

# Campaign Finance Report

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

<b>Filer Identification Number :</b>		20240043		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>		
<b>Name of Filing Committee, Candidate or Lobbyist:</b> Friends of Meriam Sabih												
<b>Street Address:</b>												
<b>City:</b> Center Valley						<b>State:</b> PA			<b>Zip Code:</b> 18034			
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3. X	AMENDMENT REPORT?	Yes	<input checked="" type="checkbox"/>	No		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes		No	<input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2024	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b>	<input checked="" type="checkbox"/>	<b>DISKETTE</b>			
<b>Name of Office Sought by Candidate:</b>						<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
REPRESENTATIVE IN THE GENERAL ASSEMBLY						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	131	STH	DEM	39
						11	5	2024	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
		4	9	2024		5	13	2024				
<b>A. Amount Brought Forward From Last Report</b>						\$ 20,948.29						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 10,792.43						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 31,740.72						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 1,286.62						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 30,454.10						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$ 0.00						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$ 5,000.00						

## AFFIDAVIT SECTION

**PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.**

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.**

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
**Detailed Summary Page**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
Friends of Meriam Sabih	From: <u>4/9/2024</u> To: <u>5/13/2024</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 117.43

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 250.00
<b>All Other Contributions (Part B)</b>	\$ 1,925.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 2,175.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 500.00
<b>All Other Contributions (Part D)</b>	\$ 8,000.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 8,500.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)</b>	\$ 10,792.43
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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	Reporting Period
Friends of Meriam Sabih	From: 4/9/2024 To: 5/13/2024

DATE	AMOUNT
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
Friends of Jason Salus						
Mailing Address						
City	State	Zip Code (Plus 4)	4	29	2024	
Norristown	PA	194014723				

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

PAGE TOTAL
\$ 250.00

## 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)**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
Friends of Meriam Sabih	From: <u>4/9/2024</u> To: <u>5/13/2024</u>

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 250.00
Majid Alsayegh				5	13	2024	
Mailing Address							
City	Douglassville	State	PA	Zip Code (Plus 4)		195189200	
Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
Gary Engleman				4	22	2024	
Mailing Address							
City	Emmaus	State	PA	Zip Code (Plus 4)		180495515	
Full Name of Contributor				MO	DAY	YEAR	\$ 25.00
Gary Engleman				4	25	2024	
Mailing Address							
City	Emmaus	State	PA	Zip Code (Plus 4)		180495515	
Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
Gerald Gibson				4	12	2024	
Mailing Address							
City	Zionsville	State	PA	Zip Code (Plus 4)		180922737	
Full Name of Contributor				MO	DAY	YEAR	\$ 250.00
Megan Hull				4	24	2024	
Mailing Address							
City	Washington	State	DC	Zip Code (Plus 4)		200091499	
Full Name of Contributor				MO	DAY	YEAR	\$ 200.00
Muhammad Shafqat Hussain				5	13	2024	
Mailing Address							
City		State		Zip Code (Plus 4)			
Full Name of Contributor				MO	DAY	YEAR	\$ 250.00
Nagi Latefa				5	13	2024	
Mailing Address							
City	Allentown	State	PA	Zip Code (Plus 4)		181048665	

Full Name of Contributor			MO	DAY	YEAR	\$ 100.00
Scott Messinger						
Mailing Address			5	13	2024	
City	Newtown Square	State PA				Zip Code (Plus 4) 190734041
Full Name of Contributor			MO	DAY	YEAR	\$ 200.00
Aasim Saber						
Mailing Address			5	10	2024	
City		State				Zip Code (Plus 4)
Full Name of Contributor			MO	DAY	YEAR	\$ 100.00
Zaki Sabih						
Mailing Address			5	13	2024	
City	Lebanon	State NJ				Zip Code (Plus 4) 088334537
Full Name of Contributor			MO	DAY	YEAR	\$ 250.00
Peter Schweyer						
Mailing Address			4	26	2024	
City	Allentown	State PA				Zip Code (Plus 4) 181054364
Full Name of Contributor			MO	DAY	YEAR	\$ 100.00
Shakil Syed						
Mailing Address			5	13	2024	
City	Center Valley	State PA				Zip Code (Plus 4) 180348134

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

**PAGE TOTAL**

\$ 1,925.00

## 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.

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
Friends of Meriam Sabih	<b>From:</b> <u>4/9/2024</u> <b>To:</b> <u>5/13/2024</u>

				DATE			AMOUNT		
Full Name of Contributing Committee					MO	DAY	YEAR	\$	500.00
Upper Perk Democrats - Area 2									
Mailing Address					5	13	2024		
City	Green Lane		State	PA				Zip Code (Plus 4)	180540033

