

# 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:   |                          |                   |                         |                             |                      |   |   |   |  |            |             |
| City: ALLENTOWN   |                          |                   |                         | State: PA                   |                      | Zip Code: 18101-1799                          |   |   |  |            |             |
| TYPE OF REPORT<br><br>(place X to the right of report type)             | 6TH TUESDAY PRE-PRIMARY  | 1.                | 2ND FRIDAY PRE-PRIMARY  | 2.                          | 30 DAY POST-PRIMARY  | 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 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 | County Code |
|   |                          |                   |                         |                             | MO                   | DAY   | YEAR                                      |   |  |            |             |
|   |                          |                   |                         |                             | 11                   | 5   | 2024                                      |   |  |            |             |
| Summary of Receipts and Expenditures from:                              |                          |                   |                         |                             | MO                   | DAY   | YEAR                                      | FOR OFFICE USE ONLY                     |  |            |             |
|   |                          |                   |                         |                             | 4                    | 9   | 2024                                      |   |  |            | TO          |
|   |                          |                   |                         |                             | 5                    | 13  | 2024                                      |   |  |            |             |
| A. Amount Brought Forward From Last Report                              |                          |                   |                         |                             | \$                   |   | 17,723.52                                 |   |  |            |             |
| B. Total Monetary Contributions And Receipts (From Schedule I)          |                          |                   |                         |                             | \$                   |   | 74,025.00                                 |   |  |            |             |
| C. Total Funds Available (Sum Of Lines A and B)                         |                          |                   |                         |                             | \$                   |   | 91,748.52                                 |   |  |            |             |
| D. Total Expenditures (From Schedule III)                               |                          |                   |                         |                             | \$                   |   | 4,922.14                                  |   |  |            |             |
| E. Ending Cash Balance (Subtract Line D From Line C)                    |                          |                   |                         |                             | \$                   |   | 86,826.38                                 |   |  |            |             |
| 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**

|  |  |
|--|--|
| <b>Name of Filing Committee or Candidate</b> | <b>Reporting Period</b>                    |
| FRIENDS OF NICK MILLER                       | From: <u>4/9/2024</u> To: <u>5/13/2024</u> |

|  |         |
|--|---------|
| <b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b> |         |
| <b>TOTAL for the Reporting Period (1)</b>                                      | \$ 0.00 |

|  |           |
|--|-----------|
| <b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b> |           |
| <b>Contributions Received From Political Committees (Part A)</b>                 | \$ 125.00 |
| <b>All Other Contributions (Part B)</b>  | \$ 650.00 |
| <b>TOTAL for the Reporting Period (2)</b>  | \$ 775.00 |

|   |              |
|---|--------------|
| <b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b> |              |
| <b>Contributions Received From Political Committees (Part C)</b>        | \$ 25,500.00 |
| <b>All Other Contributions (Part D)</b>                                 | \$ 47,750.00 |
| <b>TOTAL for the Reporting Period (3)</b>                               | \$ 73,250.00 |

|  |         |
|--|---------|
| <b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b> |         |
| <b>TOTAL for the Reporting Period (4)</b>  | \$ 0.00 |

|   |              |
|---|--------------|
| <b>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.)</b> | \$ 74,025.00 |
|---|--------------|

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             |
| FRIENDS OF NICK MILLER                | From: 4/9/2024 To: 5/13/2024 |

| DATE |  |  |  | AMOUNT |
|------|--|--|--|--------|
|------|--|--|--|--------|

| Full Name of Contributing Committee |          |                   | MO | DAY | YEAR | \$ 125.00 |
|-------------------------------------|----------|-------------------|----|-----|------|-----------|
| Penn HY-PAC                         |          |                   | 4  | 23  | 2024 |           |
| Mailing Address                     |          |                   |    |     |      |           |
| City                                | Hatfield | State             |    |     |      |           |
|                                     |          | PA                |    |     |      |           |
|                                     |          | Zip Code (Plus 4) |    |     |      |           |
|                                     |          | 194402521         |    |     |      |           |

