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 2000 | 5347 | | | Repo | | | CANDI | DATE | | СОМ | ITTEE | ✓ | LOBE | BYIST | | |
|--|---------------------------------|-------------|-------------------------|-------|---------|------|----------------|-------------|----------|-------------|------------|--------------------|----------------|---------------|-----------|-----------|---|
| Name of Filing C | Committee, Candid | date or L | obbyist: | | SABA | TIN | NA SF | R.,JOHN F | RIEND | S O | F | | | | | | |
| Street Address: | 7720 CASTO | R AVE | | | | | | | | | | | | | | | |
| City: | PHILADELPH | ΙΑ | | | | | | State: | PA | | | Zip Cod | de: 19 | 9152-0 | 000 | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDAY I PRIMARY | PRE- | 2. | | 30 DA PRIMA | | POST- | 3. | | AMENDM REPORT | | Yes | No | ~ | |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDAY ELECTION | PRE | - 5. | | 30 DA ELECT | | POST- | 6. X | | TERMIN/ REPORT | | Yes | No | ~ | |
| report type) | ANNUAL REPORT | 7. | Year 2020 | | | | | IG METHO | | | | PAPER | | $\overline{}$ | DISKE | TTE | |
| Name of Office S | = Sought by Candida | ite: | | | _ | - | | DATE O | F ELE | CTIC | N | District Number | Office Code | Par | ty Code | County | |
| | | | | | | | | МО | DAY | YI | EAR | | 10000 | | | 51 | |
| | | | | | | | | 11 | | 3 | 2020 | | (SEE IN | STRUCTIO | ONS FOR C | ODES) | |
| | Receipts and | МО | DAY Y | EAR | | | | МО | DAY | Y | EAR | FC | R OFFI | CE USE | ONLY | | |
| Expenditures | s from: | | 1 1 | 20 |)20 | T | 0 | 11 | : | 23 | 2020 | | | | | | |
| A. Amount Bro | ught Forward Fro | m Last R | eport | | | | \$ | | | 25, | 515.06 | | | | | | |
| B. Total Moneta | ary Contributions | And Rec | eipts (From S | ched | dule 1 | I) | \$ | | | 1,0 | 00.00 | | | | | | |
| C. Total Funds | Available (Sum O | f Lines A | and B) | | | | \$ | | | 26, | 515.06 | | | | | | |
| D. Total Expend | ditures (From Sch | edule II | I) | | | | \$ | | | | 22.00 | | | | | | |
| E. Ending Cash | Balance (Subtra | t Line D | From Line C) | | | | \$ | | | 26,4 | 193.06 | | | | | | |
| F. Value Of In- | Kind Contribution | s Receiv | ed (From Sch | edul | e II) | | \$ | | | | 0.00 | | | | | | |
| G. Unpaid Debt | ts And Obligations | (From S | Schedule IV) | | | | \$ | | | | 0.00 | | | 1 | | | |
| | | | A | \FF | ΙDΑ | VI٦ | ΓSE | CTION | | | | | | | | | |
| PART I - If this is | s a Committee rep | ort, trea | surer sign he | re. I | f this | s is | a Can | ndidate re | eport, c | candi | date sig | jn here. | | | | | I |
| I swear (or affirm) correct and comple |) that this report, inc ete. | cluding the | e attached sched | lules | filed | on p | paper (| or by elect | ronic m | edium | , are to t | the best o | f my kno | wledge | and belie | ef , true | |
| Sworn to and subs | cribed before me the | is | 20 | | | | | | | 5 | Signature | of Perso | n Submit | ting Rep | ort | | |
| | Signati | ıre | | | | | · - | | | | | Prin | ted Name | e | | | |
| My Commission Ex | cpires | | | | | | _ | | | | | Ema | il | | | | |
| | МО | D | AY | YR | | | | | Are | ea Co | de | Daytim | e Telepi | none Nu | mber | | |
| Part II- If this is | a report of a can | didate's | authorized Co | mm | ittee | , Ca | andida | ate shall | sign he | ere. | | | | | | | |
| I swear (or affirm) No 320) as amende | that to the best of ed. | my knowl | edge and belief | this | politio | cal | commi | ittee has n | ot viola | ted ar | ny provis | ions of th | e act of J | une 3,19 | 937 (P.L. | 1333, | l |
| Sworn to and subsc | ribed before me this day of | : | 20 | | | | | | | | s | ignature (| of Candid | ate | | | |
| | | | | | | | - | | | | | Printe | d Name | | | | |
| My Commission Exp | Signature | | | | | | • | | | | | Ema | il | | | | |
| , | | | | | | | | | | | | | | | | | |
| | МО | D | AY | YR | | | | | Area | Code | | D | aytime T | elephon | e Numbe | er | |

