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	20180	C1221				port ed B		CAND	CANDIDATE COMMITTEE LOBBYIST					BYIST			
Name of Filing C	ommittee, Ca	andida	ite or Lo	obbyist:		CUF	RRY,	JEFFF	REY PAU	L								
Street Address:																		
City:									State:				Zip Code	: 19	104			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		1.	2ND FRIDAY PRIMARY	PRE	-	2.	30 DA PRIMA		POST-	3. X		AMENDME REPORT?	NT	Yes	No	•	\
(place X to the right of	6TH TUESDAY PRE-ELECTION		4.	2ND FRIDAY ELECTION	' PRE	-	5.	30 DA		POST-	6.		TERMINATION REPORT?		Yes	No		\
report type)	ANNUAL REF	PORT	7.	Year 2018					IG METH CHECK C						√	DISKE	TTE	
Name of Office S	ought by Car	ndidat	e:						DATE ()F ELE	CTION		District Number	Office Code	Par	ty Code	Coun	
	- ,								мо	DAY	YEAR	₹	188	STH	DEN	1	51	
REPRESENTATI	VE IN THE G	iENER/	AL ASS	EMBLY					11		6 2	018		(SEE INS	TRUCTI	ONS FOR C	CODES)
Summary of		nd	МО	DAY	YEAR	l			МО	DAY	YEAR	3	FOR	OFFIC	E USE	ONLY		
Expenditures	from:			5 1	2	018	Т	0	6	5	4 2	018						
A. Amount Bro	ught Forward	d From	Last R	eport				\$	-		C	0.00						
B. Total Moneta	ary Contribut	ions A	nd Rec	eipts (From	Sche	dule	e I)	\$			C	0.00						
C. Total Funds Available (Sum Of Lines A and B) \$ 0.00																		
D. Total Expend	ditures (Fron	n Sche	dule II	[)				\$			0	0.00						
E. Ending Cash	Balance (Su	btract	Line D	From Line C	:)			\$			0	.00						
F. Value Of In-	Kind Contribu	utions	Receive	ed (From Sc	hedu	le II	I)	\$			0	.00						
G. Unpaid Debt	s And Obliga	tions ((From S	chedule IV))			\$			0	0.00		,				
					AFF	ΊD	AVI	T SE	CTION									
PART I - If this is		•	•									_						
I swear (or affirm) correct and comple		rt, inclu	ıding the	attached sch	edules	file	d on	paper (or by elec	tronic m	edium, ar	e to t	the best of i	my know	/ledge	and belie	ef , tru	ue.
Sworn to and subs	cribed before n day of	ne this		20							Sign	ature	of Person	Submitti	ing Rep	ort		_
		ignatur	·e					- -					Printe	d Name				_
My Commission Ex		ignatur	-										Email					-
	мо		D/	ΑY	YR					Ar	ea Code		Daytime	Telepho	one Nu	mber		
Part II- If this is	a report of a	a cand	idate's	authorized (Comn	nitte	ee, C	andida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende		st of m	y knowle	dge and belie	f this	poli	itical	comm	ittee has i	not viola	ted any p	rovis	ions of the	act of Ju	ne 3,1	937 (P.L	. 1333	3,
Sworn to and subsc		e this										s	ignature of	Candida	te			-
	day of —— ——							-					Printed	Name				-
	Signa	ature						_										_
My Commission Exp	ires												Email					
	М	10	D/	AY	YR	,		-		Area	Code		Day	time Te	lephon	e Numb	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
CURRY, JEFFREY PAUL	From:	5/1/201	<u>8</u> To:	6/4/2018
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	J 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	y Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	0.00
			<u> </u>	
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 onl with an aggregate value		\$2) in the			
Name of Fining Committee of Candidate			From:			То	:	
		L			DATE			AMOUNT
Full Name of Contribut	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	!	I	!		<u> </u>			DAGE 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 Commi	ttee or Candidate		Reporting Period						
			From: To					o:	
					DATE			AMOUNT	
Full Name of Contributor	r			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.

PAGE TOTAL \$0.00

PART C

Contributions Received From Political Committees

OVER \$250.00

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

Name of Filing Committee or Candidate			Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary 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	ame of Filing Committee or Candidate			orting Pe	riod				
			Fron	n:		То	То:		
				D	ATE		АМО	DUNT	
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address State 7in Code (Plus 4)							\$	0.00	
City State Zip Code (Plus 4)									
Employer Name				Occupation					
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	(Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page,	Section	on 3.			PAG	GE 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 Perio	od				
			From:			To:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	1		
Mailing Address							\$		0.00
City	State	Zip Code (Plus 4)						
Receipt Description	·	·		•			•		
Enter Grand Total of Part E	on Schedule I. Detailer	l Summary Page.	Section	4.				PAGE TO	ΓAL
- Communication of the Ex	Januara 1/ Betained	. Jaai y 1 ago,	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		
CURRY, JEFFREY PAUL	From:	<u>5/1/2018</u> To:	6/4/2018
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 S	chedule II, In-Kir	nd Contributions Deta	iled Sun	ımary Pa	ge,		PAGE TOTAL
Section 2.						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	ame of Filing Committee or Candidate				Re	porting l	Period				
					From:			To:	То:		
					•		DATE			AMOUNT	
Full Name of Contributor						МО	DAY	YEAR			
Mailing Address								\$	0.00		
City	State		Zip Code(I	Plus 4)							
Employer of Contributor						Occupa	ition		•		
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iption	of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Det Summary Page, Section 3.				etaile	ed				PAGE TOTAL 0.00		

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or (ame of Filing Committee or Candidate					Reporting Period				
							То:			
				DATE			AMOUNT			
To Whom Paid				DAY	YEAR					
Mailing Address						\$	0.00			
City State Zip Code (Plus 4)			Descri	ption of Ex	penditure					
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item							PAGE TOTAL			
Enter Grand Total of Expen	laitures on Page 1, Re	port Cover Page, Item D).			\$	0.00			