Campaign Finance Report

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

Filer Identification 20110226 Number :					Rep File			CAND	IDATE		СОМ	4ITTEE	✓	LOBE	SYIST	
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		SIM	S4P	APAC			•						
Street Address:																
City: PHILADELPHIA State: PA								Zip Code: 19147								
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA' PRIMARY	Y PRE	- 2	2.	30 DA PRIMA		POST-	3.		AMENDMENT Yes No REPORT?				
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA' ELECTION	Y PRE	Ē- [5.	30 DA ELECT		POST-	6. X		TERMINATION Yes No REPORT?				\
report type)	ANNUAL REPORT	7.	Year 2018					IG METH CHECK C				PAPER		/	DISKE	TTE
Name of Office S	- Sought by Candida	te:						DATE (OF ELE	CTIC	N	District Number	Office Code	Par	ty Code	County
								МО	DAY	Υ	EAR		1	DEM	1	
								13	L	6	2018		(SEE IN	STRUCTIO	ONS FOR C	ODES)
	Receipts and	МО	DAY	YEAR	2			МО	DAY	Y	EAR	FO	R OFFI	CE USE	ONLY	
Expenditures	from:	1	10 23	2	018	T	0	1	L	26	2018					
A. Amount Bro	ught Forward Fron	n Last R	eport				\$			27,	175.13					
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule	I)	\$			5,	280.00					
C. Total Funds Available (Sum Of Lines A and B) \$ 32,455.13																
D. Total Expen	ditures (From Sch	edule II	I)				\$			17,	326.88					
E. Ending Cash	Balance (Subtract	t Line D	From Line (C)			\$			14,6	528.25]				
F. Value Of In-	Kind Contributions	Receive	ed (From So	chedu	le II)	\$				0.00					
G. Unpaid Debt	ts And Obligations	(From S	Schedule IV)			\$			50,	00.00			•		
				AFF	IDA	VI	ΓSE	CTION								
PART I - If this is	s a Committee rep	ort, trea	surer sign l	nere.	If thi	is is	a Can	ndidate r	eport,	candi	date sig	ın here.				
I swear (or affirm) correct and complete) that this report, incl ete.	uding the	attached sch	nedules	s filed	d on	paper (or by elec	tronic n	ediun	ı, are to t	he best o	f my kno	wledge a	and belie	ef , true
Sworn to and subs	cribed before me this day of	;	20							:	Signature	of Perso	n Submit	ting Rep	ort	
	- 		_				- -					Prin	ted Name	e		
My Commission Ex	Signatu kpires	re										Ema	il			
	МО	DA	AY	YR			-		Aı	ea Co	de	Daytim	e Teleph	none Nu	mber	
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nitte	e, C	andida	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and beli	ef this	polit	ical	commi	ittee has	not viola	ited ai	ny provis	ions of th	e act of J	une 3,19	937 (P.L.	1333,
Sworn to and subsc	ribed before me this										S	ignature o	of Candid	ate		
	day of ————————————————————————————————————		_ 20				_					Duinta	d Name			
	Signature						-					Printe	d Name			
My Commission Exp	_											Ema	il			
	МО	D/	AY	YR	l		•		Area	Code		Da	aytime T	elephon	e Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
SIMS4PAPAC	From:	10/23/201	<u>8</u> To:	11/26/2018
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	Period	(1)	\$	925.00
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)	\$	855.00		
TOTAL for the Reporting	Period	(2)	\$	855.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	500.00
All Other Contributions (Part D)			\$	3,000.00
TOTAL for the Reporting	Period	(3)	\$	3,500.00
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 Page			\$	5,280.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize only with an aggregate valu								
Name of Filing Committee or Candidate Rep			Reporting Period						
			Fre	om:		То	:		
		-			DATE			AMOUNT	
Full Name of Contribution	ng Committee			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 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)

Name of Filing Committee or Candidate			Rep	orting Po	eriod			
SIMS4PAPAC			Froi	m:	10/23/2	2018 T o):	11/26/2018
					DATE			AMOUNT
Full Name of Contributor JOSEPH WALSH				МО	DAY	YEAR		
Mailing Address 753 N CROSKEY ST							\$	100.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191302607		10	31	2018		
Full Name of Contributor SAMUEL WALLACE				МО	DAY	YEAR		
Mailing Address 30 S 22ND ST APT	19						\$	250.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191033045		11	13	2018		
Full Name of Contributor DAN OCKO				МО	DAY	YEAR		
Mailing Address 4319 NEW HAMPSH	IRE DR						\$	175.00
City HARRISBURG	State PA	Zip Code (Plus 4) 171129174		10	30	2018		
Full Name of Contributor JO JOHNSON				МО	DAY	YEAR		
Mailing Address 323 RACE ST				10	31	2018	\$	100.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191061866		-	-			
Full Name of Contributor MORGAN HOOVER				МО	DAY	YEAR		
Mailing Address 824 WHITEHALL ST							\$	35.00
City SILVER SPRING	State MD	Zip Code (Plus 4) 209011058		11	6	2018		