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

| Name of Filing Committee or Candidate | Reporting | g Period | | |
|---|-----------|----------|--------------|------------|
| SABATINA SR.,JOHN FRIENDS OF | From: | 1/1/202 | <u>0</u> To: | 11/23/2020 |
| 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 | \$ | 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) | | | \$ | 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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page 1, Page 1, Report Cover Page 2, Page | | | \$ | 1,000.00 |

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 Candida | te | 1 | Reporting Period | | | | | | | |
|-------------------------------------|-------|-------------------|------------------|------|------|----|--------|--|--|--|
| | | -1 | From: | | То | • | | | | |
| | | • | | DATE | | | AMOUNT | | | |
| Full Name of Contributing Committee | | | МО | DAY | YEAR | | | | | |
| Mailing Address | _ | _ | | | | \$ | 0.00 | | | |
| City | State | Zip Code (Plus 4) | | | | | | | | |

PAGE TOTAL
0.00

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

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.

| Name of Filing Commi | ttee or Candidate | F | Reporting I | Period | | | |
|--------------------------|-------------------|-------------------|-------------|--------|------|------------|--------|
| | | F | rom: | | To |) : | |
| | | I . | | DATE | | | AMOUNT |
| Full Name of Contributor | r | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | \$ | 0.00 |
| City | State | Zip Code (Plus 4) | | | Ĭ | | |

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 | me of Filing Committee or Candidate | | Reporting Period | | | | | | | |
|---------------------------------------|-------------------------------------|----------|------------------|------|-----|------|---------------|------------|--|--|
| | | | From: | | | То: | | | | |
| | | | | DA | TE | | P | AMOUNT | | |
| Full Name of Contributing Committee | | | | мо | DAY | YEAR | | 0.0 | | |
| Mailing Address | | | | | | | - \$ | 0.0 | | |
| City | State | Zip Cod | e (Plus 4) | | | | | | | |
| | | | | | | | | PAGE TOTAL | | |
| Enter Grand Total of Part C on Scheo | dule I, Detailed Sun | nmary 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 | | | |
|---|---|----------------|---------|-----------|------------|--------|------|-----------------------|
| SABATINA SR.,JOHN FRIENDS OF | | | Fron | n: | 1/1/2 | 020 T | o: | 11/23/2020 |
| | | | | D/ | ATE | | | AMOUNT |
| Full Name of Contributor | | | | мо | DAY | YEAR | | \$ 1,000.00 |
| Edward Hazzouri | | | | | | | | 1,000.00 |
| Mailing Address 46 Warwick Road | | | | 9 | 21 | 2020 | , | |
| City Haddonfield | State | Zip Code (Plus | 5 4) | | | 2020 | | |
| | NJ | 08033 | | | | | | |
| Employer Name Hazzouri and Associat | es | | | Occupat | ion | Chairm | an H | lazzouri and Associat |
| Employer Mailing Address/Principal Plac | e of Business | City | | | State | | Zip | Code (Plus 4) |
| 115 Chestnut Street | | philadelph | nia | | PA | | 19 | 106 |
| Enter Grand Total of Part C on Scher | ter Grand Total of Part C on Schedule I, Detailed Summary Page, | | | | | | | PAGE TOTAL |
| zinci orana rotal or rait e on oche | zaic z, Detailed St | a. y i ugc, | Section | J. | | | \$ | 1,000.00 |

