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	20063	847			Re _l File	ported B		CAI	NDII	DATE		COMN	1ITTEE	✓ [LOBI	BYIST		
Name of Filing C	ommittee, C	andida	te or Lo	obbyist:		SAB	ATI	NA SF	R.,JOH	IN F	RIEND	S O	F						
Street Address:	7720 CA	ASTOR	AVE																
City:	PHILADE	ELPHIA	ı						State	e:	PA			Zip Cod	le: 19	152-0	000		_
TYPE OF REPORT	6TH TUESDA' PRE-PRIMAR'		1.	2ND FRIDA PRIMARY	AY PRE	:-	2.	30 DA		Р	OST-	3.		AMENDM REPORT?		Yes	1	lo	
(place X to the right of	6TH TUESDA' PRE-ELECTIC		4.	2ND FRIDA	AY PRE	E	5.	30 DA		Р	OST-	6.		TERMINA REPORT?		Yes	١	lo	\
report type)	ANNUAL RE	PORT	7. X	Year 2022					IG ME CHEC		_			PAPER		\checkmark	DISK	ETTE	
Name of Office S	ought by Ca	ndidate	e:	-					DAT	E O	F ELE	CTIC	ON	District Number	Office Code	Par	ty Cod	e Cou	
									МО		DAY	YI	EAR	174	•	DEN	1	51	
										11		8	2022		(SEE INS	TRUCTI	ONS FO	R CODES	5)
Summary of		nd	МО	DAY	YEAR	2			МО		DAY	Y	EAR	FO	R OFFIC	E USE	ONL	1	
Expenditures	trom:			6 7	7 2	022	Т	0		12	Š	31	2022						
A. Amount Bro	ught Forwar	d From	Last R	eport				\$				26,	465.06						
B. Total Moneta	ary Contribu	tions A	nd Rec	eipts (Fror	n Sche	dule	I)	\$				12,	00.00						
C. Total Funds	Available (S	um Of I	Lines A	and B)				\$				38,	465.06						
D. Total Expend	ditures (Fror	m Sche	dule II	I)				\$					4.50						
E. Ending Cash	Balance (Su	ıbtract	Line D	From Line	C)			\$				38,4	160.56						
F. Value Of In-	Kind Contrib	utions	Receive	ed (From S	Schedu	le II	()	\$					0.00						
G. Unpaid Debt	s And Obliga	ations (From S	chedule I	V)			\$					0.00						
					AFF	FID/	١٧٢	T SE	CTIC	N									
PART I - If this is		=	-	_									_						
I swear (or affirm) correct and comple		ort, inclu	iding the	attached so	neaule	s file	a on	paper	or by e	electr	onic me	eaium	i, are to t	ne best o	r my know	/leage	ana be	eller , ti	rue
Sworn to and subs	cribed before of day of	me this		20						•		5	Signature	of Perso	1 Submitt	ing Rep	ort		
	- <u> </u>	Signature	e					-						Prin	ted Name				-
My Commission Ex	xpires							_						Emai	I				
	мо		DA	AY	YR						Are	ea Coo	de	Daytim	e Teleph	one Nu	mber		ᆜ
Part II- If this is	a report of	a candi	idate's	authorized	l Comn	nitte	e, C	andid	ate sł	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende		est of my	y knowle	edge and bel	ief this	polit	tical	comm	ittee h	as no	ot viola	ted ar	ny provisi	ions of the	e act of Ju	ne 3,1	937 (P	.L. 133	3,
Sworn to and subsc	ribed before m day of	ne this		20									Si	ignature o	f Candida	te			_
				- ~				-						Printe	d Name				-
My Commission From	_	nature						-		-				Ema	il				_
My Commission Exp								_											_
		40	D	AY	YR	<u> </u>					Area	Code		Da	ytime Te	lephor	e Nun	ber	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
SABATINA SR.,JOHN FRIENDS OF	From:	6/7/202	<u>2</u> To:	12/31/2022
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) Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	12,000.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting) Period	(3)	\$	12,000.00
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 Pa			\$	12,000.00

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 Committe	ee or Candidate		Re	porting	Period			
			Fr	om:		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 Comm	nittee or Candidate	Re	eporting F	eriod			
		Fr	rom:		To) :	
		,		DATE			AMOUNT
Full Name of Contribut	or		МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
							PAGE TOTAL

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 Per	iod		
SABATINA SR.,JOHN FRIENDS OF	From:	6/7/2022	То:	12/31/2022

DATE AMOUNT

Full Name of Contributing Committee	мо	DAY	YEAR			
PAC1742		DAI	ILAK	\$ 12,000.00		
Mailing Address 1742 Emerson Street				12	2022	,
City Philadelphia	State	Zip Code (Plus 4)	12		2022	
	PA	19152				

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

PAGE TOTAL \$ 12,000.00

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			
			Fron	n:		To):	
				D	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupa	tion			
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			\$	PAGE TOTAL 0.00

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	or Candidate		Report	ing Peri	od			
			From:			To:		
		'			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	'	1					<u> </u>	
	- C		. .:	_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	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>6/7/2022</u> To:	12/31/2022
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 Can	didate		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 or	n Schedule II, In-Ki	nd Contributions Detai	ailed Summary Page,			PAGE TOTAL		-
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 Per	riod		
SABATINA SR., JOHN FRIENDS OF	From	6/7/2022	То:	12/31/2022

			•		DATE			AMOUNT
To Whom Paid				мо	DAY	YEAR		
PNC Bank				МО		ILAK		
Mailing Address 9246 Krewstown Road				12	12	2022	\$	4.50
City	Philadelphia	State	Zip Code (Plus 4)	Description of Expenditure				
		PA	19115	Fee for Checks				
								PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							\$	4.50