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	2018	C1116				port ed B		CAN	DIDATE COMMITTEE LOBBYIST					BYIST				
Name of Filing C	ommittee	, Candida	ate or L	obbyist:		SIM	1S,BI	RIAN	K										
Street Address:																			
City:									State:					Zip Code	: 19	147			
TYPE OF REPORT	6TH TUES PRE-PRIMA		1.	2ND FRIDAY PRIMARY	Y PRE	-	2.	30 DA PRIMA		Р	POST- 3.			AMENDME REPORT?	Yes	√ No)		
(place X to the right of	6TH TUES PRE-ELECT		4.	2ND FRIDAY ELECTION	y pre	≣-	5.	30 DA ELECT		Р	OST-	6.		TERMINATION REPORT?		Yes	No)	√
report type)	ANNUAL	REPORT	7. X	Year 2018					IG MET CHECK					PAPER		\checkmark	DISKE	TTE	
Name of Office S	ought by	Candidat	e:	-					DATE	OI	F ELE	CTION		District Number	Office Code	Par	ty Code	Cour	
									МО		DAY	YEA	R	182	STH	DEN	1	51	
REPRESENTATI	VE IN TH	E GENER	AL ASS	EMBLY						11		6	2018		(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of		and	МО	DAY	YEAR	L			МО		DAY	YEA	R	FOR	OFFIC	E USE	ONLY		
Expenditures	from:		=	11 27	2	018	T	0		12	3	31	2018						
A. Amount Bro	ught Forw	ard Fron	ı Last R	eport				\$					0.00						
B. Total Moneta	ary Contri	butions A	And Rec	eipts (From	Sche	dule	e I)	\$				2,46	0.11]					
C. Total Funds	Available	(Sum Of	Lines A	and B)				\$				2,46	0.11						
D. Total Expend	ditures (F	rom Sche	edule II	I)				\$				2,46	0.11						
E. Ending Cash	Balance (Subtract	Line D	From Line (C)			\$					0.00						
F. Value Of In-	Kind Cont	ributions	Receiv	ed (From So	chedu	le I	I)	\$					0.00						
G. Unpaid Debt	s And Obl	igations	(From S	chedule IV)			\$					0.00		'				
					AFF	ID	AVI	T SE	CTIO	N									
PART I - If this is	a Commi	ittee repo	ort, trea	surer sign l	nere.	If th	nis is	a Can	didate	re	port, c	andida	te sig	gn here.					
I swear (or affirm) correct and comple		eport, incl	uding the	attached sch	nedule	s file	ed on	paper o	or by ele	ectr	onic me	edium, a	re to t	the best of I	my know	/ledge	and beli	ef , tr	ue <u>.</u>
Sworn to and subs	cribed befo day of	re me this		20						•		Sig	nature	e of Person	Submitt	ing Rep	oort		
		Signatur						- -		•				Printe	d Name				-
My Commission Ex	pires	Signatui	e							-				Email					-
	Ī	мо	D	AY	YR					•	Are	ea Code		Daytime	Teleph	one Nu	mber		_
Part II- If this is	a report	of a cand	lidate's	authorized	Comn	nitte	ee, C	andida	ate sha	ıll s	sign he	ere.							
I swear (or affirm) No 320) as amende		e best of m	y knowle	edge and belie	ef this	poli	itical	commi	ittee ha	s no	ot violat	ted any	orovis	ions of the	act of Ju	ine 3,1	937 (P.I	133	3,
Sworn to and subsc		e me this											s	ignature of	Candida	te			-
	day of ——							-						Printed	Name				-
	s	ignature						-		_									_
My Commission Exp		-								-				Email					
	_	мо	D	AY	YR	l		-			Area	Code		Day	rtime Te	lephor	ne Numb	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
SIMS,BRIAN K	From:	11/27/201	<u>8</u> To:	12/31/2018
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g 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	J Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	2,460.11
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	y Period	(3)	\$	2,460.11
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g 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			\$	2,460.11

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		Reporting Period					
			Fre	om:		То	:	
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
	•	·			•	•	$\overline{}$	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 o	r Candidate		Rep Fro	oorting P	eriod	To	o:	
			l		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.

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	idate	R	eporting	g Period				
SIMS,BRIAN K		F	rom:	11/2	7/2018	То:	<u>12</u>	2/31/2018
				DA	TE		A	MOUNT
Full Name of Contributing Commit SIMS 4 PA PAC	tee			МО	DAY	YEAR		
Mailing Address PO BOX 15941							\$	1,320.00
City PHILADELPHIA	State PA	Zip Code (Pl 19103-7812	-	12	4	2018	3	
Full Name of Contributing Commit	tee			МО	DAY	YEAR		
Mailing Address PO BOX 15941							\$	1,140.11
City PHILADELPHIA	State PA	Zip Code (Pl 19103-7812	•	12	29	2018	3	
								PAGE TOTAL
Enter Grand Total of Part C on	Schedule I, Detail	ed Summary Page,	Sectio	n 3.			\$	2,460.11

