

Commonwealth of Pennsylvania
CAMPAIGN FINANCE REPORT

PAGE 1 OF 6

(COVER PAGE)

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification Number: 47-3263024		Report Filed By: CANDIDATE 1. ☐ COMMITTEE 2. ☒ LOBBYIST 3. ☐	
Name of Filing Committee, Candidate or Lobbyist: Committee to Elect Paul Zozos Magisterial District Judge			
Street Address: 1228 S. 19th St.			
City: Harrisburg		State: PA	Zip Code: 17104--

TYPE OF REPORT (place X to the right of report type)	1ST TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2. ☒	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT	YES	NO
	4TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	10 DAY POST-ELECTION	6.	TERMINATION REPORT	YES	NO
	ANNUAL REPORT	7.	YEAR		FILING METHOD CHECK ONE		PAPER	DISKETTE	

Name of Office Sought by Candidate: Magisterial District Judge 12-2-05			DATE OF ELECTION			District Number	Office Code	Party Code	County Code
MO.	DAY	YEAR	MO.	DAY	YEAR	12-20	0th	Rep Dem	22
12	03	15	12	03	15	(SEE INSTRUCTIONS FOR CODES)			

Summary of Receipts and Expenditures from:		MO.	DAY	YEAR	To	MO.	DAY	YEAR
		2	27	15	To	5	4	15

A. Amount Brought Forward From Last Report	\$ -0-
B. Total Monetary Contributions and Receipts (From Schedule I)	\$ 720.00
C. Total Funds Available (Sum of Lines A and B)	\$ 720.00
D. Total Expenditures (From Schedule III)	\$ 366.00
E. Ending Cash Balance (Subtract Line D from Line C)	\$ 354.00
F. Value of In-Kind Contributions Received (From Schedule II)	\$ 227.83
G. Unpaid Debts and Obligations (From Schedule IV)	\$ -0-

AFFIDAVIT SECTION

PART I: I swear (or affirm) that this report, including the attached schedules, on paper or computer diskette, are to the best of my knowledge and belief true, correct and complete.	
Sworn to and subscribed before me this <u>6</u> day of <u>May</u> 20 <u>15</u> <u>Rosalina Medina</u> Signature My commission expires <u>Aug</u> <u>24</u> <u>2018</u> MO. DAY YR.	} <u>Marcia Bratcher</u> Signature of Person Submitting Report <u>MARCIA BRATCHER</u> Printed Name <u>717</u> <u>233-2655</u> Area Code Daytime Telephone Number

PART II: 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 <u>6</u> day of <u>May</u> 20 <u>15</u> <u>Rosalina Medina</u> Signature My commission expires <u>Aug</u> <u>24</u> <u>2018</u> MO. DAY YR.	} <u>Paul T. Zozos</u> Signature of Candidate <u>Paul T. Zozos</u> Printed Name <u>717</u> <u>649-7411</u> Area Code Daytime Telephone Number

Dauphin County Election Bureau
2 S. 2nd St.
PO Box 1295
Harrisburg PA 17108

COMMONWEALTH OF PENNSYLVANIA
NOTARIAL SEAL
Rosalina Medina Jr, Notary Public
City of Harrisburg, Dauphin County
My Commission Expires Aug. 24, 2018
MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate <i>Magisterial</i> <i>Committee to Elect Paul Zozas District Judge</i>	Reporting Period From <i>2-27-15</i> To <i>5-4-15</i>
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period	(1) \$

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)	
Contributions Received from Political Committees (Part A)	\$
All Other Contributions (Part B)	\$ <i>200.00</i>
TOTAL for the Reporting Period	(2) \$ <i>200.00</i>

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$
All Other Contributions (Part D)	\$ <i>520.00</i>
TOTAL for the Reporting Period	(3) \$ <i>520.00</i>

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)	
TOTAL for the Reporting Period	(4) \$ <i>720.00</i>

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 Page 1, Report Cover Page, Item B.)	\$
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PART B
ALL OTHER CONTRIBUTIONS