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

|            |
|------------|
| PAGE TOTAL |
| \$ 125.00  |

## 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)**

|  |  |
|--|--|
| <b>Name of Filing Committee or Candidate</b> | <b>Reporting Period</b>                    |
| FRIENDS OF NICK MILLER                       | From: <u>4/9/2024</u> To: <u>5/13/2024</u> |

|                          |               |       |    | DATE              |     | AMOUNT    |           |
|--------------------------|---------------|-------|----|-------------------|-----|-----------|-----------|
| Full Name of Contributor |               |       |    | MO                | DAY | YEAR      | \$ 100.00 |
| Roy Afflerbach           |               |       |    | 4                 | 16  | 2024      |           |
| Mailing Address          |               |       |    |                   |     |           |           |
| City                     | York          | State | PA | Zip Code (Plus 4) |     | 174067537 |           |
| Full Name of Contributor |               |       |    | MO                | DAY | YEAR      | \$ 200.00 |
| Alexandria Kile          |               |       |    | 4                 | 26  | 2024      |           |
| Mailing Address          |               |       |    |                   |     |           |           |
| City                     | Schnecksville | State | PA | Zip Code (Plus 4) |     | 180782231 |           |
| Full Name of Contributor |               |       |    | MO                | DAY | YEAR      | \$ 100.00 |
| Stan Rugis               |               |       |    | 4                 | 27  | 2024      |           |
| Mailing Address          |               |       |    |                   |     |           |           |
| City                     | Center Valley | State | PA | Zip Code (Plus 4) |     | 180348686 |           |
| Full Name of Contributor |               |       |    | MO                | DAY | YEAR      | \$ 250.00 |
| Ellie Vogiatzoglou       |               |       |    | 5                 | 9   | 2024      |           |
| Mailing Address          |               |       |    |                   |     |           |           |
| City                     | Pennington    | State | NJ | Zip Code (Plus 4) |     | 085345009 |           |

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

|                   |
|-------------------|
| <b>PAGE TOTAL</b> |
| \$ 650.00         |

## 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.**

|  |   |
|--|---|
| <b>Name of Filing Committee or Candidate</b><br><br>FRIENDS OF NICK MILLER | <b>Reporting Period</b><br><br><b>From:</b> <u>4/9/2024</u> <b>To:</b> <u>5/13/2024</u> |
|--|---|

|  |          |                             |  | DATE |     | AMOUNT |             |
|--|----------|-----------------------------|--|------|-----|--------|-------------|
| Full Name of Contributing Committee                  |          |                             |  | MO   | DAY | YEAR   | \$ 1,000.00 |
| AFSCME Council 13 Political & Legislative            |          |                             |  | 4    | 16  | 2024   |             |
| Mailing Address                                      |          |                             |  |      |     |        |             |
| City Harrisburg                                      | State PA | Zip Code (Plus 4) 171111507 |  |      |     |        |             |
| Full Name of Contributing Committee                  |          |                             |  | MO   | DAY | YEAR   | \$ 1,000.00 |
| APSCUF/CAP-PA  |          |                             |  | 4    | 23  | 2024   |             |
| Mailing Address                                      |          |                             |  |      |     |        |             |
| City Harrisburg                                      | State PA | Zip Code (Plus 4) 171011203 |  |      |     |        |             |
| Full Name of Contributing Committee                  |          |                             |  | MO   | DAY | YEAR   | \$ 1,000.00 |
| CPA PAC  |          |                             |  | 4    | 12  | 2024   |             |
| Mailing Address                                      |          |                             |  |      |     |        |             |
| City Harrisburg                                      | State PA | Zip Code (Plus 4) 171011163 |  |      |     |        |             |
| Full Name of Contributing Committee                  |          |                             |  | MO   | DAY | YEAR   | \$ 1,000.00 |
| Dillon for Senate                                    |          |                             |  | 4    | 16  | 2024   |             |
| Mailing Address                                      |          |                             |  |      |     |        |             |
| City Newtown   | State PA | Zip Code (Plus 4) 189401478 |  |      |     |        |             |
| Full Name of Contributing Committee                  |          |                             |  | MO   | DAY | YEAR   | \$ 1,000.00 |
| Essential Utilities, Inc. Political Action Committee |          |                             |  | 4    | 16  | 2024   |             |
| Mailing Address                                      |          |                             |  |      |     |        |             |
| City Bryn Mawr                                       | State PA | Zip Code (Plus 4) 190103402 |  |      |     |        |             |
| Full Name of Contributing Committee                  |          |                             |  | MO   | DAY | YEAR   | \$ 1,000.00 |
| Friends of Freedom & Convenience                     |          |                             |  | 4    | 16  | 2024   |             |
| Mailing Address                                      |          |                             |  |      |     |        |             |
| City York  | State PA | Zip Code (Plus 4) 174048495 |  |      |     |        |             |

