

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:	1776486	Report Filed By:	CANDIDATE ^{1.}	COMMITTEE ^{2.}	LOBBYIST ^{3.}
-------------------------------------	---------	-------------------------	-------------------------	-------------------------	------------------------

Name of Filing Committee, Candidate or Lobbyist:

Local No. 5 PAC Fund

Street Address:

12273 Townsend Road

City:

Philadelphia

State:

PA

Zip Code:

19154

TYPE OF REPORT	6th Tuesday Pre-Primary	1.	2nd Friday Pre-Primary	2.	30 Day Post Primary	3.	Amendment Report?	Yes	No	X
	6th Tuesday Pre-Election	4.	2nd Friday Pre-Election	5.	30 Day Post Election	6.	Termination Report?	Yes	No	X
Other 501	Annual Report	7.	YEAR	2019						

Name of Office Sought by Candidate:

Other

DATE OF ELECTION

MO.	DAY	YEAR
11	5	2019

District Number:

Office Code:
OTH

Party Code:

County Code:
51

Summary of Receipts and Expenditures from:	MO. DAY YEAR			To	MO. DAY YEAR		
	10	22	2019		10	27	2019
A. Amount Brought Forward From Last Report							150.68
B. Total Monetary Contributions and Receipts (From Schedule I)							0.00
C. Total Funds Available (Sum of Lines A and B)							150.68
D. Total Expenditures (From Schedule III)							0.00
E. Ending Cash Balance (Subtract Line D from Line C)							150.68
F. Value of In-Kind Contributions Received (From Schedule II)							0.00
G. Unpaid Debts and Obligations (From Schedule IV)							0.00

FOR OFFICE USE ONLY

Commonwealth of Pennsylvania - Notary Seal
TOYA WALKER - Notary Public
Philadelphia County
My Commission Expires Sep 19, 2023
Commission Number 1302629

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, on paper or computer diskette, are to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this

28 day of October 20 19
Signature: *John L. Cichon*

Signature of Person Submitting Report
John L. Cichon
Printed Name: JOHN L. CICHON
Area Code: 215
Daytime Telephone Number: 676-2555

My Commission expires 09 19 2023
MO. DAY YEAR

AFFIDAVIT SECTION

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: _____

Signature of Person Submitting Report
Printed Name
Area Code
Daytime Telephone Number

My Commission expires ____ MO. ____ DAY ____ YEAR