Campaign Finance Report

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

									_						
Filer Identificat Number :	ion 20	06347			Report Filed B		CANDI	DATE	СОМІ	MITTEE	\checkmark	LOBI	BYIST		
Name of Filing (Committee, Cano	lidate or L	obbyist:		Friends	of Jo	hn Sabati	na							
Street Address:	7720 CAST	OR AVE													
City:	PHILADELP	HIA					State:	PA		Zip Co	de: 19	152			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	AY PRE		30 D/ PRIM		POST- 3	ŀ.	AMENDI REPORT		Yes	No	\checkmark	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRID	2ND FRIDAY PRE- 5. 3 ELECTION				POST- 6		TERMIN REPORT		Yes	No	\checkmark	
report type)	ANNUAL REPO	RT 7. X	Year 2007	7			NG METHO			PAPER		\checkmark	DISKE	TTE	
Name of Office S	L Sought by Candi	date:					DATE O	F ELEC	TION	District Number		Par	ty Code	County Code	
							мо	DAY	YEAR		CPJ	DEN	1	51	
JUDGE OF THE	COURT OF CO	MMON PLE	EAS				11	6	5 2007	1	(SEE INS	STRUCTI	ONS FOR C	ODES)	
Summary of	Receipts and	мо	DAY	YEAR	2		мо	DAY	YEAR	F	OR OFFIC	E USE	ONLY		
Expenditures	s from:		1	1 2	007 T	0	12	31	2007						
A. Amount Bro	ught Forward F	rom Last F	Report	•	1	\$	4	:	26,255.11						
B. Total Monet	ary Contribution	ns And Ree	ceipts (Fro	m Sche	dule I)	\$		500.00							
C. Total Funds Available (Sum Of Lines A and B)						\$:	26,755.11						
D. Total Expen	ditures (From S	chedule I	II)			\$			0.00						
E. Ending Cash	Balance (Subtr	act Line D	From Line	C)		\$		2	26,755.11]					
F. Value Of In-	Kind Contribution	ons Receiv	ved (From S	Schedu	le II)	\$			0.00	-					
G. Unpaid Deb	ts And Obligatio	ns (From	Schedule I	V)		\$			0.00						
				AFF	IDAVI	r se	CTION								
PART I - If this i	s a Committee r	eport, trea	asurer sign	here.	If this is	a Ca	ndidate re	eport, ca	ndidate sig	gn here.					
I swear (or affirm correct and compl		including th	e attached s	chedule	s filed on _l	paper	or by elect	ronic med	lium, are to	the best o	of my knov	vledge	and belie	ef , true	
Sworn to and subs	scribed before me day of	this	20						Signatur	e of Perso	on Submitt	ing Rep	oort		
										Prir	nted Name				
My Commission E	-	ature								Ema					
		D	ΑΥ	YR		-		Area	Code		ne Teleph	one Nu	mber		
Part II- If this is	a report of a c	andidate's	authorized	d Comn	nittee, Ca	andid	ate shall	sign her	e.						
I swear (or affirm) No 320) as amend		of my know	edge and be	lief this	political	comm	ittee has n	ot violate	d any provis	ions of th	e act of Ju	ine 3,1	937 (P.L	. 1333,	
Sworn to and subso		nis							s	ignature	of Candida	ite			
	day of 					-				Print	ed Name				
	Signatu	re				-									
My Commission Exp	pires									Ema	ail				
	мо	C	YAY	YR	1			Area Co	ode	D	aytime To	elephon	e Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** Friends of John Sabatina From: <u>1/1/2007</u> **To:** <u>12/31/2007</u> 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)** 500.00 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 500.00 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 \$ 500.00 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 Committee or Candidate				Reporting Period						
				From: To:			:			
· · ·					DATE	AMOUNT				
Full Name of Contributing Committee				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4	4)							
								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 Candidate Reporting Period										
			Fro	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										

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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						
Friends of John Sabatina From				<u>1/1/2007</u> To:			<u>12</u>	<u>12/31/2007</u>	
					DATE			MOUNT	
Full Name of Contributing Committee Steamfitters' Local Union 420					DAY	YEAR	\$	500.00	
Mailing Address 14400 Townsend Rd				12	31	2007			
City Philadelphia	State	Zip Cod	e (Plus 4)						
	PA	19152							
								PAGE TOTAL	
Enter Grand Total of Part C on Scheo	n 3.			\$	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.)

Name of Filing Committee or Candidate				Reporting Period					
From:				m: To:			•		
				D	IOUNT				
Full Name of Contributor				мо	DAY	YEAR	\$	0.00	
Mailing Address									
City	State	Zip Code (Pl	ıs 4)						
Employer Name				Occupation					
Employer Mailing Address/Principal Place of Business City				•	State		Zip Code	e (Plus 4)	
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Sectio							P#	AGE TOTAL 0.00	

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	Name of Filing Committee or Candidate			Reporting Period						
			From:			То:				
				D	ATE			AMOUNT		
Full Name				мо	DAY	YEAR	\$		0.00	
Mailing Address										
City	State	Zip Code (Plus 4)							
Receipt Description	·	•					•			
		_						PAGE TO	TAL	
Enter Grand Total of Part E on Schedule I, Detailed Summary Page, 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											
Friends of John Sabatina	From:	<u>1/1/2007</u> To:	<u>12/31/2007</u>									
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR											
TOTAL for the Reporting Pe	\$	0.00										
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	TF)											
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	Name of Filing Committee or Candidate			Period	·							
				From:			То:					
				DATE			AMOUNT					
Full Name of Contributor				DAY	YEAR							
Mailing Address		_				7 \$		0.00				
City	State	Zip Code (Plus 4)										
Description of Contribution:			1									
Enter Grand Total of Part F on Sched Section 2.	iled Sum	mary Pag	je,		PAGE TOTA	AL.						
						\$		0.00				

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

Name of Filing Committee or Candidate			Rep	porting F	Period	Reporting Period					
				From:		То:					
					DATE		AMOUNT				
Full Name of Contributor				мо	DAY	YEAR					
Mailing Address							\$ 0.00				
City	State	Zip Code(Plus 4)									
Employer of Contributor		•		Occupa	tion		•				
Employer Mailing Address/Principal Plac	lity	State	e Zip	Code(Plus 4)	Descri	ption of Contribution					
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-Kind	Contributions D	etaile	d			PAGE TOTAL 0.00				

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period						
				From			То:		
		DATE		AMOUNT					
To Whom Paid	мо	DAY	YEAR						
Mailing Address						\$	0.00		
City	City State Zip Code (Plus 4) Description of Expenditure								
Enter Grand Total of Exponditures	`				PAGE TOTAL				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	0.00		