|  |          |                             |    |     |      |             |
|--|----------|-----------------------------|----|-----|------|-------------|
| Full Name of Contributing Committee<br>GGR INC PAC                                     |          |                             | MO | DAY | YEAR | \$ 500.00   |
| Mailing Address  |          |                             | 4  | 12  | 2024 |             |
| City Harrisburg  | State PA | Zip Code (Plus 4) 171011510 |    |     |      |             |
| Full Name of Contributing Committee<br>Highmark PAC                                    |          |                             | MO | DAY | YEAR | \$ 500.00   |
| Mailing Address  |          |                             | 4  | 16  | 2024 |             |
| City Camp Hill   | State PA | Zip Code (Plus 4) 170111741 |    |     |      |             |
| Full Name of Contributing Committee<br>LAWPAC  |          |                             | MO | DAY | YEAR | \$ 2,500.00 |
| Mailing Address  |          |                             | 4  | 23  | 2024 |             |
| City Harrisburg  | State PA | Zip Code (Plus 4) 171011505 |    |     |      |             |
| Full Name of Contributing Committee<br>Malady & Wooten PAC                             |          |                             | MO | DAY | YEAR | \$ 500.00   |
| Mailing Address  |          |                             | 4  | 23  | 2024 |             |
| City Harrisburg  | State PA | Zip Code (Plus 4) 171011114 |    |     |      |             |
| Full Name of Contributing Committee<br>Mid-Atlantic Laborers' Political League (MALPL) |          |                             | MO | DAY | YEAR | \$ 2,500.00 |
| Mailing Address  |          |                             | 5  | 9   | 2024 |             |
| City Reston  | State VA | Zip Code (Plus 4) 201905686 |    |     |      |             |
| Full Name of Contributing Committee<br>PA Bankers Public Affairs Committee PAC         |          |                             | MO | DAY | YEAR | \$ 1,000.00 |
| Mailing Address  |          |                             | 4  | 16  | 2024 |             |
| City Harrisburg  | State PA | Zip Code (Plus 4) 171101535 |    |     |      |             |
| Full Name of Contributing Committee<br>PA Realtors PAC                                 |          |                             | MO | DAY | YEAR | \$ 1,000.00 |
| Mailing Address  |          |                             | 4  | 27  | 2024 |             |
| City Lemoyne   | State PA | Zip Code (Plus 4) 170431241 |    |     |      |             |
| Full Name of Contributing Committee<br>PA-THA-PAC                                      |          |                             | MO | DAY | YEAR | \$ 5,000.00 |
| Mailing Address  |          |                             | 4  | 16  | 2024 |             |
| City Bensalem  | State PA | Zip Code (Plus 4) 190200300 |    |     |      |             |

|   |                    |                                       |           |            |             |             |
|---|--------------------|---------------------------------------|-----------|------------|-------------|-------------|
| <b>Full Name of Contributing Committee</b><br>PBA PAC                                       |                    |                                       | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 1,000.00 |
| <b>Mailing Address</b>  |                    |                                       | 4         | 16         | 2024        |             |
| <b>City</b> Harrisburg  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>171011221 |           |            |             |             |
| <b>Full Name of Contributing Committee</b><br>Pennsylvania Restaurant & Lodging Association |                    |                                       | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 500.00   |
| <b>Mailing Address</b>  |                    |                                       | 4         | 16         | 2024        |             |
| <b>City</b> Harrisburg  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>171011024 |           |            |             |             |
| <b>Full Name of Contributing Committee</b><br>SGA PAC                                       |                    |                                       | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 2,500.00 |
| <b>Mailing Address</b>  |                    |                                       | 4         | 23         | 2024        |             |
| <b>City</b> Fairless Hills  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>190302615 |           |            |             |             |
| <b>Full Name of Contributing Committee</b><br>Troopers Association PAC (TAP)                |                    |                                       | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 1,000.00 |
| <b>Mailing Address</b>  |                    |                                       | 4         | 16         | 2024        |             |
| <b>City</b> Harrisburg  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>171109439 |           |            |             |             |
| <b>Full Name of Contributing Committee</b><br>Vision Committee                              |                    |                                       | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 1,000.00 |
| <b>Mailing Address</b>  |                    |                                       | 4         | 16         | 2024        |             |
| <b>City</b> Harrisburg  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>171011801 |           |            |             |             |

