### **Campaign Finance Report**

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

| Filer Identification 2005260 Report Filed By: CANDIDATE COMMITTEE LOBBYI |                             |                       |                         |                                     |         |      |         |            | BYIST     |         |            |                    |                |          |           |          |          |
|--|-----------------------------|-----------------------|-------------------------|-------------------------------------|---------|------|---------|------------|-----------|---------|------------|--------------------|----------------|----------|-----------|----------|----------|
| Name of Filing C   | Committee, Can              | didate or L           | obbyist:                |                                     | Com.    | To   | Elec    | t John S   | abatina   | Jr.     |            |                    |                |          |           |          |          |
| Street Address:  | 7720 CAS                    | OR AVE, 2             | ND FL                   |                                     |         |      |         |            |           |         |            |                    |                |          |           |          |          |
| City:  | PHILADELF                   | PHIA                  |                         |                                     |         |      |         | State:     | PA        |         |            | Zip Co             | de: 19         | 152      |           |          |          |
| TYPE OF<br>REPORT  | 6TH TUESDAY<br>PRE-PRIMARY  | 1.                    | 2ND FRIDAY I<br>PRIMARY | ID FRIDAY PRE- 2. 30<br>IMARY PR    |         |      |         |            | POST-     | 3.      |            | AMENDN<br>REPORT   |                | Yes      | No        | •        | <b>/</b> |
| (place X to<br>the right of  | 6TH TUESDAY<br>PRE-ELECTION | 4.                    | 2ND FRIDAY<br>ELECTION  | ND FRIDAY PRE- 5. 30<br>LECTION ELI |         |      |         |            | POST-     | 6.      |            | TERMINA<br>REPORT  |                | Yes      | No        | •        | <b>/</b> |
| report type)   | ANNUAL REPO                 | <b>RT</b> 7. <b>X</b> | <b>Year</b> 2010        | Year 2010 FILING                    |         |      |         |            |           |         |            | PAPER DISKETTE     |                |          |           |          |          |
| Name of Office S   | -<br>Sought by Cand         | idate:                |                         |                                     | -       |      |         | DATE (     | OF ELE    | CTIC    | N          | District<br>Number | Office<br>Code | Par      | ty Code   | Count    | ty       |
|  |                             |                       |                         |                                     |         |      |         | МО         | DAY       | Y       | EAR        |                    | STH            | DEN      | 1         | 51       |          |
| REPRESENTATI   | VE IN THE GEI               | NERAL ASS             | SEMBLY                  |                                     |         |      |         | 1:         | ı         | 2       | 2010       | <b>-</b>           | (SEE IN        | STRUCTI  | ONS FOR C | ODES)    |          |
| Summary of   |                             | МО                    | DAY YI                  | EAR                                 |         |      |         | МО         | DAY       | Y       | EAR        | FC                 | R OFFI         | CE USE   | ONLY      |          |          |
| Expenditures   | from:                       |                       | 1 1                     | 20                                  | 010     | T    | 0       | 13         | 2         | 31      | 2010       |                    |                |          |           |          |          |
| A. Amount Bro  | ught Forward F              | rom Last R            | eport                   |                                     |         |      | \$      | -          |           | 50,     | 744.74     |                    |                |          |           |          |          |
| B. Total Monet   | ary Contributio             | ns And Rec            | eipts (From S           | ched                                | dule I  | [)   | \$      |            |           |         | 620.00     |                    |                |          |           |          |          |
| C. Total Funds Available (Sum Of Lines A and B)                          |                             |                       |                         |                                     |         |      | \$      |            |           | 51,     | 364.74     |                    |                |          |           |          |          |
| D. Total Expend  | ditures (From S             | Schedule II           | I)                      |                                     |         |      | \$      |            |           | 13,     | 322.06     |                    |                |          |           |          |          |
| E. Ending Cash   | Balance (Subt               | ract Line D           | From Line C)            |                                     |         |      | \$      |            |           | 38,0    | 042.68     | ]                  |                |          |           |          |          |
| F. Value Of In-  | Kind Contributi             | ons Receiv            | ed (From Sche           | edul                                | e II)   |      | \$      |            |           |         | 0.00       |                    |                |          |           |          |          |
| G. Unpaid Debt   | s And Obligation            | ons (From S           | Schedule IV)            |                                     |         |      | \$      |            |           |         | 0.00       |                    |                | 1        |           |          |          |
|  |                             |                       | A                       | \FF                                 | IDA۱    | VI   | ΓSE     | CTION      |           |         |            |                    |                |          |           |          |          |
| PART I - If this is  | s a Committee               | report, trea          | surer sign hei          | re. I                               | f this  | is   | a Can   | ndidate ı  | eport,    | candi   | date sig   | jn here.           |                |          |           |          |          |
| I swear (or affirm) correct and comple                                   |                             | including the         | e attached sched        | lules                               | filed   | on   | paper ( | or by elec | tronic m  | ediun   | , are to t | the best o         | f my kno       | wledge   | and belie | ef , tru | ie,      |
| Sworn to and subs  | cribed before me<br>day of  | this                  | 20                      |                                     |         |      |         |            |           | ;       | Signature  | of Perso           | n Submit       | ting Rep | ort       |          | _        |
|  | Sign                        | ature                 | _                       |                                     |         |      | -       |            |           |         |            | Prin               | ted Name       | •        |           |          | _        |
| My Commission Ex   | cpires                      |                       |                         |                                     |         |      | _       |            |           |         |            | Ema                | il             |          |           |          |          |
|  | МО                          | D                     | AY                      | YR                                  |         |      |         |            | Ar        | ea Co   | de         | Daytin             | ie Teleph      | one Nu   | mber      |          |          |
| Part II- If this is  | a report of a c             | andidate's            | authorized Co           | mm                                  | ittee   | , Ca | andida  | ate shal   | l sign h  | ere.    |            |                    |                |          |           |          |          |
| I swear (or affirm)<br>No 320) as amende                                 |                             | of my knowl           | edge and belief         | this                                | politic | cal  | commi   | ittee has  | not viola | ited ai | ny provis  | ions of th         | e act of J     | une 3,1  | 937 (P.L  | . 1333   | ,        |
| Sworn to and subso   |                             | his                   |                         |                                     |         |      |         |            |           |         | s          | ignature (         | of Candid      | ate      |           |          | -        |
|  | day of<br>                  |                       |                         |                                     |         |      | -       |            |           |         |            | Printe             | ed Name        |          |           |          | -        |
|  | Signatu                     | ıre                   |                         |                                     |         |      | -       |            |           |         |            |                    |                |          |           |          | _        |
| My Commission Exp  | ires                        |                       |                         |                                     |         |      |         |            |           |         |            | Ema                | il             |          |           |          |          |
|  | мо                          | D                     | AY                      | YR                                  |         |      | •       |            | Area      | Code    |            | D                  | aytime T       | elephon  | e Numb    | er       | -        |

