Inc.						
Mailing Address 110 E Houston St # 140			1	20	2024	
City San Antonio	State TX	Zip Code (Plus 4) 782052990	Description of Expenditure Website			
To Whom Paid			MO	DAY	YEAR	\$ 25.00
Pressable Inc.						
Mailing Address 110 E Houston St # 140			2	20	2024	
City San Antonio	State TX	Zip Code (Plus 4) 782052990	Description of Expenditure Website			

To Whom Paid			MO	DAY	YEAR	\$ 25.00
Pressable Inc.						
Mailing Address 110 E Houston St # 140			3	20	2024	
City San Antonio	State TX	Zip Code (Plus 4) 782052990	Description of Expenditure Website			
To Whom Paid			MO	DAY	YEAR	\$ 4,090.06
Rittenhouse Political Partners						
Mailing Address 121 S Broad St			2	2	2024	
City Philadelphia	State PA	Zip Code (Plus 4) 191074518	Description of Expenditure Consulting Fees and Expenses			
To Whom Paid			MO	DAY	YEAR	\$ 5,517.23
Rittenhouse Political Partners						
Mailing Address 121 S Broad St			3	25	2024	
City Philadelphia	State PA	Zip Code (Plus 4) 191074518	Description of Expenditure Consulting Fees and Expenses			
To Whom Paid			MO	DAY	YEAR	\$ 141.00
US Postal Service						
Mailing Address 442 Hamilton St			3	23	2024	
City Allentown	State PA	Zip Code (Plus 4) 181011619	Description of Expenditure PO Box Fee			
To Whom Paid			MO	DAY	YEAR	\$ 30.74
Wix						
Mailing Address 500 Terry A Francois Blvd			1	12	2024	
City San Francisco	State CA	Zip Code (Plus 4) 941582354	Description of Expenditure Website			
To Whom Paid			MO	DAY	YEAR	\$ 30.74
Wix						
Mailing Address 500 Terry A Francois Blvd			2	12	2024	
City San Francisco	State CA	Zip Code (Plus 4) 941582354	Description of Expenditure Website			
To Whom Paid			MO	DAY	YEAR	\$ 36.04
Wix						
Mailing Address 500 Terry A Francois Blvd			3	11	2024	
City San Francisco	State CA	Zip Code (Plus 4) 941582354	Description of Expenditure Website			
To Whom Paid			MO	DAY	YEAR	\$ 152.64
Wix						
Mailing Address 500 Terry A Francois Blvd			3	20	2024	
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

\$ 15,065.30

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>1/1/2024</u> To: <u>4/8/2024</u>
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				DATE		Outstanding Balance of Debt	
Name of Creditor Nicholas P Miller				MO	DAY	YEAR	\$ 10,000.00
Mailing Address 202 N 17th St				4	8	2022	
City Allentown	State PA	Zip Code (Plus 4) 181045605		Description of Debt Loan to Campaign			
Name of Creditor Nicholas P Miller				MO	DAY	YEAR	\$ 10,000.00
Mailing Address 202 N 17th St				4	29	2022	
City Allentown	State PA	Zip Code (Plus 4) 181045605		Description of Debt Loan to Campaign			
Name of Creditor Nicholas P Miller				MO	DAY	YEAR	\$ 5,000.00
Mailing Address 202 N 17th St				10	26	2022	
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 \$ 25,000.00