PAGE 3 OF 6

\$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 <u>Committee to Elect Paul Zozos District Judge</u>	Reporting Period From <u>2-27-15</u> To <u>5-4-15</u>
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			DATE			AMOUNT
Full Name of Contributor	MO	DAY	YEAR			
<u>Sam Boutselis</u>	<u>3</u>	<u>25</u>	<u>15</u>	\$	<u>100.00</u>	
Mailing Address <u>5903 Westover Dr.</u>			MO	DAY	YEAR	\$
City <u>Mechanicsburg</u>	State <u>PA</u>	Zip Code (Plus 4) <u>17050-</u>	MO	DAY	YEAR	\$
<u>Sam Sharma</u>	<u>4</u>	<u>16</u>	<u>15</u>	\$	<u>100.00</u>	
Mailing Address <u>2210 Eaglesmoor Lane</u>			MO	DAY	YEAR	\$
City <u>Enola</u>	State <u>PA</u>	Zip Code (Plus 4) <u>17025-</u>	MO	DAY	YEAR	\$
<u>Paul Zozos</u>	<u>4</u>	<u>1</u>	<u>15</u>	\$	<u>200.00</u>	
Mailing Address <u>1228 S. 19th St.</u>			MO	DAY	YEAR	\$
City <u>Harrisburg</u>	State <u>PA</u>	Zip Code (Plus 4) <u>17104-</u>	MO	DAY	YEAR	\$
Full Name of Contributor			MO	DAY	YEAR	\$
Mailing Address			MO	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO	DAY	YEAR	\$
Full Name of Contributor			MO	DAY	YEAR	\$
Mailing Address			MO	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO	DAY	YEAR	\$
Full Name of Contributor			MO	DAY	YEAR	\$
Mailing Address			MO	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO	DAY	YEAR	\$
Full Name of Contributor			MO	DAY	YEAR	\$
Mailing Address			MO	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO	DAY	YEAR	\$
Full Name of Contributor			MO	DAY	YEAR	\$
Mailing Address			MO	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO	DAY	YEAR	\$
Full Name of Contributor			MO	DAY	YEAR	\$
Mailing Address			MO	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO	DAY	YEAR	\$

PAGE TOTAL
\$ 400.00

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

PART D
ALL OTHER CONTRIBUTIONS

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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 <i>Committee to Elect Paul Zozas</i>	Reporting Period From <i>2-27-15</i> To <i>5-4-15</i>
<i>Magisterial District Judge</i>	

				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	\$
<i>Paul Zozas</i>				<i>2</i>	<i>27</i>	<i>15</i>	<i>\$ 320.00</i>
Mailing Address				MO	DAY	YEAR	\$
<i>1228 S. 19th St.</i>							
City	State	Zip Code (Plus 4)		MO	DAY	YEAR	\$
<i>Hbz</i>	<i>PA</i>	<i>17104</i>					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business							
Full Name of Contributor				MO	DAY	YEAR	\$
Mailing Address				MO	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO	DAY	YEAR	\$
		-					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business							
Full Name of Contributor				MO	DAY	YEAR	\$
Mailing Address				MO	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO	DAY	YEAR	\$
		-					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business							
Full Name of Contributor				MO	DAY	YEAR	\$
Mailing Address				MO	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO	DAY	YEAR	\$
		-					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business							
Full Name of Contributor				MO	DAY	YEAR	\$
Mailing Address				MO	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO	DAY	YEAR	\$
		-					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business							

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

PAGE TOTAL

\$ 320.00

SCHEDULE II

PART F

IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

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Name of Filing Committee or Candidate <i>Committee to Elect Paul Zozas</i>	Reporting Period From <i>2-27-15</i> To <i>5-4-15</i>
<i>Magisterial District Judge</i>	