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

| Name of Filing Committee or Candidate  | Reporting | g Period       |               |            |
|--|-----------|----------------|---------------|------------|
| Com. To Elect John Sabatina Jr.  | From:     | <u>1/1/201</u> | <u>.0</u> To: | 12/31/2010 |
| 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)   | \$        | 120.00         |               |            |
| TOTAL for the Reporting  | J Period  | (2)            | \$            | 120.00     |
| 3. Contributions Received Over \$250.00 (From Part C and Part D)   |           |                |               |            |
| Contributions Received From Political Committees (Part C)  |           |                | \$            | 500.00     |
| All Other Contributions (Part D)   |           |                | \$            | 0.00       |
| TOTAL for the Reporting  | J Period  | (3)            | \$            | 500.00     |
| 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 |           |                | \$            | 620.00     |

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

| Name of Filing Committee or Candidate |             |                   | Reporting Period |      |      |    |        |  |  |
|---------------------------------------|-------------|-------------------|------------------|------|------|----|--------|--|--|
|                                       |             |                   | From:            |      | То   | :  |        |  |  |
|                                       |             | L                 |                  | DATE |      |    | AMOUNT |  |  |
| Full Name of Contributin              | g Committee |                   | МС               | DAY  | YEAR |    |        |  |  |
| Mailing Address                       |             |                   |                  |      |      | \$ | 0.00   |  |  |
| City                                  | State       | Zip Code (Plus 4) |                  |      |      |    |        |  |  |

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

| PAGE TOTAL |
|------------|
| \$<br>0.00 |

### 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** 

Com. To Elect John Sabatina Jr.