Full Name of Contr MORGAN HOOVER				мо	DAY	YEAR	
Mailing Address	824 WHITEHALL S	Г					\$ 25.00
City SILVER SP	RING	State MD	Zip Code (Plus 4) 209011058	10	31	2018	
Full Name of Contributor MICHAEL HILLWIG				МО	DAY	YEAR	
Mailing Address	93 BELLINGHAM A	VE					\$ 100.00
City REVERE		State MA	Zip Code (Plus 4) 021514150	11	5	2018	
Full Name of Contr MICHAEL CARVER				МО	DAY	YEAR	
Mailing Address	750 AMANA ST AF	T 604					\$ 25.00
City HONOLULU	J	State HI	Zip Code (Plus 4) 968145006	11	20	2018	
Full Name of Contr MICHAEL CARVER				МО	DAY	YEAR	
Mailing Address City HONOLULU	750 AMANA ST AF	T 604 State HI	Zip Code (Plus 4) 968145006	10	29	2018	\$ 25.00
Full Name of Contr MICHAEL CARVER				МО	DAY	YEAR	
Mailing Address City HONOLULU	750 AMANA ST AF	T 604 State HI	Zip Code (Plus 4) 968145006	10	23	2018	\$ 20.00
		I		<u> </u>	l	l	PAGE TOTAL

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

PAGE TOTAL \$ 855.00

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							
SIMS4PAPAC	From:	10/23/2018	То:	11/26/2018				

DATE AMOUNT

Full Name of Contributing Committee PECO PAC			МО	DAY	YEAR	
Mailing Address 2301 MARKET ST						\$ 500.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191031338	10	24	2018	

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

PAGE TOTAL \$ 500.00

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 of Candidate				Reporting Period					
SIMS4PAPAC			Fron	n:	<u>10/23/2018</u> To		o: <u>11/26/2018</u>		
				D	ATE		AMOUNT		
Full Name of Contributor				мо	DAY	YEAR			
MEL HEIFETZ				140	DAI	ILAK			
Mailing 304 S 12TH ST Address							\$ 2,000.00		
City PHILADELPHIA	State	Zip Code (Plus 4)		10	24	2018			
	PA	191075908)8						
Employer Name SELF EMPLOYED	1	1		Occupat	t ion	EAL EST	TATE INVESTOR		
Employer Mailing Address/Principal Place of Business			State			Zip Code (Plus 4)			
SAME AS ABOVE					PA				
Full Name of Contributor DENNIS W IVILL				МО	DAY	YEAR			
							\$ 1,000.00		
DENNIS W IVILL Mailing 1101 LOMBARD ST	State	Zip Code (Plus	s 4)	MO	DAY 24	YEAR 2018	\$ 1,000.00		
DENNIS W IVILL Mailing Address 1101 LOMBARD ST	State PA	Zip Code (Plus 191471230	s 4)				\$ 1,000.00		
DENNIS W IVILL Mailing Address 1101 LOMBARD ST	PA		s 4)		24				
DENNIS W IVILL Mailing Address 1101 LOMBARD ST City PHILADELPHIA Employer Name PA REHAB ASSOCIATE Employer Mailing Address/Principal Pla	PA TES		s 4)	10	24	2018			
DENNIS W IVILL Mailing Address 1101 LOMBARD ST City PHILADELPHIA Employer Name PA REHAB ASSOCIATION	PA TES	191471230	s 4)	10	24	2018	AN		
Mailing Address 1101 LOMBARD ST City PHILADELPHIA Employer Name PA REHAB ASSOCIATE Employer Mailing Address/Principal Pla Business 1501 LANSDOWNE AVE	PA TES ce of	191471230 City DARBY		10 Occupat	24	2018	AN Zip Code (Plus 4)		
DENNIS W IVILL Mailing Address 1101 LOMBARD ST City PHILADELPHIA Employer Name PA REHAB ASSOCIATE Employer Mailing Address/Principal Pla Business	PA TES ce of	191471230 City DARBY		10 Occupat	24	2018	Zip Code (Plus 4) 190231333 PAGE TOTAL		

