

# Campaign Finance Report

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

<b>Filer Identification Number:</b>	8300199	<b>Report Filed By:</b>	CANDIDATE	1.	COMMITTEE	2.	LOBBYIST	3.
-------------------------------------	---------	-------------------------	-----------	----	-----------	----	----------	----

Name of Filing Committee, Candidate or Lobbyist:  
**HAPCO PAC (HOMEOWNERS ASSN OF PHILA)**

Street Address:  
 2101 Chestnut St. #1615

City: Philadelphia State: PA Zip Code: 19103

<b>TYPE OF REPORT</b>	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	Annual Report	7.	YEAR	2020
-------	---------------	----	------	------

Name of Office Sought by Candidate: Other	DATE OF ELECTION			District Number:	Office Code: OTH	Party Code: OTH	County Code: 51
	MO.	DAY	YEAR				
	6	2	2020				

<b>Summary of Receipts and Expenditures from:</b>	MO.	DAY	YEAR	To	MO.	DAY	YEAR
	5	19	2020		6	22	2020

A. Amount Brought Forward From Last Report	¤62,533.23
B. Total Monetary Contributions and Receipts (From Schedule I)	¤47.35
C. Total Funds Available (Sum of Lines A and B)	¤62,580.58
D. Total Expenditures (From Schedule III)	¤0.00
E. Ending Cash Balance (Subtract Line D from Line C)	¤62,580.58
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**

**Phila, County**

**JUL - 6 2020**

**Board of Elections**

**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 \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_

\_\_\_\_\_  
Signature

My Commission expires \_\_\_\_\_ MO. \_\_\_\_\_ DAY \_\_\_\_\_ YEAR

*Victor H. Pinkney*  
Signature of Person Submitting Report

**VICTOR H. PINKNEY**  
Printed Name

**215** \_\_\_\_\_  
Area Code

**684-1684**  
Daytime Telephone Number

**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

My Commission expires \_\_\_\_\_ MO. \_\_\_\_\_ DAY \_\_\_\_\_ YEAR

\_\_\_\_\_  
Signature of Person Submitting Report

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number



**Pennsylvania Department of State**

Bureau of Campaign Finance & Civic Engagement  
210 North Office Building, Harrisburg, PA 17120 • 717.787.5280 (Option 4)  
[www.dos.pa.gov/campaignfinance](http://www.dos.pa.gov/campaignfinance) • [ra-stcampaignfinance@pa.gov](mailto:ra-stcampaignfinance@pa.gov)

**Unsworn Statement in Lieu of Sworn Statement for  
Campaign Finance Reports**

Phila, County  
JUL - 6 2020  
Board of Elections

**Note:** Per Act 2020-15, which was signed into law on April 20, 2020, the following reports, statements, and declarations, Campaign Finance Reports (form DSEB-502), Campaign Finance Statements In lieu of full reports (form DSEB-503), and Independent Expenditure Reports (form DSEB-505) need not be notarized. Instead, the filer may file with each report or statement the corresponding version of this form signed by the required individual(s). **This particular form is to be used only for Campaign Finance Reports.** This form must be signed by hand where a signature is required.

Name of Filing Committee, Candidate, or Lobbyist				
Reporting Cycle Name				
<input type="checkbox"/> <b>Cycle 1</b> 6 <sup>th</sup> Tuesday Pre-Primary	<input type="checkbox"/> <b>Cycle 2</b> 2 <sup>nd</sup> Friday Pre-Primary	<input checked="" type="checkbox"/> <b>Cycle 3</b> 30 Day Post Primary	<input type="checkbox"/> <b>Cycle 4</b> 6 <sup>th</sup> Tuesday Pre-Election	<input type="checkbox"/> <b>Cycle 5</b> 2 <sup>nd</sup> Friday Pre-Election
<input type="checkbox"/> <b>Cycle 6</b> 30 Day Post-Election	<input type="checkbox"/> <b>Cycle 7</b> Annual Report	<input type="checkbox"/> <b>Cycle 8</b> 2 <sup>nd</sup> Friday Pre-Special Election	<input type="checkbox"/> <b>Cycle 9</b> 30 Day Post-Special Election	

**Part I -** If this form is submitted with a Committee report, the treasurer must sign here. If this form is submitted with a Candidate report, the candidate must sign here. If this report is submitted with a report by a contributing lobbyist, the lobbyist must sign here.

**I declare under penalty of perjury under the law of the Commonwealth of Pennsylvania that the foregoing is true and correct.**

Victor H. Pinckney Sr  
Signature of Treasurer, Candidate, or Lobbyist

06/30/2020  
Date (DD/MM/YYYY)

VICTOR H. PINCKNEY SR  
Printed Name

PHILA PA PHILA  
Location (City/State/Country)