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

|                   |
|-------------------|
| <b>PAGE TOTAL</b> |
| \$ 25,500.00      |

**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.)**

|  |   |
|--|---|
| <b>Name of Filing Committee or Candidate</b><br><br>FRIENDS OF NICK MILLER | <b>Reporting Period</b><br><br><b>From:</b> <u>4/9/2024</u> <b>To:</b> <u>5/13/2024</u> |
|--|---|

|  |                 |       |                   | DATE                 | AMOUNT            |      |
|--|-----------------|-------|-------------------|----------------------|-------------------|------|
| Full Name of Contributor                             |                 |       |                   | MO                   | DAY               | YEAR |
| Charles Young  |                 |       |                   |                      |                   |      |
| Mailing Address                                      |                 |       |                   | 5                    | 9                 | 2024 |
| City   | Chester Springs | State | Zip Code (Plus 4) |                      |                   |      |
|  |                 | PA    | 194252645         |                      |                   |      |
| Employer Name Alert Fire Protection Inc              |                 |       |                   | Occupation Owner     |                   |      |
| Employer Mailing Address/Principal Place of Business |                 |       | City              | State                | Zip Code (Plus 4) |      |
|  |                 |       | Chester Springs   | PA                   | 194259553         |      |
| Full Name of Contributor                             |                 |       |                   | MO                   | DAY               | YEAR |
| JB Reilly and Kathleen Waterbury                     |                 |       |                   |                      |                   |      |
| Mailing Address                                      |                 |       |                   | 5                    | 9                 | 2024 |
| City   | Bethlehem       | State | Zip Code (Plus 4) |                      |                   |      |
|  |                 | PA    | 180155259         |                      |                   |      |
| Employer Name City Center Investment Corporation     |                 |       |                   | Occupation President |                   |      |
| Employer Mailing Address/Principal Place of Business |                 |       | City              | State                | Zip Code (Plus 4) |      |
|  |                 |       | Allentown         | PA                   | 181012194         |      |
| Full Name of Contributor                             |                 |       |                   | MO                   | DAY               | YEAR |
| Kostadinovs Vogia                                    |                 |       |                   |                      |                   |      |
| Mailing Address                                      |                 |       |                   | 5                    | 9                 | 2024 |
| City   | Titusville      | State | Zip Code (Plus 4) |                      |                   |      |
|  |                 | NJ    | 085602102         |                      |                   |      |
| Employer Name Stonetech Fabrication                  |                 |       |                   | Occupation Owner     |                   |      |
| Employer Mailing Address/Principal Place of Business |                 |       | City              | State                | Zip Code (Plus 4) |      |
|  |                 |       | Trenton           | NJ                   | 086383916         |      |
| Full Name of Contributor                             |                 |       |                   | MO                   | DAY               | YEAR |
| Joseph Topper  |                 |       |                   |                      |                   |      |
| Mailing Address                                      |                 |       |                   | 5                    | 9                 | 2024 |
| City   | Bethlehem       | State | Zip Code (Plus 4) |                      |                   |      |
|  |                 | PA    | 180155828         |                      |                   |      |
| Employer Name Retired                                |                 |       |                   | Occupation Retired   |                   |      |
| Employer Mailing Address/Principal Place of Business |                 |       | City              | State                | Zip Code (Plus 4) |      |
|  |                 |       | Bethlehem         | PA                   | 180155828         |      |



|   |                    |                                       |                         |   |                                       |                     |                  |
|---|--------------------|---------------------------------------|-------------------------|---|---------------------------------------|---------------------|------------------|
| <b>Full Name of Contributor</b><br>Paul Scheuerman          |                    |                                       |                         | <b>MO</b><br>5                          | <b>DAY</b><br>9                       | <b>YEAR</b><br>2024 | <b>\$</b> 500.00 |
| <b>Mailing Address</b>                                      |                    |                                       |                         |   |                                       |                     |                  |
| <b>City</b> Orefield  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>180699068 |                         |   |                                       |                     |                  |
| <b>Employer Name</b> Information Requested                  |                    |                                       |                         | <b>Occupation</b> Information Requested |                                       |                     |                  |
| <b>Employer Mailing Address/Principal Place of Business</b> |                    |                                       | <b>City</b><br>Orefield | <b>State</b><br>PA                      | <b>Zip Code (Plus 4)</b><br>180699068 |                     |                  |

  

|   |                    |                                       |                             |                                   |                                       |                     |                  |
|---|--------------------|---------------------------------------|-----------------------------|-----------------------------------|---------------------------------------|---------------------|------------------|
| <b>Full Name of Contributor</b><br>Mustafa Rashed           |                    |                                       |                             | <b>MO</b><br>4                    | <b>DAY</b><br>23                      | <b>YEAR</b><br>2024 | <b>\$</b> 500.00 |
| <b>Mailing Address</b>                                      |                    |                                       |                             |                                   |                                       |                     |                  |
| <b>City</b> Philadelphia                                    | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>191023809 |                             |                                   |                                       |                     |                  |
| <b>Employer Name</b> Bellevue Strategies                    |                    |                                       |                             | <b>Occupation</b> President & CEO |                                       |                     |                  |
| <b>Employer Mailing Address/Principal Place of Business</b> |                    |                                       | <b>City</b><br>Philadelphia | <b>State</b><br>PA                | <b>Zip Code (Plus 4)</b><br>191023809 |                     |                  |

