Campaign Finance Report

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

Filer Identificati Number :	on	20160	C0396				port		CAN	IDI	DATE	\	/ CC	MMITTEE		LOBE	BYIST		
Name of Filing C	Committe	e, Candida	ate or Lo	obbyist:				SIMS										_	
a																			
Street Address:														I		107			
City:	_								State	:				Zip Code	e: 19	107			
TYPE OF REPORT	6TH TUES PRE-PRIN	_	1.	2ND FRIDA' PRIMARY	Y PRE	-	2.	30 DA PRIMA		P	OST-	3.		AMENDME REPORT?					
(place X to the right of	6TH TUES		4.	2ND FRIDA' ELECTION	y pri	≣-	5.	30 DA		P	OST-	6. :	x	TERMINAT REPORT?	TERMINATION Yes REPORT?				
report type)	ANNUAL	. REPORT	7.	Year 2016					NG ME					PAPER		\checkmark	DISKE	TTE	
Name of Office C	`								DAT	E 0	F ELE	СП	ON	District	Office	Par	ty Code		
Name of Office S	ougnt by	/ Candidat	e:						МО		DAY		YEAR	Number 182	Code STH	DEN	1	Code	•
REPRESENTATI	VE IN TH	HE GENER	AL ASS	EMBLY						11		8	2016	ļ	CEE THE	TRUCTI	ONS FOR	CODES	
Summary of	Receipts	s and	МО	DAY	YEAR	ł			МО		DAY	_	YEAR		ONLY	CODES	,		
Expenditures				10 25	2	016	T	0		11	2	28	2016						
A. Amount Bro	ught For	ward Fron	ı Last R	eport			1	\$				•	0.00	1					
B. Total Monet	ary Contr	ibutions A	and Rec	eipts (From	Sche	dule	e I)	\$				1	,246.37	7					
C. Total Funds	Available	(Sum Of	Lines A	and B)				\$				1	,246.37						
D. Total Expend	ditures (I	From Sche	dule II	I)				\$				1	,246.37						
E. Ending Cash	Balance	(Subtract	Line D	From Line (C)			\$					0.00						
F. Value Of In-	Kind Con	tributions	Receive	ed (From S	chedu	le I	I)	\$					0.00						
G. Unpaid Debt	s And Ob	oligations	(From S	Schedule IV)			\$					0.00		•				
					AFF	ID	AVI	T SE	CTIO	N									
PART I - If this is	s a Comm	nittee repo	ort, trea	surer sign l	here.	If th	nis is	a Car	ndidat	e re	port, c	and	didate sig	jn here.					
I swear (or affirm) correct and comple		report, incl	uding the	attached scl	nedule	s file	d on	paper	or by e	lecti	ronic me	ediu	ım, are to t	the best of	my know	ledge :	and beli	ef , tr	ue
Sworn to and subs	cribed bef day of	ore me this		20									Signature	of Person	Submitt	ng Rep	ort		
	_	Signatur	·e					- -						Printe	d Name				
My Commission Ex	cpires									•				Email					-
		мо	D	AY	YR						Are	ea C	ode	Daytime	Telepho	ne Nu	mber		
Part II- If this is	a report	of a cand	idate's	authorized	Comn	nitte	ee, C	andid	ate sh	all s	sign he	ere.							
I swear (or affirm) No 320) as amende		ne best of m	y knowle	edge and beli	ef this	poli	itical	comm	ittee ha	as no	ot viola	ted	any provis	ions of the	act of Ju	ne 3,19	937 (P.I	133	з,
Sworn to and subsc		re me this											s	ignature of	Candida	te			-
	day of —			_ 20 				_						Delina. 1	Nau				_
		Signature						-						Printed	Name				
My Commission Exp		Signature												Email					_
	-	МО	D	AY	YR	1		-			Area	Cod	e	Day	rtime Te	lephon	e Numb	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
BRIAN SIMS	From:	10/25/20	<u>16</u> To:	11/28/2016
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	0.00
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)			\$	1,246.37
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	1,246.37
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	0.00
			1	
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	1,246.37

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 Ca	ndidate	R	eporting	Period		
		F	rom:		То	:
		·		DATE		AMOUNT
Full Name of Contributing Commit	ttee		МО	DAY	YEAR	
Mailing Address						\$ 0.00
City	State	Zip Code (Plus 4)				

PAGE TOTAL
0.00

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

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 Candida	Reporting Period							
			Fro	m:		To) :	
		•			DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						

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

PART C

Contributions Received From Political Committees

OVER \$250.00

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate	Reporting P	Period		
BRIAN SIMS	From:	<u>10/25/2016</u>	То:	11/28/2016

AMOUNT DATE

Full Name of Contributing Committee	мо	DAY	YEAR			
SIMS4PA PAC	110		ILAK	\$ 1,246.37		
Mailing Address P.O. BOX 15941	11	22	2016	,		
City PHILADELPHIA	State	Zip Code (Plus 4)			2010	