				DATE			AMOUNT
Full Name of Contributor				MO.	DAY	YEAR	
<i>Virginia P. Zozas</i>				<i>3</i>	<i>10</i>	<i>15</i>	\$ <i>100.00</i>
Mailing Address				MO.	DAY	YEAR	
<i>605 S. 25th St.</i>				<i>4</i>	<i>13</i>	<i>15</i>	\$ <i>21.25</i>
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	
<i>Harrisburg</i>		<i>PA</i>	<i>17104</i>	<i>4</i>	<i>27</i>	<i>15</i>	\$ <i>106.58</i>
Description of Contribution: <i>Filing fee, disc, copies, envelopes, postage, clipboards, glue stick, copy work</i>							
Full Name of Contributor				MO.	DAY	YEAR	\$
<i>(Voter Registration) (Notary fee petitions)</i>							\$
Mailing Address				MO.	DAY	YEAR	\$
							\$
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
			-				\$
Description of Contribution:							
Full Name of Contributor				MO.	DAY	YEAR	\$
							\$
Mailing Address				MO.	DAY	YEAR	\$
							\$
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
			-				\$
Description of Contribution:							
Full Name of Contributor				MO.	DAY	YEAR	\$
							\$
Mailing Address				MO.	DAY	YEAR	\$
							\$
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
			-				\$
Description of Contribution:							
Full Name of Contributor				MO.	DAY	YEAR	\$
							\$
Mailing Address				MO.	DAY	YEAR	\$
							\$
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
			-				\$
Description of Contribution:							
Full Name of Contributor				MO.	DAY	YEAR	\$
							\$
Mailing Address				MO.	DAY	YEAR	\$
							\$
City		State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
			-				\$
Description of Contribution:							

Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.

PAGE TOTAL

\$ *227.83*

SCHEDULE III
STATEMENT OF EXPENDITURES

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Name of Filing Committee or Candidate <u>Committee to Elect Paul Zaras: District Judge</u>	Reporting Period From <u>2-27-15</u> To <u>5-4-15</u>
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To Whom Paid <u>David A Smith Printing Inc</u> Mailing Address <u>724 S. 22nd St.</u> City <u>Hbg</u>	State <u>PA</u>	Zip Code (Plus 4) <u>17104</u>	MO <u>4</u>	DAY <u>29</u>	YEAR <u>15</u>	Amount \$ <u>209.35</u>
Description of Expenditure <u>Vote Flyer - Brochure</u>						
To Whom Paid <u>David A Smith Printing Inc</u> Mailing Address <u>724 S. 22nd St.</u> City <u>Hbg</u>	State <u>PA</u>	Zip Code (Plus 4) <u>17104</u>	MO <u>4</u>	DAY <u>30</u>	YEAR <u>15</u>	Amount \$ <u>99.59</u>
Description of Expenditure <u>Vote Cards</u>						
To Whom Paid <u>Santander Bank</u> Mailing Address <u>519 S. 29th St.</u> City <u>Hbg</u>	State <u>PA</u>	Zip Code (Plus 4) <u>17104</u>	MO <u>3</u>	DAY <u>5</u>	YEAR <u>15</u>	Amount \$ <u>59.08</u>
Description of Expenditure <u>checks for</u> <u>Committee bank account</u>						
To Whom Paid Mailing Address City 	State 	Zip Code (Plus 4) 	MO 	DAY 	YEAR 	Amount \$
Description of Expenditure 						
To Whom Paid Mailing Address City 	State 	Zip Code (Plus 4) 	MO 	DAY 	YEAR 	Amount \$
Description of Expenditure 						
To Whom Paid Mailing Address City 	State 	Zip Code (Plus 4) 	MO 	DAY 	YEAR 	Amount \$
Description of Expenditure 						
To Whom Paid Mailing Address City 	State 	Zip Code (Plus 4) 	MO 	DAY 	YEAR 	Amount \$
Description of Expenditure 						
To Whom Paid Mailing Address City 	State 	Zip Code (Plus 4) 	MO 	DAY 	YEAR 	Amount \$
Description of Expenditure 						

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL
\$ 366.00