  

|   |                    |                                       |                          |  |                                       |                     |                     |
|---|--------------------|---------------------------------------|--------------------------|--|---------------------------------------|---------------------|---------------------|
| <b>Full Name of Contributor</b><br>Andrew Miller            |                    |                                       |                          | <b>MO</b><br>5                             | <b>DAY</b><br>9                       | <b>YEAR</b><br>2024 | <b>\$</b> 10,000.00 |
| <b>Mailing Address</b>                                      |                    |                                       |                          |  |                                       |                     |                     |
| <b>City</b> Perkasio  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>189443870 |                          |  |                                       |                     |                     |
| <b>Employer Name</b> North Star Construction Management     |                    |                                       |                          | <b>Occupation</b> Executive Vice President |                                       |                     |                     |
| <b>Employer Mailing Address/Principal Place of Business</b> |                    |                                       | <b>City</b><br>Allentown | <b>State</b><br>PA                         | <b>Zip Code (Plus 4)</b><br>181012192 |                     |                     |

  

|   |                    |                                       |                             |   |                                       |                     |                  |
|---|--------------------|---------------------------------------|-----------------------------|---|---------------------------------------|---------------------|------------------|
| <b>Full Name of Contributor</b><br>Steven Linden            |                    |                                       |                             | <b>MO</b><br>5                          | <b>DAY</b><br>9                       | <b>YEAR</b><br>2024 | <b>\$</b> 500.00 |
| <b>Mailing Address</b>                                      |                    |                                       |                             |   |                                       |                     |                  |
| <b>City</b> Mullica Hill                                    | <b>State</b><br>NJ | <b>Zip Code (Plus 4)</b><br>080629647 |                             |   |                                       |                     |                  |
| <b>Employer Name</b> Information Requested                  |                    |                                       |                             | <b>Occupation</b> Information Requested |                                       |                     |                  |
| <b>Employer Mailing Address/Principal Place of Business</b> |                    |                                       | <b>City</b><br>Mullica Hill | <b>State</b><br>NJ                      | <b>Zip Code (Plus 4)</b><br>080629647 |                     |                  |

  

|   |                    |                                       |                            |   |                                       |                     |                  |
|---|--------------------|---------------------------------------|----------------------------|---|---------------------------------------|---------------------|------------------|
| <b>Full Name of Contributor</b><br>Steven Krumenacker       |                    |                                       |                            | <b>MO</b><br>5                          | <b>DAY</b><br>9                       | <b>YEAR</b><br>2024 | <b>\$</b> 500.00 |
| <b>Mailing Address</b>                                      |                    |                                       |                            |   |                                       |                     |                  |
| <b>City</b> North Wales                                     | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>194541644 |                            |   |                                       |                     |                  |
| <b>Employer Name</b> Information Requested                  |                    |                                       |                            | <b>Occupation</b> Information Requested |                                       |                     |                  |
| <b>Employer Mailing Address/Principal Place of Business</b> |                    |                                       | <b>City</b><br>North Wales | <b>State</b><br>PA                      | <b>Zip Code (Plus 4)</b><br>194541644 |                     |                  |

  

|   |                    |                                       |                          |                             |                                       |                     |                     |
|---|--------------------|---------------------------------------|--------------------------|-----------------------------|---------------------------------------|---------------------|---------------------|
| <b>Full Name of Contributor</b><br>Craig and Jennifer Johnson |                    |                                       |                          | <b>MO</b><br>5              | <b>DAY</b><br>9                       | <b>YEAR</b><br>2024 | <b>\$</b> 10,000.00 |
| <b>Mailing Address</b>  |                    |                                       |                          |                             |                                       |                     |                     |
| <b>City</b> Coopersburg                                       | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>180362324 |                          |                             |                                       |                     |                     |
| <b>Employer Name</b> North Star Construction Management       |                    |                                       |                          | <b>Occupation</b> President |                                       |                     |                     |
| <b>Employer Mailing Address/Principal Place of Business</b>   |                    |                                       | <b>City</b><br>Allentown | <b>State</b><br>PA          | <b>Zip Code (Plus 4)</b><br>181012192 |                     |                     |