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

PAGE TOTAL
\$ 500.00

**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.)**

<b>Name of Filing Committee or Candidate</b>  Friends of Meriam Sabih	<b>Reporting Period</b>  <b>From:</b> <u>4/9/2024</u> <b>To:</b> <u>5/13/2024</u>
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				DATE	AMOUNT	
Full Name of Contributor				MO	DAY	YEAR
Meriam Sabih						
Mailing Address				5	13	2024
City	Center Valley	State	Zip Code (Plus 4)			
	PA		180348134			
Employer Name				Occupation		
Freelance Journalist				Writer		
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)	
			Center Valley	PA	180348134	

  

Full Name of Contributor				MO	DAY	YEAR
Murat Guzel						
Mailing Address				5	13	2024
City	Whitehall	State	Zip Code (Plus 4)			
	PA		180525518			
Employer Name				Occupation		
NFS Inc				President		
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)	
			Whitehall	PA	180525518	

  

Full Name of Contributor				MO	DAY	YEAR
Murat Guzel						
Mailing Address				4	20	2024
City	Whitehall	State	Zip Code (Plus 4)			
	PA		180525518			
Employer Name				Occupation		
NFS Inc				President		
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)	
			Whitehall	PA	180525518	

  

Full Name of Contributor				MO	DAY	YEAR
Umar Farooq						
Mailing Address				4	28	2024
City	Bensalem	State	Zip Code (Plus 4)			
	PA		190204734			
Employer Name				Occupation		
Knights medical associates				Doctor		
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)	
			Bensalem	PA	190204734	

<b>Full Name of Contributor</b> Khurshid Ahmed			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 500.00
<b>Mailing Address</b>			5	13	2024	
<b>City</b> Bronx	<b>State</b> NY	<b>Zip Code (Plus 4)</b> 104694024				
<b>Employer Name</b> Self			<b>Occupation</b> Contractor			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b> Bronx	<b>State</b> NY		<b>Zip Code (Plus 4)</b> 104694024	

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

<b>PAGE TOTAL</b>
<b>\$</b> 8,000.00



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 Candidate	Reporting Period	
	From:	To:

				DATE			AMOUNT	
Full Name					MO	DAY	YEAR	\$ 0.00
Mailing Address								
City		State	Zip Code (Plus 4)					
Receipt Description								

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
Friends of Meriam Sabih		From: <u>4/9/2024</u> To: <u>5/13/2024</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)		\$	0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)		\$	0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period (3)		\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)		\$	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: <span style="float: right;">To:</span>
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						<b>PAGE TOTAL</b>  \$ 0.00

9/1/2025 4:16:35 AM

# SCHEDULE III

## STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
Friends of Meriam Sabih	From <u>4/9/2024</u> To: <u>5/13/2024</u>

DATE				AMOUNT
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
Campaign Verify				
<b>Mailing Address</b>	4	18	2024	\$ 95.00
<b>City</b> Washington	<b>State</b> DC	<b>Zip Code (Plus 4)</b> 200073423	<b>Description of Expenditure</b> Campaign Verify	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
Canva				
<b>Mailing Address</b>	4	29	2024	\$ 31.98
<b>City</b> Austin	<b>State</b> TX	<b>Zip Code (Plus 4)</b> 787013696	<b>Description of Expenditure</b>	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
Cheltenham Printing				
<b>Mailing Address</b>	4	18	2024	\$ 381.60
<b>City</b> Cheltenham	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 190122131	<b>Description of Expenditure</b> Printing	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
Lehigh Print & Data				
<b>Mailing Address</b>	4	23	2024	\$ 311.64
<b>City</b> Macungie	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 180621318	<b>Description of Expenditure</b>	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
LV Print Center				
<b>Mailing Address</b>	4	23	2024	\$ 254.40
<b>City</b> Allentown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 181091685	<b>Description of Expenditure</b> Printing	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
NGP VAN				
<b>Mailing Address</b>	4	11	2024	\$ 106.00
<b>City</b> Washington	<b>State</b> DC	<b>Zip Code (Plus 4)</b> 200055738	<b>Description of Expenditure</b> NGP Software	

<b>To Whom Paid</b> NGP VAN			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 106.00
<b>Mailing Address</b>			5	3	2024	
<b>City</b> Washington	<b>State</b> DC	<b>Zip Code (Plus 4)</b> 200055738	<b>Description of Expenditure</b>			
<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>  \$ 1,286.62

**SCHEDULE IV**  
**STATEMENT OF UNPAID DEBTS**  
Use this Section to itemize all unpaid debts and obligations  
which are outstanding at the end of the reporting period

<b>Name of Filing Committee or Candidate</b>  Friends of Meriam Sabih	<b>Reporting Period</b>  From: <u>4/9/2024</u> To: <u>5/13/2024</u>
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			DATE	Outstanding Balance of Debt		
Name of Creditor			MO	DAY	YEAR	\$ 5,000.00
Meriam Sabih						
Mailing Address			3	4	2024	
City	Center Valley	State	PA	Zip Code (Plus 4)	180348134	Description of Debt
						Loan
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.						PAGE TOTAL
						\$ 5,000.00