PAGE TOTAL 1,246.37

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

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	2			Rep	orting Pe	riod			
				Fron	n:		To) :	
					D	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR	\$	0.00
Mailing Address									
City	State	Zi	p Code (Plus	(4)					
Employer Name	•				Occupa	tion	-	-	
Employer Mailing Address/Principal Pl	ace of Business		City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detaile	ed Sumr	mary Page,	Section	on 3.				PAGE TOTAL
								\$	0.00

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		Report	ing Peri	od			
			From:			То:		
		•		D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	ıs 4)					
Receipt Description	'	<u>'</u>			•			
Futor Curred Total of Bout	For Cabadula I Batailad	I Comment Page Co		4				PAGE TOTAL
Enter Grand Total of Part	E on Schedule 1, Detailed	Summary Page, Se	ection	4.			\$	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 Peri	od	
BRIAN SIMS	From:	<u>10/25/2016</u> To:	<u>11/28/2016</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR	₹	
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,		\$	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:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	-	-	•	•	•			
Enter Grand Total of Part F on Sche	dule II, In-Kind	d Contributions Deta	iled Sum	mary Pag	ge,		PAGE TOTA	L
Section 2.						\$		0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address									\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	ation				
Employer Mailing Address/Principal Plac	e of Business	City	′	Stat	e Zip	Code(Plus 4)	Desci	ript	ion of Contribution	on
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	ontributions De	etaile	ed				PAGE TO	ΓAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting F	Period		
BRIAN SIMS	From	10/25/2016	То:	11/28/2016

					AMOUNT						
		МО	DAY	VEAD							
		МО	DAT	TEAR							
Mailing Address 5147 BUTLER ST					\$	20.05					
City PITTSBURGH State Zip Code (Plus 4) PA				enditure							
				MEAL							
		мо	DAY	YEAR							
		1-10		1 L/ux							
Mailing Address 1234 MARKET ST					\$	191.00					
State	Zip Code (Plus 4)	Description of Expenditure									
PA 19107					TRAVEL						
		MO	DAY	ΥFΔR							
		1-10		. L/ux							
Mailing Address 1234 MARKET ST					\$	191.00					
City PHILADELPHIA State Zip Code (Plus 4)			Description of Expenditure								
PA 19107					TRAVEL						
		мо	DAY	YEAR							
Mailing Address 1234 MARKET ST.					\$	191.00					
City PHILADELPHIA State Zip Code (Plus 4)			Description of Expenditure								
PA	19107	TRAVEL									
		МО	DAY	YEAR							
Mailing Address 2901 SOUTH 128TH STREET					\$	42.57					
State	Zip Code (Plus 4)	Descript	ion of Exp	enditure							
State WA	Zip Code (Plus 4) 98168	Descript TRAVEL		enditure							
		TRAVEL									
				enditure YEAR							
		TRAVEL			\$	44.30					
WA		MO 11	DAY	YEAR 2016	\$	44.30					
	State PA State PA State PA	State Zip Code (Plus 4) 19107 State Zip Code (Plus 4) 19107 State Zip Code (Plus 4) 19107 State Zip Code (Plus 4) 19107	MO	11 22	MO	MO DAY YEAR					

									FAGL 12	
To Wh	om Paid				мо	DAY	YEAR			
DETROIT FOOD										
Mailing Address 17801 INTERNATIONAL BLVD					11	22	2016	\$	8.58	
City	SEATTLE		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
			WA	98158	MEAL					
To Wh	om Paid				мо	DAY	YEAR			
SUBWAY										
Mailing Address 17801 INTERNATIONAL BLVD				11	22	2016	\$	8.88		
City	SEATTLE		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
			WA	98158	MEAL					
To Whom Paid					МО	DAY	YEAR			
MCDO	NALD'S									
Mailin	g Address	1122 MADISON ST.			11	22	2016	\$	11.85	
City SEA	SEATTLE		State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
			WA	98104	MEAL					
To Wh	om Paid				мо	DAY	YEAR			
COBA	_T									
Mailin	g Address	1639 R ST NW.			11	22	2016	\$	52.00	
City	WASHINGT	SHINGTON State Zip Code (Plus 4) DC 20009				Description of Expenditure				
						MEAL				
To Wh	om Paid				мо	DAY	YEAR			
ICRAC	KED									
Mailin	g Address	350 MARINE PKWY	STE. 100		11	22	2016	\$	179.14	
City	REDWOOD	REDWOOD CITY State Zip Code (Plus 4)				Description of Expenditure				
		CA 94065			PHONE REPAIR					
To Wh	om Paid				мо	DAY	YEAR			
ALBER	T HICKS									
Mailin	g Address	245 N BROAD ST.			11	22	2016	\$	250.00	
City [PHILADELP	HIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
			PA	19107	REIMBU	IRSEMENT				
To Wh	om Paid				мо	DAY	YEAR			
WILLIAM COBB					МО		ILAK			
Mailing Address 6040 CANNON HILL RD					11	22	2016	\$	56.00	
City	FORT WASI	HINGTON	State	Zip Code (Plus 4)	Descrip	l tion of Exp	enditure	<u> </u>		
		PA 19034				REIMBURSEMENT				
				t Cover Page, Item D					PAGE TOTAL	