|   |                    |                                       |                              |   |                                       |             |                  |
|---|--------------------|---------------------------------------|------------------------------|---|---------------------------------------|-------------|------------------|
| <b>Full Name of Contributor</b><br>David Hohenshilt         |                    |                                       |                              | <b>MO</b>                               | <b>DAY</b>                            | <b>YEAR</b> | <b>\$</b> 500.00 |
| <b>Mailing Address</b>                                      |                    |                                       |                              | 5                                       | 9                                     | 2024        |                  |
| <b>City</b> Schnecksville                                   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>180782757 |                              |   |                                       |             |                  |
| <b>Employer Name</b> Information Requested                  |                    |                                       |                              | <b>Occupation</b> Information Requested |                                       |             |                  |
| <b>Employer Mailing Address/Principal Place of Business</b> |                    |                                       | <b>City</b><br>Schnecksville | <b>State</b><br>PA                      | <b>Zip Code (Plus 4)</b><br>180782757 |             |                  |

  

|   |                    |                                       |                         |   |                                       |             |                  |
|---|--------------------|---------------------------------------|-------------------------|---|---------------------------------------|-------------|------------------|
| <b>Full Name of Contributor</b><br>Eric Gerencser           |                    |                                       |                         | <b>MO</b>                               | <b>DAY</b>                            | <b>YEAR</b> | <b>\$</b> 500.00 |
| <b>Mailing Address</b>                                      |                    |                                       |                         | 5                                       | 9                                     | 2024        |                  |
| <b>City</b> Wind Gap  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>180919766 |                         |   |                                       |             |                  |
| <b>Employer Name</b> Information Requested                  |                    |                                       |                         | <b>Occupation</b> Information Requested |                                       |             |                  |
| <b>Employer Mailing Address/Principal Place of Business</b> |                    |                                       | <b>City</b><br>Wind Gap | <b>State</b><br>PA                      | <b>Zip Code (Plus 4)</b><br>180919766 |             |                  |

  

|   |                    |                                       |                           |   |                                       |             |                  |
|---|--------------------|---------------------------------------|---------------------------|---|---------------------------------------|-------------|------------------|
| <b>Full Name of Contributor</b><br>Michael Fluck            |                    |                                       |                           | <b>MO</b>                               | <b>DAY</b>                            | <b>YEAR</b> | <b>\$</b> 500.00 |
| <b>Mailing Address</b>                                      |                    |                                       |                           | 5                                       | 9                                     | 2024        |                  |
| <b>City</b> Zionsville                                      | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>180922710 |                           |   |                                       |             |                  |
| <b>Employer Name</b> Information Requested                  |                    |                                       |                           | <b>Occupation</b> Information Requested |                                       |             |                  |
| <b>Employer Mailing Address/Principal Place of Business</b> |                    |                                       | <b>City</b><br>Zionsville | <b>State</b><br>PA                      | <b>Zip Code (Plus 4)</b><br>180922710 |             |                  |

  

|   |                    |                                       |                            |   |                                       |             |                  |
|---|--------------------|---------------------------------------|----------------------------|---|---------------------------------------|-------------|------------------|
| <b>Full Name of Contributor</b><br>Allen Fisher             |                    |                                       |                            | <b>MO</b>                               | <b>DAY</b>                            | <b>YEAR</b> | <b>\$</b> 500.00 |
| <b>Mailing Address</b>                                      |                    |                                       |                            | 5                                       | 9                                     | 2024        |                  |
| <b>City</b> Westminster                                     | <b>State</b><br>MD | <b>Zip Code (Plus 4)</b><br>211582119 |                            |   |                                       |             |                  |
| <b>Employer Name</b> Information Requested                  |                    |                                       |                            | <b>Occupation</b> Information Requested |                                       |             |                  |
| <b>Employer Mailing Address/Principal Place of Business</b> |                    |                                       | <b>City</b><br>Westminster | <b>State</b><br>MD                      | <b>Zip Code (Plus 4)</b><br>211582119 |             |                  |

  

|   |                    |                                       |                          |   |                                       |             |                    |
|---|--------------------|---------------------------------------|--------------------------|---|---------------------------------------|-------------|--------------------|
| <b>Full Name of Contributor</b><br>Christopher Cipollini    |                    |                                       |                          | <b>MO</b>                               | <b>DAY</b>                            | <b>YEAR</b> | <b>\$</b> 1,000.00 |
| <b>Mailing Address</b>                                      |                    |                                       |                          | 5                                       | 9                                     | 2024        |                    |
| <b>City</b> Allentown                                       | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>181048632 |                          |   |                                       |             |                    |
| <b>Employer Name</b> Information Requested                  |                    |                                       |                          | <b>Occupation</b> Information Requested |                                       |             |                    |
| <b>Employer Mailing Address/Principal Place of Business</b> |                    |                                       | <b>City</b><br>Allentown | <b>State</b><br>PA                      | <b>Zip Code (Plus 4)</b><br>181048632 |             |                    |

