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	C1335				eport led B		CANE	OIC	DATE	√	СО	MMITTEE		LOBE	BYIST		
Name of Filing C	ommittee, C	Candida	ite or Lo	obbyist:		SET	TTLE	S, DIA	ANE										
Street Address:																			
City:									State:					Zip Code	19	143			
TYPE OF REPORT	6TH TUESDA' PRE-PRIMAR'		1.	2ND FRIDAY PRIMARY	Y PRE	-	2.	30 DA PRIMA		P	OST-	3.		AMENDME REPORT?	NT	Yes	No	1	\
(place X to the right of	6TH TUESDA PRE-ELECTIC		4.	2ND FRIDAY ELECTION	Y PRE	-	5.	30 DA ELECT		P	OST-	6.		TERMINAT REPORT?	TON	Yes	No		\
report type)	ANNUAL RE	PORT	7. X	Year 2018					IG METI CHECK					PAPER		\checkmark	DISKE	TTE	
Name of Office S	Sought by Ca	andidat	e:						DATE	OF	F ELEC	CTION		District Number	Office Code	Par	ty Code	Coun	
 	- 			==					МО		DAY	YEAR		188	STH	DEM	1	51	
REPRESENTATI	VE IN THE C	JENEK <i>A</i>	AL ASSI	EMBLY					1	.1		6 20	018		(SEE INS	TRUCTIO	ONS FOR (CODES)
Summary of		and	МО	DAY	YEAR	ł			МО		DAY	YEAR	2	FOR	OFFIC	E USE	ONLY		
Expenditures	from:			6 5	2	018	3 T	О.		1	3	31 2	019						
A. Amount Bro	ught Forwar	d From	Last R	eport				\$				789	.82						
B. Total Moneta	ary Contribu	tions A	nd Rec	eipts (From	Sche	dule	e I)	\$				170	.00						
C. Total Funds	Available (S	um Of	Lines A	and B)				\$				959	.82						ļ
D. Total Expend	ditures (Fro	m Sche	dule II	(1)				\$				900	.38						
E. Ending Cash	Balance (Su	ubtract	Line D	From Line (۵)	_		\$				59	.44						
F. Value Of In-	Kind Contrib	utions	Receive	ed (From Sc	chedu	le II	.I)	\$				0.	.00						
G. Unpaid Debt	s And Obliga	ations ((From S	chedule IV)			\$				0	.00						
					AFF	·ID/	AVI	T SE	CTION	١									
PART I - If this is		•	•	-															
I swear (or affirm) correct and comple		ort, inclu	iding the	attached sch	nedules	s file	ed on	paper o	or by ele	ctr	onic me	edium, are	e to t	he best of r	my know	rledge a	and beli	ef , tr	ue
Sworn to and subs	scribed before day of	me this		20						-		Signa	ature	of Person	Submitti	ng Rep	ort		_
		Signature				_		<u>-</u>		-				Printe	d Name				-
My Commission Ex		Hymatur	2							-				Email					-
	мо	,	DA	AY	YR					_	Are	a Code		Daytime	Telepho	one Nu	mber		
Part II- If this is	a report of	a cand	idate's	authorized	Comn	nitte	ee, C	andida	ate sha	II s	sign he	ere.							
I swear (or affirm) No 320) as amende		est of m	y knowle	edge and belie	ef this	; poli	itical	commi	ittee has	no	ot violat	ed any pr	rovisi	ions of the a	act of Ju	ne 3,19	937 (P.L	1333	3,
Sworn to and subsc		ne this											Si	ignature of	Candida	te			-
	day of ——							_						Printed	Name				_
	Sigr	nature				—		-		_									_
My Commission Exp	_									-				Email					
	-	мо	Di	AY	YR			-			Area (Code		Day	time Te	lephon	ne Numb	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
SETTLES, DIANE	From:	<u>6/5/201</u>	<u>8</u> To:	1/31/2019
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)	\$	170.00
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			\$	170.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize onl with an aggregate val	-			-			
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		1			DATE			AMOUNT
Full Name of Contribution	ng Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	•	•			•	•		PAGE 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 or Candi	date		Re _l Fro	oorting P m:	eriod	To	o:	
					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	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			
			Fror	n:		To) :	
				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 Coo	de (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary 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 Perio	d			
SETTLES, DIANE			From:		6/5/201	<u>8</u> To:		1/31/2019
				D	ATE			AMOUNT
Full Name Nation Builder				МО	DAY	YEAR		
Mailing Address 520 S. Grand Avenu	ue, 2nd Fl.						\$	170.00
City Los Angeles	State CA	Zip Code (1 90071	Plus 4)	6	15	2018	3	
Receipt Description Web Page Dow	ngrade Refund	i					•	
Enter Grand Total of Part E on Schedu	ıle T. Detailed	I Summary Page	Section	4				PAGE TOTAL
Enter Grand Total of Part E on Schede	ne i, betaneu	. Jummary Fage,	Section	Τ.			\$	170.00

