

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:	8300199	Report Filed By:	CANDIDATE	1.	COMMITTEE	2.	X	LOBBYIST	3.
-------------------------------------	---------	-------------------------	-----------	----	------------------	----	---	-----------------	----

Name of Filing Committee, Candidate or Lobbyist:
HAPCO-PAC

Street Address:
1120 Buttonwood Street

City: Philadelphia	State: PA	Zip Code: 19123-3738
-----------------------	--------------	-------------------------

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. X	Termination Report?	YES	NO	X
	Annual Report	7.	YEAR 2016							

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

Summary of Receipts and Expenditures from:	MO. DAY YEAR	To	MO. DAY YEAR		FOR OFFICE USE ONLY
A. Amount Brought Forward From Last Report				\$ 78,945.90	
B. Total Monetary Contributions and Receipts (From Schedule I)				\$ 1,282.89	
C. Total Funds Available (Sum of Lines A and B)				\$ 80,228.79	
D. Total Expenditures (From Schedule III)				\$ 500.00	
E. Ending Cash Balance (Subtract Line D from Line C)				\$ 79,728.79	
F. Value of In-Kind Contributions Received (From Schedule II)				\$ -	
G. Unpaid Debts and Obligations (From Schedule IV)				\$ -	

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		Signature of Person Submitting Report
My commission expires _____		Printed Name
MO. DAY YEAR		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		Signature of Candidate
My commission expires _____		Printed Name
MO. DAY YEAR		Area Code _____ Daytime Telephone Number _____

SCHEDULE I
Contributions And Receipts

Detailed Summary Page

Name of Filing Committee or Candidate HAPCO-PAC	Reporting Period From _____ To _____
--	---

1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ 380.00

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)	
Contributions Received from Political Committees (Part A)	\$ -
All Other Contributions (Part B)	\$ 400.00
TOTAL for the Reporting Period (2)	\$ 400.00

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$ -
All Other Contributions (Part D)	\$ 500.00
TOTAL for the Reporting Period (3)	\$ 500.00

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)	
TOTAL for the Reporting Period (4)	\$ 2.89

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 Page 1, Report Cover Page, Item B.)	\$ 1,282.89
--	-------------

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 HAPCO-PAC			Reporting Period From _____ To _____			
Full Name of Contributor Josephine Calabretta			MO. 10	DAY 25	YEAR 2016	\$ 100.00
Mailing Address 113 Witherill rd						
City Cheltenham	State PA	Zip Code (Plus 4) 19012				
Full Name of Contributor David Smith			MO. 10	DAY 26	YEAR 2016	\$ 100.00
Mailing Address 115 Kingston rd						
City Media	State PA	Zip Code (Plus 4) 19063				
Full Name of Contributor Janice Gugliuzza			MO. 11	DAY 2	YEAR 2016	\$ 50.00
Mailing Address 1238 Wolf st.						
City Phila	State PA	Zip Code (Plus 4) 19148				
Full Name of Contributor Victor Pinckney			MO. 11	DAY 15	YEAR 2016	\$ 50.00
Mailing Address 2800 W. Cecil B. Moore ave.						
City Philadelphia	State PA	Zip Code (Plus 4) 19121				
Full Name of Contributor Fernando Gabriel			MO. 11	DAY 15	YEAR 2016	\$ 50.00
Mailing Address 1525 S. 7th st.						
City Philadelphia	State PA	Zip Code (Plus 4) 19148				
Full Name of Contributor Craig Corelli			MO. 11	DAY 22	YEAR 2016	\$ 50.00
Mailing Address 1 East Kings Hwy						
City Audubon	State NJ	Zip Code (Plus 4) 08106				
Enter Grand Total of Part B on Schedule I, Detailed Summary Page, Section 2.						Part B Total \$ 400.00

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 HAPCO-PAC			Reporting Period From _____ To _____			
Full Name of Contributor Robert Levin			MO. 11	DAY 2	YEAR 2016	\$ 500.00
Mailing Address 700 S. 11th st.						
City Philadelphia		State PA	Zip Code (Plus 4) 19147			
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business						
Enter Grand Total of Part D on Schedule I, Detailed Summary Page, Section 3.					Part D Total \$ 500.00	

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 HAPCO-PAC		Reporting Period From _____ To _____			
Full Name Republic Bank		MO. 11	DAY 8	YEAR 2016	\$ 2.89
Mailing Address 50 S. 16th st. Ste 2400					
City Philadelphia	State PA	Zip Code (Plus 4) 19102			
Receipt Description Interest					
Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.				Part E Total	\$ 2.89

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 HAPCO-PAC	Reporting Period From _____ To _____
--	---

1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ -

2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)	
TOTAL for the Reporting Period (2)	\$ -

3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250 (FROM PART G)	
TOTAL for the Reporting Period (3)	\$ -

TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1, 2 and 3; also enter this amount on Page 1, Report Cover Page, Item F.	\$ 0
---	------

SCHEDULE III

Statement Of Expenditures

Name of Filing Committee or Candidate HAPCO-PAC			Reporting Period From _____ To _____			
To Whom Paid Friends of Blondell Reynolds Brown			MO. 11	DAY 3	YEAR 2016	\$ 500.00
Mailing Address Room 581 City Hall						
City Philadelphia		State PA	Zip Code (Plus 4) 19107			
Description of Expenditure contribution						
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.					Schedule III Total \$ 500.00	