  

|   |                    |                                       |                         |   |                                       |             |                    |
|---|--------------------|---------------------------------------|-------------------------|---|---------------------------------------|-------------|--------------------|
| <b>Full Name of Contributor</b><br>Joseph Bonifante         |                    |                                       |                         | <b>MO</b>                               | <b>DAY</b>                            | <b>YEAR</b> | <b>\$</b> 1,000.00 |
| <b>Mailing Address</b>                                      |                    |                                       |                         | 5                                       | 9                                     | 2024        |                    |
| <b>City</b> Ligonier  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>156582247 |                         |   |                                       |             |                    |
| <b>Employer Name</b> Information Requested                  |                    |                                       |                         | <b>Occupation</b> Information Requested |                                       |             |                    |
| <b>Employer Mailing Address/Principal Place of Business</b> |                    |                                       | <b>City</b><br>Ligonier | <b>State</b><br>PA                      | <b>Zip Code (Plus 4)</b><br>156582247 |             |                    |

|   |                    |                                       |                                |                                       |                     |                     |
|---|--------------------|---------------------------------------|--------------------------------|---------------------------------------|---------------------|---------------------|
| <b>Full Name of Contributor</b><br>Justin R Bazella         |                    |                                       | <b>MO</b><br>5                 | <b>DAY</b><br>9                       | <b>YEAR</b><br>2024 | <b>\$</b><br>500.00 |
| <b>Mailing Address</b>                                      |                    |                                       |                                |                                       |                     |                     |
| <b>City</b><br>Whitehall                                    | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>180526924 |                                |                                       |                     |                     |
| <b>Employer Name</b><br>Bazella Group                       |                    |                                       | <b>Occupation</b><br>President |                                       |                     |                     |
| <b>Employer Mailing Address/Principal Place of Business</b> |                    | <b>City</b><br>Whitehall              | <b>State</b><br>PA             | <b>Zip Code (Plus 4)</b><br>180526924 |                     |                     |

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

|                     |
|---------------------|
| <b>PAGE TOTAL</b>   |
| <b>\$</b> 47,750.00 |

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**

|  |  |  |      |
|--|--|--|------|
| <b>Name of Filing Committee or Candidate</b>   |  | <b>Reporting Period</b>                    |      |
| FRIENDS OF NICK MILLER   |  | From: <u>4/9/2024</u> To: <u>5/13/2024</u> |      |
| <b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>   |  |  |      |
| TOTAL for the Reporting Period (1)   |  | \$   | 0.00 |
| <b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>  |  |  |      |
| TOTAL for the Reporting Period (2)   |  | \$   | 0.00 |
| <b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>  |  |  |      |
| 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<br><br>From: <span style="float: right;">To:</span> |
|---------------------------------------|--|

|   |       |                   | 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. |       |                   |      |     |      | <b>PAGE TOTAL</b><br><br>\$ 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<br>0.00 |         |

# SCHEDULE III STATEMENT OF EXPENDITURES

|  |   |
|--|---|
| <b>Name of Filing Committee or Candidate</b> | <b>Reporting Period</b>                   |
| FRIENDS OF NICK MILLER                       | From <u>4/9/2024</u> To: <u>5/13/2024</u> |