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		
SETTLES, DIANE	From:	6/5/2018 To:	1/31/2019
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER 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		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	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	1				Re	porting l	Period			
					Fro	om:		To:		
							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 Pla Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iptio	n of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	nedule II, I	n-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or (Candidate		Reporti	ng Period					
SETTLES, DIANE			From	<u>6/!</u>	5/2018	То:	<u>1/31/2019</u>		
				DATE					
To Whom Paid Diane			мо	DAY	YEAR				
Mailing Address Settles			7	30	2018	\$	90.00		
City Philadelphia	State	Zip Code (Plus 4)	Descrip						
	PA	19143	1	ign Mobile					
To Whom Paid Diane			мо	DAY	YEAR				
Mailing Address Settles			7	7 30 2018 \$					
City Philadelphia	State	Zip Code (Plus 4)	Description of Expenditure						
	PA	19143	Campa						
To Whom Paid Diane			МО	DAY	YEAR				
Mailing Address Settles			7	30	2018	\$	161.34		
City Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	ı			
	PA	19143	-	Description of Expenditure Campaign Mailers - 5/20/18					
To Whom Paid Diane	·	·	МО	DAY	YEAR				
Mailing Address Settles			7	25	2018	\$	6.70		
City Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	PA	19143	-	_		ration-Hbg			
To Whom Paid	•	·	МО	DAY	YEAR				
Diane									
Mailing Address Settles			1	31	2019	\$	75.00		
City Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	<u>I</u>			
- Tilladelpilla	BA	10143	Disasteral	M-1	· C:-	- 2/17/10			