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:		То):	
					D	ATE		AN	MOUNT
Full Name of Contributor					МО	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus	5 4)					
Employer Name	•	•			Occupa	tion	•	•	
Employer Mailing Address/Principal Pla Business	ce of		City		•	State		Zip Code	e (Plus 4)
Enter Grand Total of Part C on Scho	edule I, Deta	iled Sumr	mary Page,	Section	on 3.			P <i>/</i>	AGE 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 Co	andidate		Report	ting Perio	bd			
			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 Fotal of Fair 2 of	r benedule 1/ betanet	z Sammary r age,	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 Po	eriod	
SIMS,BRIAN K	From:	11/27/2018 To:	12/31/2018
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUT	OR	
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
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		Reporting	g Period			
			From:			To:	
				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 Sum	mary Pag	ле Г		PAGE TOTAL
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	, ,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidat	e				Re	porting F	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	taile	ed				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	ndidate		Reporti	ng Period			
SIMS,BRIAN K			From	11/2	7/2018	То:	12/31/2018
				DATE			AMOUNT
To Whom Paid The Union League			МО	DAY	YEAR		
Mailing Address 140 S Broad	l St		12	29	2018	\$	200.00
City Philadelphia	State PA	Zip Code (Plus 4) 19102	Descrip Staff G	otion of Exp	penditure		
To Whom Paid Uber			мо	DAY	YEAR		
Mailing Address 1455 Market	t St		12	29	2018	\$	73.83
City San Francisco	State CA	Zip Code (Plus 4) 94103	Description of Expenditure Travel				
To Whom Paid Trade			мо	DAY	YEAR		
Mailing Address 1410 14th S	t NW		12	29	2018	\$	17.00
City Washington	State DC	Zip Code (Plus 4) 20005	Descrip Meal	otion of Exp	penditure		
To Whom Paid Shake Shack			МО	DAY	YEAR		
Mailing Address 200 F St NW	ı		12	29	2018	\$	20.65
City Washington	State DC	Zip Code (Plus 4) 20004	Descrip Meal	otion of Exp	penditure		
To Whom Paid Intercontinental Hotel			МО	DAY	YEAR		
Mailing Address 801 Wharf S	St SW		12	29	2018	\$	86.00
City Washington	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		

20024

Meal

DC

						PAG	SE 12
To Whom Paid Nellies Sports Bar			МО	DAY	YEAR		
Mailing Address 900 U St NW			12	29	2018	\$	42.00
City Washington	State DC	Zip Code (Plus 4) 20001	Descrip Meal	otion of Exp	penditure		
To Whom Paid Marriott			МО	DAY	YEAR		
Mailing Address 1331 Pennsylvania	Ave NW		12	29	2018	\$	581.00
City Washington	State DC	Zip Code (Plus 4) 20004	Descrip Lodging	otion of Exp	penditure		
To Whom Paid Marriott			МО	DAY	YEAR		
Mailing Address 1331 Pennsylvania	Ave NW		12	4	2018	\$	907.50
City Washington	State DC	Zip Code (Plus 4) 20004	Description of Expenditure Lodging & Meals				
To Whom Paid Alexander Inn			МО	DAY	YEAR		
Mailing Address 301 S 12th St			12	4	2018	\$	159.00
City Philadelphia	State PA	Zip Code (Plus 4) 19107	Descrip Room F	otion of Exp	penditure		
To Whom Paid J'Amie			МО	DAY	YEAR		
Mailing Address 212 S 12th St			12	4	2018	\$	30.00
City Philadelphia	State PA	Zip Code (Plus 4) 19107	Descrip Meal	otion of Exp	penditure		
To Whom Paid			МО	DAY	YEAR		
Love City Brewing							
Mailing Address 1023 Hamilton St			12	4	2018	\$	15.50

							PAGE 13
To Whom Paid Cheu Noodle Bar			мо	DAY	YEAR		
Mailing Address 255 S 10th St			12	4	2018	\$	25.00
City Philadelphia	State PA	Zip Code (Plus 4) 19107	Description of Expenditure Meal				
To Whom Paid Acme			МО	DAY	YEAR		
Mailing Address 1001 South St			12	29	2018	\$	100.00
City Philadelphia	State PA	Zip Code (Plus 4) 19147	Description of Expenditure Neighborhood Gift				
To Whom Paid Sunoco			МО	DAY	YEAR		
Mailing Address 2201 Walnut St			12	29	2018	\$	26.63
City Philadelphia	State PA	Zip Code (Plus 4) 19103	Description of Expenditure Travel				
To Whom Paid Love City Brewing			мо	DAY	YEAR		
Mailing Address 1023 Hamilton St			12	4	2018	\$	154.50
City Philadelphia	State PA	Zip Code (Plus 4) 19123	Description of Expenditure Event Expenses				
To Whom Paid Walgreens			МО	DAY	YEAR		
Mailing Address 1800 South St			12	4	2018	\$	21.50
City Philadelphia	State PA	Zip Code (Plus 4) 19146	Description of Expenditure Toys for Tots Gift				
Enter Grand Total of Expend	litures on Page 1. Re	port Cover Page. Item D					PAGE TOTAL
	25 J 1 age 2, No	per de la laga, main d	=			\$	2,460.11