|                                |               |       |    | DATE                         | AMOUNT    |      |             |                            |
|--------------------------------|---------------|-------|----|------------------------------|-----------|------|-------------|----------------------------|
| To Whom Paid                   |               |       |    | MO                           | DAY       | YEAR | \$ 36.04    |                            |
| Wix                            |               |       |    |                              |           |      |             |                            |
| Mailing Address                |               |       |    | 5                            | 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                |               |       |    | 4                            | 12        | 2024 |             |                            |
| City                           | San Francisco | State | CA | Zip Code (Plus 4)            | 941582354 |      |             | Description of Expenditure |
|                                |               |       |    | Website                      |           |      |             |                            |
| To Whom Paid                   |               |       |    | MO                           | DAY       | YEAR | \$ 4,000.00 |                            |
| Rittenhouse Political Partners |               |       |    |                              |           |      |             |                            |
| Mailing Address                |               |       |    | 5                            | 3         | 2024 |             |                            |
| City                           | Philadelphia  | State | PA | Zip Code (Plus 4)            | 191074518 |      |             | Description of Expenditure |
|                                |               |       |    | Consulting Fees and Expenses |           |      |             |                            |
| To Whom Paid                   |               |       |    | MO                           | DAY       | YEAR | \$ 25.00    |                            |
| Pressable Inc.                 |               |       |    |                              |           |      |             |                            |
| Mailing Address                |               |       |    | 4                            | 20        | 2024 |             |                            |
| City                           | San Antonio   | State | TX | Zip Code (Plus 4)            | 782052990 |      |             | Description of Expenditure |
|                                |               |       |    | Website                      |           |      |             |                            |
| To Whom Paid                   |               |       |    | MO                           | DAY       | YEAR | \$ 271.33   |                            |
| NGP VAN                        |               |       |    |                              |           |      |             |                            |
| Mailing Address                |               |       |    | 4                            | 23        | 2024 |             |                            |
| City                           | Washington    | State | DC | Zip Code (Plus 4)            | 200055738 |      |             | Description of Expenditure |
|                                |               |       |    | NGP Account                  |           |      |             |                            |
| To Whom Paid                   |               |       |    | MO                           | DAY       | YEAR | \$ 35.00    |                            |
| Aidan Levinson                 |               |       |    |                              |           |      |             |                            |
| Mailing Address                |               |       |    | 5                            | 7         | 2024 |             |                            |
| City                           | Zionsville    | State | PA | Zip Code (Plus 4)            | 180922080 |      |             | Description of Expenditure |
|                                |               |       |    | Campaign Work                |           |      |             |                            |



|  |                    |                                       |  |            |             |                  |
|--|--------------------|---------------------------------------|--|------------|-------------|------------------|
| <b>To Whom Paid</b><br>Da Vinci Science Center |                    |                                       | <b>MO</b>  | <b>DAY</b> | <b>YEAR</b> | <b>\$</b> 500.00 |
| <b>Mailing Address</b>                         |                    |                                       | 4  | 13         | 2024        |                  |
| <b>City</b> Allentown                          | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>181012411 | <b>Description of Expenditure</b><br>Event Expense |            |             |                  |

  

|                                |                    |                                       |   |            |             |                 |
|--------------------------------|--------------------|---------------------------------------|---|------------|-------------|-----------------|
| <b>To Whom Paid</b><br>ActBlue |                    |                                       | <b>MO</b>   | <b>DAY</b> | <b>YEAR</b> | <b>\$</b> 18.73 |
| <b>Mailing Address</b>         |                    |                                       | 4   | 9          | 2024        |                 |
| <b>City</b> Somerville         | <b>State</b><br>MA | <b>Zip Code (Plus 4)</b><br>021443132 | <b>Description of Expenditure</b><br>Credit Card Processing Fee |            |             |                 |

  

|  |  |  |  |  |  |                    |
|--|--|--|--|--|--|--------------------|
| <b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b> |  |  |  |  |  | <b>PAGE TOTAL</b>  |
|  |  |  |  |  |  | <b>\$</b> 4,922.14 |

**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

|  |   |
|--|---|
| <b>Name of Filing Committee or Candidate</b><br><br>FRIENDS OF NICK MILLER | <b>Reporting Period</b><br><br>From: <u>4/9/2024</u> To: <u>5/13/2024</u> |
|--|---|

|   |           |       |    | DATE              |                     | Outstanding<br>Balance of Debt |              |
|---|-----------|-------|----|-------------------|---------------------|--------------------------------|--------------|
| Name of Creditor<br>Nicholas P Miller                                   |           |       |    | MO                | DAY                 | YEAR                           | \$ 10,000.00 |
| Mailing Address   |           |       |    | 4                 | 8                   | 2022                           |              |
| City  | Allentown | State | PA | Zip Code (Plus 4) | Description of Debt |                                |              |
|   |           |       |    | 181045605         | Loan to Campaign    |                                |              |
| Name of Creditor<br>Nicholas P Miller                                   |           |       |    | MO                | DAY                 | YEAR                           | \$ 10,000.00 |
| Mailing Address   |           |       |    | 4                 | 29                  | 2022                           |              |
| City  | Allentown | State | PA | Zip Code (Plus 4) | Description of Debt |                                |              |
|   |           |       |    | 181045605         | Loan to Campaign    |                                |              |
| Name of Creditor<br>Nicholas P Miller                                   |           |       |    | MO                | DAY                 | YEAR                           | \$ 5,000.00  |
| Mailing Address   |           |       |    | 10                | 26                  | 2022                           |              |
| City  | Allentown | State | PA | Zip Code (Plus 4) | Description of Debt |                                |              |
|   |           |       |    | 181045605         | Loan to Campaign    |                                |              |
| Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G. |           |       |    |                   |                     |                                | PAGE TOTAL   |
|   |           |       |    |                   |                     |                                | \$ 25,000.00 |