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 Co	Name of Filing Committee or Candidate			Reporting Period						
			From:			То:				
				D	ATE		AN	10UNT		
Full Name				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4)							
Receipt Description	·	•								
Enter Grand Total of Part E or	Schedule T Detaile	d Summary Page	Section	4			PA	GE TOTAL		
Lines Grana Total of Fair 2 of	r benedule 1/ betanet	z Summary r uge,	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 Peri	od	
SIMS4PAPAC	From:	<u>10/23/2018</u> To:	11/26/2018
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	₹	
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 Candi	Reporting 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	Schedule II, In-Kir	nd Contributions Deta	iled Sun	nmary Pag	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				Reporting Period					
				Fro	om:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occupa	tion			
Employer Mailing Address/Principal Plac Business	ce of Cit	ity	State		Zip 4)	Code(Plus	Descri	ption o	f Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-K	Cind C	Contributions De	etaile	ed				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reportir	Reporting Period						
SIMS4PAPAC			From	10/23	11/26/2018					
				DATE			AMOUNT			
To Whom Paid ACTBLUE TECHNICAL SERVIC	ES		мо	DAY	YEAR					
Mailing Address 1900 CHELMSFORD STREET			11	5	2018	\$	29.34			
City LOWELL State Zip Code (Plus 4)			Descrip	tion of Exp	enditure					
	MA		Description of Expenditure CREDIT CARD PROCESSING FEE							
To Whom Paid ACTBLUE TECHNICAL SERVICES				DAY	YEAR					
Mailing Address 1900 CHELMSFORD STREET				8	2018	\$	2.10			
City LOWELL	State	Zip Code (Plus 4)	Descrip	otion of Exp	penditure					
	MA	01851		Γ CARD PR						
To Whom Paid ACTBLUE TECHNICAL SERVIC	ES		мо	DAY	YEAR					
Mailing Address 1900 CHEL	LMSFORD STREET		11	13	2018	\$	0.55			
City LOWELL	State	Zip Code (Plus 4)	Descrip	otion of Exp	enditure					
	MA	01851	CREDIT CARD PROCESSING FEE							
To Whom Paid ACTBLUE TECHNICAL SERVIC	ES		МО	DAY	YEAR					
Mailing Address 1900 CHEL	LMSFORD STREET		11	21	2018	\$	0.58			
City LOWELL	State	Zip Code (Plus 4)	Descrip	otion of Exp	enditure					
	MA	01851		CREDIT CARD PROCESSING FEE						
To Whom Paid BENEFICIAL MUTUAL SAVING	S BANK		мо	DAY	YEAR					
Mailing Address 1139 CHES	STNUT ST		10	25	2018	\$	5.00			
City PHILADELPHIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	L venditure					

191073619

BANK FEE

PA

To Whom Paid BENEFICIAL MUTUAL SAVINGS BANK	мо	DAY	YEAR							
Mailing Address 1139 CHESTNUT ST				26	2018	\$		5.00		
PHILADELPHIA State PA 2ip Code (Plus 4) 191073619				otion of Exp	enditure					
To Whom Paid CITIZENS FOR JASON RUFF				DAY	YEAR					
Mailing Address 662 MAIN ST				25	2018	\$		500.00		
City SLATINGTON State PA 2ip Code (Plus 4) 180801444			Description of Expenditure CONTRIBUTION							
To Whom Paid CITIZENS FOR MULLERY			МО	DAY	YEAR					
Mailing Address 6 MARIE ST				25	2018	\$		500.00		
City NANTICOKE	COKE State Zip Code (Plus 4) 186344113				Description of Expenditure CONTRIBUTION					
To Whom Paid COMMITTEE TO ELECT HELEN TAI			мо	DAY	YEAR					
			MO	DAY 25	YEAR 2018	\$		500.00		
COMMITTEE TO ELECT HELEN TAI Mailing Address 2827 RIVER RD	State PA	Zip Code (Plus 4) 189389528	10 Descrip		2018	\$		500.00		
COMMITTEE TO ELECT HELEN TAI Mailing Address 2827 RIVER RD			10 Descrip	25	2018	\$		500.00		
COMMITTEE TO ELECT HELEN TAI Mailing Address 2827 RIVER RD City NEW HOPE S To Whom Paid			10 Descrip CONTR	25 Ition of Exp	2018 penditure	\$		500.00		
COMMITTEE TO ELECT HELEN TAI Mailing Address 2827 RIVER RD City NEW HOPE To Whom Paid COMMITTEE TO ELECT KRISTIN SEALE Mailing Address 521 N MONROE ST			Descrip CONTR	25 tion of Exp IBUTION DAY	2018 Penditure YEAR 2018					
COMMITTEE TO ELECT HELEN TAI Mailing Address 2827 RIVER RD City NEW HOPE To Whom Paid COMMITTEE TO ELECT KRISTIN SEALE Mailing Address 521 N MONROE ST	PA	189389528 Zip Code (Plus 4)	Descrip CONTR	25 Ition of Exp IBUTION DAY 1	2018 Penditure YEAR 2018					
COMMITTEE TO ELECT HELEN TAI Mailing Address 2827 RIVER RD City NEW HOPE To Whom Paid COMMITTEE TO ELECT KRISTIN SEALE Mailing Address 521 N MONROE ST City MEDIA S To Whom Paid	PA	189389528 Zip Code (Plus 4)	Descrip CONTR	25 Ition of Exp IBUTION DAY 1 Ition of Exp IBUTION	2018 Penditure YEAR 2018 Penditure					

