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 :	ion	20200)398			Repor Filed		CA	NDI	DATE		СОМ	MITTEE	✓	LOBI	BYIST		
Name of Filing C	Committee,	Candida	te or Lo	bbyist:		TEAM S	-	INA										
Street Address:	1005 V	V SUTTE	er Road)														
City:	PITTSB	URGH						State: PA					Zip Code: 15116					
TYPE OF REPORT	6TH TUESD			2ND FRIDA PRIMARY	PRIDAY PRE- 2. 3 MARY F				Ρ	POST- 3.		AMENDMENT REPORT?		Yes	No	\checkmark		
(place X to the right of	6TH TUESD PRE-ELECTI							DAY CTION	Ρ	POST-	6.		TERMIN/ REPORT		Yes	✓ No		
report type)	ANNUAL R	EPORT	7. X	Year 2021				ING M) CHE					PAPER		\checkmark	DISKE	TTE	
Name of Office S	L Sought by C	andidate	e:					DA	ΓΕ Ο	F ELEC	CTIO	N	District Number	Office Code	Par	ty Code	County Code	
JUDGE OF THE		COMM						мо		DAY	YE	AR	5	CPJA	D/R		02	
JUDGE OF THE	COURTOF	COMM		AS - ALLLO					11		2	2021]	(SEE INS	TRUCTI	ONS FOR (CODES)	
Summary of		and	мо	DAY	YEAR	1		мо		DAY	YI	EAR	FC	R OFFIC	E USE	ONLY		
Expenditures	s from:		1	1 23	20	021 1	Ю		12	3	81	2021						
A. Amount Bro	ught Forwa	rd From	Last Re	eport				\$			5,3	333.13						
B. Total Monet	ary Contrib	utions A	nd Rece	eipts (From	Sche	dule I)		\$			2,0	00.00						
C. Total Funds	Available (Sum Of	Lines A	and B)			:	\$			7,3	333.13						
D. Total Expen	ditures (Fro	om Sche	dule III	.)			:	\$			7,3	33.13						
E. Ending Cash	Balance (S	ubtract	Line D F	From Line (C)			\$				0.00						
F. Value Of In-	Kind Contri	butions	Receive	ed (From S	chedu	le II)	:	\$				0.00						
G. Unpaid Debt	ts And Oblig	gations ((From S	chedule IV	')			\$				0.00						
					AFF	IDAV	IT S	ECTI	ON									
PART I - If this is	s a Committ	tee repo	rt, treas	surer sign	here. I	If this i	s a Ca	andida	ite re	eport, c	andi	date sig	gn here.					
I swear (or affirm) correct and comple		oort, inclu	iding the	attached sc	hedules	s filed on	pape	r or by	electi	ronic me	edium	, are to t	the best o	f my knov	vledge	and beli	ef , true	
Sworn to and subs	cribed before day of	e me this		20							s	ignature	e of Perso	n Submitt	ing Rep	oort		
		Signature	•				_						Prin	ted Name				
My Commission Ex		orginature	-						•				Ema	il				
	мо	D	DA	Y	YR					Are	a Cod	le	Daytin	e Teleph	one Nu	mber		
Part II- If this is	a report of	f a candi	idate's a	authorized	Comm	nittee, (Candi	date s	hall :	sign he	ere.							
I swear (or affirm) No 320) as amende		best of m	y knowle	dge and beli	ef this	political	com	mittee	has n	ot violat	ed an	y provis	ions of th	e act of Ju	ine 3,1	937 (P.L	. 1333,	
Sworn to and subso	ribed before day of	me this		20								s	ignature (of Candida	ite			
20 Printed Name																		
My Commission Exp		nature					_						Ema	il				
							_											
		мо	DA	Y	YR					Area (Code		D	aytime Te	lephon	e Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** TEAM SABRINA From: <u>11/23/2021</u> To: 12/31/2021 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)** 2,000.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 2,000.00 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 \$ 2,000.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

PAGE 3

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 Candidate			Reportin	g Period			
	From:		То	:			
		·		DATE			AMOUNT
Full Name of Contributing Committee			мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4	•)				
						Γ	PAGE TOTAL

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

0.00

\$

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:						Тс):	
					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 s	Schedule I, Detail	led Summary Pag	je, Se	ection 2	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 Candidate				Reporting Period					
TEAM SABRINA	From:	<u>11/2</u>	<u>3/2021</u>	То:	<u>12</u>	2/31/2021			
				DA	TE		A	MOUNT	
Full Name of Contributing Commi Friends of Adam Ravenstahl	ttee			мо	DAY	YEAR			
Mailing Address 6327 Glenviev	v Place						\$	2,000.00	
City Pittsburgh	State PA	Zip Cod 15206	e (Plus 4)	12	5	2021			
Enter Grand Total of Part C on	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.	-		\$	PAGE TOTAL 2,000.00	

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				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	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 Candidat	e		Report	ing Perio	bd				
						То:	:		
				D	ATE			AMOUN	r
Full Name				мо	DAY	YEAR			
Mailing Address							4	\$	0.00
City	State	Zip Code (Plus 4)						
Receipt Description						1			
Enter Grand Total of Part E on Sche	lule T. Detailed	Summary Page	Section	4				PAGE TO	TAL
	ale 1, Detailed	Summary ruge,	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 Perio	d	
TEAM SABRINA	From:	<u>11/23/2021</u> то:	<u>12/31/2021</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 PART	ΓF)		
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 R			Reporting	g Period			
	From:						
				DATE		АМО	UNT
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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	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				Re	porting P	eriod				
						From: To:				
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor						Occupat	tion	_		
Employer Mailing Address/Principal Place of City Stat Business			State		Zip 4)	Code(Plus	Descri	otion of	Contribution	

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed	PAGE TOTAL
Summary Page, Section 3.	0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate				Reporting Period						
TEAM SABRINA				<u>11/2</u>	То:	<u>12/31/2021</u>					
	DATE AM										
To Whom Paid Sabrina Korbel				DAY	YEAR						
Mailing Address 408 Sangree Rd			12	31	2021	\$	7,333.13				
City Pittsburgh	State PA	Zip Code (Plus 4) 15237	· ·	nent of All							
Enter Grand Total of Exponditures	on Dago 1. Bonort (Sover Page Item [`				PAGE TOTAL				
Enter Grand Total of Expenditures	on Paye 1, Report C	Lover Fage, Item I				\$	7,333.13				