#### **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 201	7C0236				port ed B		CAN	DIC	ATE	<b>\</b>	C	TTIMMO	E	LOB	BYIS	ST	
Name of Filing C	Committee, Candid	date or L	obbyist:	•	SIAS	S, H	ENRY	MCGR	EG	OR								
Street Address:																		
City:	_							State:					Zip Co	de: 1	9147			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2	2. <b>X</b>	30 DAY F PRIMARY			OST-				AMENDMENT REPORT?			No	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- !	5.	30 DA		P	OST-	6.		TERMIN REPORT		Yes		No	<b>\</b>
report type)	ANNUAL REPORT	7.	<b>Year</b> 2017					NG MET CHECK					PAPER		<b>/</b>	DIS	SKETT	E
Name of Office S	Sought by Candida	ate:	_		_			DATE	OF	ELE	СТІ	ON	District Number	Office Code	Pa	rty C	ode Co	ounty ode
								МО		DAY	,	YEAR	1	СРЈР	DE	М	51	
JUDGE OF THE	COURT OF COM	10N PLE	AS - PHILA	DELP	AIH				11		7	2017		(SEE IN	ISTRUCT	ONS	FOR COD	ES)
	Receipts and	DAY	YEAR				МО		DAY	1	YEAR	F	OR OFFI	CE USE	ON	LY		
Expenditures	from:		1 1	2	017	Т	0		5		1	2017	,					
A. Amount Bro	ught Forward Fro	m Last R	eport				\$	- <del>'</del>				0.00						
B. Total Moneta	ary Contributions	And Rec	eipts (Fron	1 Sche	dule	ı)	\$					0.00						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$					0.00						
D. Total Expend	ditures (From Sch	iedule II	I)				\$				6	,900.00						
E. Ending Cash	Balance (Subtra	t Line D	From Line	C)			\$				(6,9	900.00)						
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	le II	()	\$					0.00						
G. Unpaid Debt	s And Obligations	s (From S	Schedule IV	<b>/</b> )			\$					0.00			•			
				AFF	IDA	AVI	T SE	CTIO	N									
PART I - If this is	s a Committee rep	ort, trea	surer sign	here. 1	[f th	is is	a Car	ndidate	rep	ort, c	cano	didate si	gn here.					
I swear (or affirm) correct and comple	) that this report, inc ete.	:luding the	e attached sc	hedules	filed	d on	paper	or by ele	ectro	onic m	ediu	m, are to	the best o	of my kno	wledge	and	belief ,	true
Sworn to and subs	cribed before me th	is	20						-			Signatu	e of Perso	n Submit	ting Re	port		_
	Signate	ure					- -		-				Pri	ited Nam	e			
My Commission Ex	_								-				Ema	nil				
	мо	Di	AY	YR						Are	ea C	ode	Daytir	ne Telep	hone Nu	ımbe	r	
Part II- If this is	a report of a can	didate's	authorized	Comn	nitte	e, C	andid	ate sha	all s	ign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowle	edge and beli	ief this	polit	tical	comm	ittee ha	s no	t viola	ted a	any provi	sions of th	e act of I	lune 3,1	.937	(P.L. 1	333,
Sworn to and subsc	ribed before me this	;										:	Signature	of Candid	late			—
	day of						-						Print	ed Name				<u> </u>
	Signature						-		_									
My Commission Exp	ires												Ema					
	МО	D.	AY	YR			•		•	Area	Cod	e	D	aytime 1	elepho	ne Nı	umber	_

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
SIAS, HENRY MCGREGOR	From:	1/1/201	<u>7</u> To:	<u>5/1/2017</u>
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)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	) Period	(4)	\$	0.00
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			\$	0.00

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu	-			•			
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		1			DATE			AMOUNT
Full Name of Contribut	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	)					
	•	•	•		•	•		DACE TOTAL

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

**PAGE TOTAL \$**0.00

### 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	e or Candidate		Rep	oorting P	eriod			
			Fro	m:		To	o:	
			•		DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$ \$	0.00
City	State	Zip Code (Plus 4)	١					

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 Candi	date		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	0.00

## 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			Rep	orting Pe	riod			
			Froi	m:		To	<b>)</b> :	
				D	ATE		А	MOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupa	tion		•	
Employer Mailing Address/Principal Plac Business	e of	City		•	State		Zip Cod	de (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary Page	, Secti	on 3.			P \$	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 C	andidate		Report	ting Perio	od			
			From:			To:		
				D	ATE		А	MOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (	Plus 4)					
Receipt Description		-						
Enter Grand Total of Part E o	n Schedule I. Detailed	l Summary Page	Section	4			P.	AGE TOTAL
Enter Grand Fotol of Fart E	Jenedale I, Detance	. Janimary rage,	Section				\$	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	1	
SIAS, HENRY MCGREGOR	From:	<u>1/1/2017</u> <b>To:</b>	5/1/2017
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 Candid	ate		Reportin	g Period			
			From:			То:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on So	chedule II. In-Kir	nd Contributions Deta	iled Sun	ımarv Pac	ae.		PAGE TOTAL
Section 2.				<b></b> ;		\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidat	e				Re	porting P	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor	•		•			Occupa	tion			
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, i	In-Kind	Contributi	ons De	etaile	ed				<b>PAGE TOTAL</b> 0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	ndidate		Reporti	ng Period			
SIAS, HENRY MCGREGOR			From	<u>1/</u>	1/2017	То:	5/1/2017
				DATE			AMOUNT
To Whom Paid			мо	DAY	YEAR		
Rasheen Crews							
Mailing Address 1412 S. 51s	t Street		3	1	2017	\$	1,125.00
<b>City</b> Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Ex	enditure	<u>'</u>	
*	PA	19143	Consult	ting			
To Whom Paid			МО	DAY	YEAR		
Henry Sias for Judge							
Mailing Address PO Box 580	72		3	27	2017	\$	5,500.00
<b>City</b> Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Ex	enditure	<u>'</u>	
	PA	19102	Loan				
<b>To Whom Paid</b> Commonwealth of Pennsylvania	1		МО	DAY	YEAR		
Mailing Address 210 North C	ffice Building, 401 Nor	rth Street	3	6	2017	\$	100.00
<b>City</b> Harrisburg	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	<u> </u>	
5	PA	17120	Petition	ns filing fee	2		
<b>To Whom Paid</b> Facebook			мо	DAY	YEAR		
Mailing Address 1 Hacker Wa	ау		3	25	2017	<b>\$</b>	25.00
City Menlo Park	State	Zip Code (Plus 4)	Descrip	tion of Exp	l penditure	 e	
Tiellie Fairk	CA	94025	Ads				
<b>To Whom Paid</b> Kenneth M. Parker	•	·	мо	DAY	YEAR		
Mailing Address 3614 N. 16t	h Street		3	5	2017	\$	150.00
<b>City</b> Philadelphia	State	Zip Code (Plus 4)	Descrin	tion of Ex	l enditur	<u> </u>	
тинастрина	PA	19140	Consult			-	
		<u> </u>	•				PAGE TOTAL
Enter Grand Total of Expend							