							PA	GE 14			
To Whom Paid FAIRMOUNT MEDIA					DAY	YEAR					
Mailing Address	PO BOX 15069				25	2018	\$	2,078.50			
City PHILADE	LPHIA	Description of Expenditure REIMBURSEMENT FOR EVENT COSTS AND PH									
To Whom Paid FAIRMOUNT MEDIA					DAY	YEAR					
Mailing Address PO BOX 15069			11	1	2018	\$	5,090.00				
City PHILADE	LPHIA PA Zip Code (Plus 4) 191300069				Description of Expenditure CONSULTING SERVICES + DATABASE REIMBURSEMENT						
To Whom Paid FIRST DATA MER	RCHANT SERVICES			МО	DAY	YEAR					
Mailing Address	5565 GLENRIDGE C	ONNECTOR NE STE 20	000	11	5	2018	\$	82.49			
City ATLANTA	X	State Zip Code (Plus 4) GA 303424799				Description of Expenditure CREDIT CARD FEES					
To Whom Paid PENNSYLVANIA	HOUSE DEMOCRATIC (CAMPAIGN COMMITTE	E	мо	DAY	YEAR					
		AM AION COMMITTE									
Mailing Address	PO BOX 555	AND COMPTTE		11	1	2018	\$	2,500.00			
Mailing Address City HARRISE	PO BOX 555	State PA	Zip Code (Plus 4) 171080555		1 Ition of Exp		\$	2,500.00			
Olt .	PO BOX 555 BURG	State		Descrip			\$	2,500.00			
City HARRISE	PO BOX 555 BURG	State		Descrip GOTV	otion of Exp	enditure	\$	2,500.00			
City HARRISE To Whom Paid ELIZABETH SARS	PO BOX 555 BURG SHIK 1812 PINE ST 1R	State		Descrip GOTV MO 10 Descrip	DAY	YEAR 2018					
City HARRISE To Whom Paid ELIZABETH SARS Mailing Address	PO BOX 555 BURG SHIK 1812 PINE ST 1R	State PA State	171080555 Zip Code (Plus 4)	Descrip GOTV MO 10 Descrip	DAY 26	YEAR 2018					
To Whom Paid ELIZABETH SARS Mailing Address City PHILADE	PO BOX 555 BURG SHIK 1812 PINE ST 1R	State PA State	171080555 Zip Code (Plus 4)	MO 10 Descrip COMPLI	DAY 26 Stion of Exp ANCE SER	YEAR 2018 Denditure					

To Whom Paid WARD 2 DEMOCRATS			мо	DAY	YEAR	
Mailing Address INFORMATION REQUESTED			11	1	2018	\$ 1,000.00
City	1	otion of Exp				
Enter Grand Total of Expend	litures on Page 1, Re	eport Cover Page, Item D.				\$ PAGE TOTAL 17,826.88
					·	

STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate				ng Period				
SIMS4PAPAC				<u>10</u>	/23/2018	То:	<u>1</u>	1/26/2018
					DATE			Outstanding Balance of Debt
Name of Creditor MEL HEIFETZ				мо	DAY	YEAR		
Mailing Address 304 S 12TH ST				3	3	2016	\$	50,000.00
City PHILADELPHIA State Zip Code (Plus 4) Description of D LOAN RECEIVED						bt		
Enter Grand Total of Unpaid Do	ebts on Page	1, Report Cover Pa	ge, Item	ı G.			\$	PAGE TOTAL 50,000.00