

Campaign Finance Report

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

Filer Identification Number : 20110226		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: Sims4PAPac											
Street Address: 1120 Rodman St., Apt 2											
City: Philadelphia					State: PA		Zip Code: 19147				
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No <input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7. X	Year 2020	FILING METHOD () CHECK ONE			PAPER <input checked="" type="checkbox"/>	DISKETTE			
Name of Office Sought by Candidate:					DATE OF ELECTION			District Number	Office Code	Party Code	County Code
REPRESENTATIVE IN THE GENERAL ASSEMBLY					MO	DAY	YEAR	182	STH	DEM	51
					11	3	2020	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		11	24	2020		12	31	2020			
A. Amount Brought Forward From Last Report					\$		12,524.02				
B. Total Monetary Contributions And Receipts (From Schedule I)					\$		2,671.00				
C. Total Funds Available (Sum Of Lines A and B)					\$		15,195.02				
D. Total Expenditures (From Schedule III)					\$		3,947.59				
E. Ending Cash Balance (Subtract Line D From Line C)					\$		11,247.43				
F. Value Of In-Kind Contributions Received (From Schedule II)					\$		0.00				
G. Unpaid Debts And Obligations (From Schedule IV)					\$		50,000.00				

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
Sims4PAPac	From: <u>11/24/2020</u> To: <u>12/31/2020</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 996.00

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)	\$ 675.00
TOTAL for the Reporting Period (2)	\$ 675.00

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)	\$ 1,000.00
TOTAL for the Reporting Period (3)	\$ 1,000.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 2,671.00
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PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candidate	Reporting Period
	From: To:

DATE				AMOUNT
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Full Name of Contributing Committee			MO	DAY	YEAR	\$0.00
Mailing Address						
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 Sims4PAPac				Reporting Period From: <u>11/24/2020</u> To: <u>12/31/2020</u>			
				DATE		AMOUNT	

Full Name of Contributor Dan Broeker				MO	DAY	YEAR	\$ 75.00
Mailing Address 3000 Whiteford Rd				12	14	2020	
City York	State PA	Zip Code (Plus 4) 174028993					

Full Name of Contributor Bruce Espenshade				MO	DAY	YEAR	\$ 100.00
Mailing Address 3680 Cutter Way				12	15	2020	
City Sacramento	State CA	Zip Code (Plus 4) 958184458					

Full Name of Contributor Joseph Gallo				MO	DAY	YEAR	\$ 100.00
Mailing Address 2001 Hamilton St				12	14	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 191304201					

Full Name of Contributor Austin Idehen				MO	DAY	YEAR	\$ 100.00
Mailing Address 8931 161st St Ste 810				11	29	2020	
City Jamaica	State NY	Zip Code (Plus 4) 114326150					

Full Name of Contributor Austin Idehen				MO	DAY	YEAR	\$ 100.00
Mailing Address 8931 161st St Ste 810				12	31	2020	
City Jamaica	State NY	Zip Code (Plus 4) 114326150					

Full Name of Contributor John Lundsten				MO	DAY	YEAR	\$ 100.00
Mailing Address 2833 NE 35th Ct 19A				11	28	2020	
City Fort Lauderdale	State FL	Zip Code (Plus 4) 333085815					

Full Name of Contributor				MO	DAY	YEAR	\$100.00
Neil Sandvold							
Mailing Address				12	14	2020	
1830 Lombard St							
City	Philadelphia	State	Zip Code (Plus 4)				
		PA	191464003				

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

PAGE TOTAL	
\$	675.00

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:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$	0.00
Mailing Address							
City	State	Zip Code (Plus 4)					