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 of | or Candidate | | Report | ing Peri | od | | |
|------------------------------|-------------------------|---------------|---------|-----------|-----|------|------------|
| | | | From: | | | To: | |
| | | | | D | ATE | | AMOUNT |
| Full Name | | | | мо | DAY | YEAR | \$ 0.00 |
| Mailing Address | | | | | | | |
| City | State | Zip Code (| Plus 4) | | | | |
| Receipt Description | • | • | | | | | |
| Enter Grand Total of Part I | on Schodulo I. Dotailed | Summary Dage | Soction | 4 | | | PAGE TOTAL |
| cincer Granu Total Of Part I | on Schedule 1, Detalled | Summary Page, | Section | 4. | | | \$ 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 | | |
|--|------------------|----------------------------|-------------------|
| SABATINA SR.,JOHN FRIENDS OF | From: | <u>1/1/2020</u> To: | <u>11/23/2020</u> |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P | ER 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 Candidate | | | Reporting Period | | | | | |
|---------------------------------------|------------------|----------------------|------------------|----------|------|-------------|-----------|------|
| | | | From: | | | То: | | |
| | | | | DATE | | | AMOUNT | |
| Full Name of Contributor | | | МО | DAY | YEAR | | | |
| Mailing Address | | | | | | 7 \$ | | 0.00 |
| City | State | Zip Code (Plus 4) | | | | | | |
| Description of Contribution: | - | - | • | • | • | | | |
| | | | | | | | | |
| Enter Grand Total of Part F on Sche | dule II, In-Kind | d Contributions Deta | iled Sum | mary Pag | ge, | | PAGE TOTA | L |
| Section 2. | | | | | | \$ | | 0.00 |

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

| Name of Filing Committee or Candidate | | | | Re | porting | Period | | | | |
|--|----------------|-----|------------------|--------|---------|----------------|-------|------|-----------------|------|
| | | | | Fro | m: | | To: | | | |
| | | | | | | DATE | | | AMOUN | т |
| Full Name of Contributor | | | | | мо | DAY | YEAR | | | |
| Mailing Address | | | | | | | | 1 | \$ | 0.00 |
| City | State | | Zip Code(Plus 4) | | | | | | | |
| Employer of Contributor | | | | | Occup | oation | | | | |
| Employer Mailing Address/Principal Pla | ce of Business | Cit | ty | Stat | e Zi | p Code(Plus 4) | Descr | ipti | ion of Contribu | tion |
| Enter Grand Total of Part G on Sch | edule II, In-K | ind | Contributions D | etaile | ed | | | | PAGE T | OTAL |
| Summary Page, Section 3. | | | | | | | | | | 0.00 |

SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate | Reporting Pe | eriod | | |
|---------------------------------------|--------------|----------|-----|------------|
| SABATINA SR.,JOHN FRIENDS OF | From | 1/1/2020 | То: | 11/23/2020 |

| | | | | | DATE | | | AMOUNT |
|----------------------------|---------------------------------|-------|-------------------|---------|------|------|----|------------|
| To WI | nom Paid Bank | | | мо | DAY | YEAR | | |
| Mailing Address PO Box 609 | | | | 11 | 23 | 2020 | \$ | 22.00 |
| City | Pittsburg | State | Zip Code (Plus 4) | Descrip | | | | |
| | | PA | 15230 | Bank Fe | es | | | |
| | | | | | | | | PAGE TOTAL |
| Enter | r Grand Total of Expenditures o | \$ | 22.00 | | | | | |