19143

PA

Photoshoot Makeup Session-3/17/18

City Philadelphia State PA In 1943 Description of Expenditure Campaign Photoshoot 3/17/18 - Malik Boyd To Whom Paid Diane Mo DAY YEAR Mailing Address Settles I 29 2019 \$ 2 City Philadelphia State PA In 1943 Description of Expenditure Campaign Photoshoot 3/17/18 - Malik Boyd Mo DAY YEAR Description of Expenditure Reopened Nation Builder Acct-1/29/19 To Whom Paid TD Bank Mo DAY YEAR City Philadelphia State PA In 1948 Description of Expenditure Reopened Nation Builder Acct-1/29/19 To Whom Paid TD Bank Mo DAY YEAR To Whom Paid TD Bank Mo DAY YEAR To Whom Paid TD Bank Mo DAY YEAR To Whom Paid TD Bank Mo DAY YEAR							PAGE	: 12	
State PA				мо	DAY	YEAR			
PA	Mailing Address Settles			1	31	2019	\$	350.00	
Diane	City Philadelphia							Boyd	
City Philadelphia State PA				МО	DAY	YEAR			
To Whom Paid TD Bank Mailing Address 2653 S. 5th Street To Whom Paid TD Bank Mailing Address 2653 S. 5th Street State PA 2ip Code (Plus 4) 19148 Mo DAY YEAR Mo DAY YEAR 19148 Mo DAY YEAR 19148 Mo DAY YEAR 19148 Mo DAY YEAR	Mailing Address Settles			1	29	2019	\$	29.00	
TD Bank Mo DAY YEAR	City Philadelphia								
City Philadelphia State PA State 19148 Description of Expenditure Mthly Bank Mainenance Fee- July To Whom Paid TD Bank Mo DAY VEAR City Philadelphia State PA State				МО	DAY	YEAR			
To Whom Paid TD Bank Mailing Address 2653 S. 5th Street State PA 2ip Code (Plus 4) 19148 Mo DAY YEAR City Philadelphia To Whom Paid TD Bank Mo DAY YEAR 2ip Code (Plus 4) 19148 Mo DAY YEAR Mo DAY YEAR To Whom Paid TD Bank Mo DAY YEAR Mo DAY YEAR Address 2653 S. 5th Street State PA 2ip Code (Plus 4) 19148 Mo DAY YEAR City Philadelphia State PA 2ip Code (Plus 4) 19148 Mo DAY YEAR PA 2ip Code (Plus 4) 19148 Mo DAY YEAR To Whom Paid	Mailing Address 2653 S. 5th Street			7	31	2018	\$	10.00	
Mo DAY YEAR Mailing Address 2653 S. 5th Street State PA Sign Code (Plus 4) 19148 Mo DAY YEAR To Whom Paid TD Bank Mo DAY YEAR Mo DAY YEAR Mo DAY YEAR City Philadelphia State PA Sign Code (Plus 4) 19148 Mo DAY YEAR City Philadelphia State PA Sign Code (Plus 4) 19148 Mo DAY YEAR Mo DAY YEAR To Whom Paid TD Bank Mo DAY YEAR Mo DAY YEAR Mo DAY YEAR To Whom Paid TD Bank Maintenance Fee- Sept.	City Philadelphia								
City Philadelphia State PA To Whom Paid TD Bank Mailing Address 2653 S. 5th Street State PA State PA To Whom Paid TD Bank Mo DAY YEAR City Philadelphia State PA PA State PA				МО	DAY	YEAR			
To Whom Paid TD Bank Mailing Address 2653 S. 5th Street City Philadelphia State PA PA PA PA 19148 Mo DAY PEAR 9 30 2018 \$ 1 City Philadelphia PA Description of Expenditure Mthly Bank Maintenance Fee- Sept. To Whom Paid To Whom Paid	Mailing Address 2653 S. 5th Street			8	31	2018	\$	10.00	
TD Bank Mo DAY YEAR Mailing Address 2653 S. 5th Street 9 30 2018 \$ 1 City Philadelphia State PA 19148 Description of Expenditure Mthly Bank Maintenance Fee- Sept. To Whom Paid MO DAY YEAR	City Philadelphia								
City Philadelphia State PA PA Description of Expenditure Mthly Bank Maintenance Fee- Sept. To Whom Paid MO DAY YEAR				МО	DAY	YEAR			
To Whom Paid PA 19148 Mo DAY YEAR	Mailing Address 2653 S. 5th Street			9	30	2018	\$	10.00	
MO DAY YEAR	City Philadelphia								
				МО	DAY	YEAR			
Mailing Address 2653 S. 5th Street 10 31 2018 \$ 1	Mailing Address 2653 S. 5th Street			10	31	2018	\$	10.00	
	City Philadelphia	State	Zip Code (Plus 4)	t	tion of Exp				

To Whom Paid TD Bank			МО	DAY	YEAR		
Mailing Address 2653 S. 5th Street			11	30	2018	\$	10.00
City Philadelphia	State PA	Zip Code (Plus 4) 19148	Description of Expenditure Mthly Bank Maintenance Fee-Nov.				
To Whom Paid TD Bank			МО	DAY	YEAR		
Mailing Address 2653 S. 5th Street			12	31	2018	\$	10.00
City Philadelphia	State PA	Zip Code (Plus 4) 19148	Description of Expenditure Mthly Bank Maintenance Fee-Dec				
Enter Crand Tatal of Evenenditures on Page 1. Beneat Cover Page 1 tom D							PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.					\$	900.38	