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	20052	260			Report Filed B		CAND	(DATE		СОММ	1ITTEE	✓	LOBE	BYIST	
Name of Filing C	Committee	e, Candida	ate or Lo	obbyist:		COMMI	TTEE	TO RE-EI	LECT JC	DHN S	ABATI	ina jr				
Street Address:	7720	CASTOR	AVENU	E,2ND FL												
City:	PHILA	ADELPHIA	A Contraction					State:	PA			Zip Co	de: 19	152		
TYPE OF REPORT	6TH TUES PRE-PRIM		1.	2ND FRIDA PRIMARY	Y PRE-	- 2.	30 D PRIM		POST-	3.		AMENDM REPORT		Yes	No	\checkmark
(place X to the right of	6TH TUES PRE-ELEC		4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 D ELEC	AY TION	POST-	6.		TERMIN/ REPORT		Yes	 ✓ No 	
report type)	ANNUAL	REPORT	7. X	Year 2021				NG METH CHECK O				PAPER		\checkmark	DISKE	TTE
Name of Office S	L Sought by	Candidat	:e:					DATE C	OF ELEC	СТІОІ	N	District Number	Office Code	Par	ty Code	County Code
								мо	DAY	YE	AR	5	STS	DEN	1	51
SENATOR IN T	HE GENER	RAL ASSE	MBLY					11		2	2021	·	(SEE INS	STRUCTIO	ONS FOR (CODES)
Summary of		and	мо	DAY	YEAR			мо	DAY	YE	AR	FC	OR OFFIC	E USE	ONLY	
Expenditures	s from:		1	1 23	20	021 T	0	12	2 3	31	2021					
A. Amount Bro	ught Forv	vard From	1 Last R	eport			\$			4,6	69.54	1				
B. Total Monet	ary Contri	ibutions A	And Rec	eipts (Fron	1 Sche	dule I)	\$	5			0.00					
C. Total Funds	Available	(Sum Of	Lines A	and B)			\$	5		4,6	69.54					
D. Total Expen	ditures (F	rom Sche	dule II	[)			\$	5		4,6	69.54					
E. Ending Cash	Balance	(Subtract	Line D	From Line	C)		4	5			0.00					
F. Value Of In-	Kind Cont	ributions	Receive	ed (From S	chedu	le II)	\$	5			0.00	-				
G. Unpaid Deb	ts And Ob	ligations	(From S	Schedule IV	()		\$	5			0.00					
					AFF	IDAVI	t se	CTION								
PART I - If this is	s a Comm	ittee repo	ort, trea	surer sign	here. 1	lf this is	a Ca	ndidate r	eport, c	andid	ate sig	yn here.				
I swear (or affirm correct and compl		eport, inclu	uding the	attached sc	hedules	s filed on	paper	or by elect	tronic me	edium,	are to t	the best o	f my knov	vledge	and beli	ef , true
Sworn to and subs	cribed befo day of	ore me this		20						Si	gnature	e of Perso	n Submitt	ing Rep	oort	
		Signatur					_					Prin	ted Name			
My Commission E	xpires	Signatur	e									Ema	il			
	-	мо	D/	AY	YR				Are	ea Code	•	Daytim	ne Teleph	one Nu	mber	
Part II- If this is	a report	of a cand	lidate's	authorized	Comm	nittee, C	andic	late shall	sign he	ere.						
I swear (or affirm) No 320) as amendo		e best of m	ıy knowle	edge and beli	ef this	political	comn	nittee has r	not violat	ted any	, provis	ions of th	e act of Ju	ine 3,19	937 (P.L	. 1333,
Sworn to and subso		e me this		20							s	ignature o	of Candida	ite		
	day of						_					Printe	ed Name			
		Signature					-					Ema				
My Commission Exp	bires											Ema				
	_	мо	DA	AY	YR		_		Area	Code		D	aytime Te	elephon	e Numb	er

SCHEDULE I **CONTRIBUTIONS AND RECEIPTS**

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
COMMITTEE TO RE-ELECT JOHN SABATINA JR	From:	<u>11/23/202</u>	2 <u>1</u> To:	<u>12/31/2021</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g 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	(2)	\$	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)			\$	0.00
TOTAL for the Reporting	g Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00

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	Reporting Period						
			From:		То	:	
		ľ		DATE			AMOUNT
Full Name of Contributing Com	mittee		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			
			Fro	m:		То):	
					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	ed 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					
			From:			То:			
				DA	TE		А	MOUNT	
Full Name of Contributing Committe	ee			мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
							-	PAGE TOTAL	
Enter Grand Total of Part C on S	chedule I, Detail	led 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		АМС	DUNT
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 Pl Business	ace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sch	iedule I, Detai	led Sumr	nary Page, Secti	on 3.			PAG	GE TOTAL
	-						\$	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	Name of Filing Committee or Candidate				bd				
			From:			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	bd	
COMMITTEE TO RE-ELECT JOHN SABATINA JR	From:	<u>11/23/2021</u> To:	<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	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, 3		\$	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		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

0.00

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

Name of Filing Committee or Candidate					Reporting Period					
					Fro	om:		То:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor	I					Occupat	tion	-		
Employer Mailing Address/Principa Business	I Place of	City		State		Zip 4)	Code(Plus	Descri	ption o	f Contribution
				_						PAGE TOTAL

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

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period				
COMMITTEE TO RE-ELECT JOHN SABATINA JR			From <u>11/23/2021</u> To:			<u>12/31/2021</u>	
			DATE				AMOUNT
To Whom Paid ACCOUNTING ADJUSTMENT			мо	DAY	YEAR		
Mailing Address			12	31	2021	\$	4,586.04
City	State	Zip Code (Plus 4)	Description of Expenditure ACCOUNTING ADJUSTMENT				
To Whom Paid NESHAMINY DINER			мо	DAY	YEAR		
Mailing Address 3334 BRISTOL RD			11	26	2021	\$	52.14
City BENSALEM	State PA	Zip Code (Plus 4) 190202120	Description of Expenditure MEETING FOOD & amp; BEVERAGE				
To Whom Paid JOHN SABATINA SR.			мо	DAY	YEAR		
Mailing Address 1742 EMERSON ST			12	31	2021	\$	8.86
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191522302	Description of Expenditure TRAVEL REIMBURSEMENT				
To Whom Paid SAGE PAYMENT SOLUTIONS			мо	DAY	YEAR		
Mailing Address 1101 15TH ST NW STE 500			12	1	2021	\$	22.50
City WASHINGTON	State DC	Zip Code (Plus 4) 200055006		Description of Expenditure CREDIT CARD PROCESSING FEES			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
	J , -p	5-,				\$	4,669.54