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

PAGE TOTAL
\$ 0.00

PART D
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 Sims4PAPac	Reporting Period From: <u>11/24/2020</u> To: <u>12/31/2020</u>
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				DATE	AMOUNT
Full Name of Contributor Paul Testa				MO	\$ 250.00
Mailing Address 515 E 14th St Apt 7A				DAY	
City New York	State NY	Zip Code (Plus 4) 100092912	YEAR		
Employer Name NYU Langone Health				Occupation Physician	
Employer Mailing Address/Principal Place of Business 360 Park Ave S# 18-017			City New York	State NY	Zip Code (Plus 4) 100101710
Full Name of Contributor Paul Testa				MO	\$ 250.00
Mailing Address 515 E 14th St Apt 7A				DAY	
City New York	State NY	Zip Code (Plus 4) 100092912	YEAR		
Employer Name NYU Langone Health				Occupation Physician	
Employer Mailing Address/Principal Place of Business 360 Park Ave S# 18-017			City New York	State NY	Zip Code (Plus 4) 100101710
Full Name of Contributor David Sheaffer				MO	\$ 250.00
Mailing Address 440 Whisler Rd				DAY	
City Etters	State PA	Zip Code (Plus 4) 173198803	YEAR		
Employer Name Lehigh Gas Partners LP				Occupation Accountant	
Employer Mailing Address/Principal Place of Business 440 Whisler Rd			City Etters	State PA	Zip Code (Plus 4) 173198803
Full Name of Contributor David Sheaffer				MO	\$ 250.00
Mailing Address 440 Whisler Rd				DAY	
City Etters	State PA	Zip Code (Plus 4) 173198803	YEAR		
Employer Name Lehigh Gas Partners LP				Occupation Accountant	
Employer Mailing Address/Principal Place of Business 440 Whisler Rd			City Etters	State PA	Zip Code (Plus 4) 173198803

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

PAGE TOTAL
\$ 1,000.00

PART E 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	Reporting Period From: To:
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			DATE			AMOUNT
Full Name			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Receipt Description						

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 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	
Sims4PAPac		From: <u>11/24/2020</u> To: <u>12/31/2020</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period		(1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period		(2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period		(3)	\$ 0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)			\$ 0.00

SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	Reporting Period From: To:
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						PAGE TOTAL \$ 0.00

SCHEDULE II
PART G
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OVER \$250.00

Name of Filing Committee or Candidate	Reporting Period
	From: To:

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
Sims4PAPac	From <u>11/24/2020</u> To: <u>12/31/2020</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
Actblue Technical Services				
Mailing Address 1900 Chelmsford Street	12	31	2020	\$ 40.24
City Lowell				
State MA				
Zip Code (Plus 4) 01851				
Description of Expenditure				
Credit Card Processing Fee, Nov 23 - Dec 31				
To Whom Paid	MO	DAY	YEAR	
Emerge America				
Mailing Address 1001 Connecticut Ave NW Ste 206	12	4	2020	\$ 516.45
City Washington				
State DC				
Zip Code (Plus 4) 200365531				
Description of Expenditure				
Contribution				
To Whom Paid	MO	DAY	YEAR	
First Data Merchant Services				
Mailing Address 5565 Glenridge Connector NE Ste 2000	12	3	2020	\$ 64.90
City Atlanta				
State GA				
Zip Code (Plus 4) 303424799				
Description of Expenditure				
Credit Card Fees				
To Whom Paid	MO	DAY	YEAR	
National Conference of State Legislatures				
Mailing Address 444 N Capitol St NW Ste 515	12	3	2020	\$ 120.00
City Washington				
State DC				
Zip Code (Plus 4) 200011543				
Description of Expenditure				
Membership Fees				
To Whom Paid	MO	DAY	YEAR	
Princeton Strategies				
Mailing Address 1500 Walnut St Ste 800	11	30	2020	\$ 1,710.00
City Philadelphia				
State PA				
Zip Code (Plus 4) 191023505				
Description of Expenditure				
NGP Fees				
To Whom Paid	MO	DAY	YEAR	
Princeton Strategies				
Mailing Address 1500 Walnut St Ste 800	11	30	2020	\$ 1,000.00
City Philadelphia				
State PA				
Zip Code (Plus 4) 191023505				
Description of Expenditure				
Consulting				

To Whom Paid Brian Sims			MO	DAY	YEAR	\$ 496.00
Mailing Address PO Box 15941			12	20	2020	
City Philadelphia	State PA	Zip Code (Plus 4) 191030941	Description of Expenditure Reimbursement			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 3,947.59

SCHEDULE IV

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 Sims4PAPac	Reporting Period From: <u>11/24/2020</u> To: <u>12/31/2020</u>
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				DATE			Outstanding Balance of Debt
Name of Creditor				MO	DAY	YEAR	\$ 50,000.00
Mel Heifetz							
Mailing Address 304 S 12th St				3	3	2016	
City Philadelphia	State	Zip Code (Plus 4)		Description of Debt			
	PA	191075908		Loan Received			

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.	PAGE TOTAL \$ 50,000.00
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