Campaign Finance Report

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

Filer Identificat	ion 2021	C0077			Repo	ort		CANDI	DATE	√	СС	OMMITTEI		LOBI	BYIST		
Number :					Filed	-				`							
Name of Filing	Committee, Candida	ate or L	obbyist:		SABR	INA	KO	RBEL									
Street Address:																	
City:								State:				Zip Cod	e: 15	237			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.		80 DA PRIMA		POST-	3. X		AMENDMENT REPORT?		Yes	No)	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRI	E- 5.		0 DA		POST-	6.	. TERMINATION REPORT?		TION	Yes	No)	
report type)	ANNUAL REPORT	7.	Year 2021					IG METHO CHECK O				PAPER		\checkmark	DISK	TTE	
Name of Office	Sought by Candidat	te:						DATE O	FELE	CTION		District Number	Office Code	Par	ty Code	Count	у
								мо	DAY	YEA	R	5	CPJ	DEN	1		
JUDGE OF THE	COURT OF COMM	ON PLE	AS					11		2 2	2021		(SEE INS	TRUCTI	ONS FOR	CODES)	
Summary of	Summary of Receipts and MO DAY YEAR							мо	DAY	YEA	R	FO		E USE	ONLY		
Expenditure	s from:		5 4	. 2	021	то)	6		7	2021						
A. Amount Bro	ought Forward Fron	n Last R	eport				\$		(1	00,300	.00)	1					
B. Total Monet	B. Total Monetary Contributions And Receipts (From Schedule 1						\$		0.00								
C. Total Funds Available (Sum Of Lines A and B) \$ (100,300.00)																	
D. Total Expenditures (From Schedule III)						\$			13,00	0.00							
E. Ending Cast	n Balance (Subtract	t Line D	From Line	C)			\$		(1	13,300	.00)						
F. Value Of In-	-Kind Contributions	Receiv	ed (From S	chedu	le II)		\$			(0.00	-					
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	/)			\$				0.00						
				AFF	IDAV	/IT	SE	CTION									
PART I - If this i	is a Committee repo	ort, trea	surer sign	here.	If this	is a	Can	ndidate re	eport, o	andida	te sig	gn here.					
I swear (or affirm correct and comp	ı) that this report, incl lete.	uding the	e attached sc	hedule	s filed o	on pa	aper	or by elect	ronic m	edium, a	re to t	the best of	my know	ledge	and bel	ef , tru	e,
Sworn to and sub	scribed before me this dav of	;	20							Sig	nature	e of Person	Submitt	ing Rep	oort		-
												Drint	ed Name				-
My Commission F	Signatu	re															-
My Commission E	.xpires MO	D	AY	YR					Ar	ea Code		Email	e Teleph	one Nu	mber		-
Part II- If this is	a report of a cand					Car	ndida	ate shall					- i ei epin				╡
) that to the best of m								-		provis	ions of the	act of Ju	ine 3,1	937 (P.I	. 1333	
Sworn to and subs	cribed before me this										s	ignature o	f Candida	te			-
	day of		20									-					-
	Cian-t											Printeo	i Name				
My Commission Ex	Signature pires											Emai	l				-
	мо	D	AY	YF	Ł				Area	Code		Da	ytime Te	lephon	e Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** SABRINA KORBEL From: <u>5/4/2021</u> **To:** 6/7/2021 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 0.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 0.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 0.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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 Commit	Name of Filing Committee or Candidate						
			Reporting From:	i cirioù	То		
			From:		•		
				DATE			AMOUNT
Full Name of Contributing) Committee		мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
						Г	PAGE TOTAL
nter Grand Total of Part A on Schedule I, Detailed Summary Page, Sectio						\$	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. (Exclude contributions from political committees reported in Part A)										
Name of Filing Committee or Candidat	e		Rep	orting P	eriod					
	From: To:									
					DATE			AMOUNT		
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City State Zip Code (Plus 4)										
PAGE TOTAL										
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2. \$ 0.00										

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 Cand	lidate		Reporting Period					
			From:					
				DA	TE		А	MOUNT
Full Name of Contributing Commit	ttee			мо	DAY	YEAR		
Mailing Address	Mailing Address						\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C on	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	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	Reporting Period	
	From:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor	ailing					YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupation				
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section				on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

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 C	andidate		Report	ting Perio	bd				
			From: To				:		
			I	D	ATE		AMOUNT		
Full Name				мо	DAY	YEAR			
Mailing Address							\$	i	0.00
City	State	Zip Code (Plus 4)						
Receipt Description	I				1				
Enter Grand Total of Part E o	- Schadula I. Datailac	l Summary Page	Section	4				PAGE TOT	AL
	i Schedule 1, Detailet	summary raye,	Section				\$		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		
SABRINA KORBEL	From:	<u>5/4/2021</u> то:	<u>6/7/2021</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	ſF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, 1		\$	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						\$	0.00	
City	State	Zip Code (Plus 4)	,					
Description of Contribution:								
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detail Section 2.			iled Sum	mary Pag	je,	PAGE	TOTAL	
					4	6	0.00	

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

Name of Filing Committee or Candidate	ame of Filing Committee or Candidate				Reporting Period					
					From: To:					
					DATE AMO					AMOUNT
Full Name of Contributor					мо	DAY	YEAR			
								\$	0.00	
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occupat	tion		-		
Employer Mailing Address/Principal Place of City State Business					Zip 4)	Code(Plus	Descri	ption of	Contribution	

	1			I	
Enter Grand Total of Part G on Schedule II, J	In-Kind Contrib	outions Detail	ed		PAGE TOTAL
Summary Page, Section 3.					0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	1		Reporti	ng Period			
SABRINA KORBEL			From	From <u>5/4/2021</u>			<u>6/7/2021</u>
				DATE			AMOUNT
To Whom Paid TEAM SABRINA				DAY	YEAR		
Mailing Address 1005 W SUTTER RD	5	12	2021	\$	1,000.00		
City PITTSBURGH State Zip Code (Plus 4)				tion of Exp	penditure		
PA 15116				IGN LOAN			
To Whom Paid TEAM SABRINA			мо	DAY	YEAR		
Mailing Address 1005 W SUTTER RD)		5	24	2021	\$	12,000.00
City PITTSBURGH	State	Zip Code (Plus 4)	Descrip	tion of Exp	oenditure		
	CAMPA	IGN LOAN					
							PAGE TOTAL
Enter Grand Total of Expenditures	on Page 1, Report C	over Page, Item I) .			\$	13,000.00