From:

DATE

<u>1/1/2010</u> **To:** 

12/31/2010

**AMOUNT** 

| Full Name of Contributor Jennifer Soares | МО    | DAY               | YEAR |    |      |                  |
|--|-------|-------------------|------|----|------|------------------|
| Mailing Address 1540 S. Clarion St       |       |                   |      |    |      | <b>\$</b> 120.00 |
| <b>City</b> Phila                        | State | Zip Code (Plus 4) | 12   | 31 | 2010 |                  |
|  | PA    | 19147             |      |    |      |                  |

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

**PAGE TOTAL \$** 120.00

#### **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 Per |          |     |            |
|---------------------------------------|---------------|----------|-----|------------|
| Com. To Elect John Sabatina Jr.       | From:         | 1/1/2010 | То: | 12/31/2010 |

DATE AMOUNT

| Full Name of Contributing Committee PECOPAC | МО                 | DAY                               | YEAR |    |      |           |
|---|--------------------|-----------------------------------|------|----|------|-----------|
| Mailing Address 2301 Market St, S15-1       |                    |                                   |      |    |      | \$ 500.00 |
| City Phila                                  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19103 | 12   | 31 | 2010 |           |

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

**PAGE TOTAL** 500.00

## 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       |                 |           |              |              | Reporting Period |       |      |          |            |  |  |  |
|---|-----------------|-----------|--------------|--------------|------------------|-------|------|----------|------------|--|--|--|
|   |                 |           |              | Froi         | n:               |       | То   | :        |            |  |  |  |
|   |                 |           |              |              | D                | ATE   |      | AN       | MOUNT      |  |  |  |
| Full Name of Contributor                    |                 |           |              |              | МО               | DAY   | YEAR |          |            |  |  |  |
| Mailing<br>Address                          |                 |           |              |              |                  |       |      | \$       | 0.00       |  |  |  |
| City  | State           | Zi        | p Code (Plus | i <b>4</b> ) |                  |       |      |          |            |  |  |  |
| Employer Name                               | •               | •         |              |              | Occupa           | tion  | •    | •        |            |  |  |  |
| Employer Mailing Address/Principal Business | Place of        |           | City         |              |                  | State |      | Zip Code | e (Plus 4) |  |  |  |
| Enter Grand Total of Part C on So           | chedule I, Deta | iled Sumr | mary Page,   | Section      | on 3.            |       |      | P        | AGE 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 Car | ndidate              |                | Reporting Period |    |     |      |    |           |
|---------------------------------|----------------------|----------------|------------------|----|-----|------|----|-----------|
|                                 |                      |                | From:            |    |     | To:  |    |           |
|                                 |                      |                |                  | D  | ATE |      | А  | MOUNT     |
| Full Name                       |                      |                |                  | мо | DAY | YEAR |    |           |
| Mailing Address                 |                      |                |                  |    |     |      | \$ | 0.00      |
| City                            | State                | Zip Code (     | Plus 4)          |    |     |      |    |           |
| Receipt Description             | ·                    | ·              |                  |    |     |      |    |           |
| Enter Grand Total of Part E on  | Schedule T. Detailed | d Summary Page | Section          | 4  |     |      | P  | AGE TOTAL |
|                                 | 2, <b>200</b> 0000   |                | 22300            |    |     |      | \$ | 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 |                            |            |
|--|------------------|----------------------------|------------|
| Com. To Elect John Sabatina Jr.  | From:            | <u>1/1/2010</u> <b>To:</b> | 12/31/2010 |
| 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, 1 |                  | \$                         | 0.00       |

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

| Name of Filing Committee or Candid | Name of Filing Committee or Candidate |                       |          |               | Reporting Period |           |            |  |  |  |  |
|------------------------------------|---------------------------------------|-----------------------|----------|---------------|------------------|-----------|------------|--|--|--|--|
|                                    |                                       |                       | From:    |               |                  | То:       |            |  |  |  |  |
|                                    |                                       |                       |          | DATE          |                  |           | AMOUNT     |  |  |  |  |
| Full Name of Contributor           |                                       |                       | МО       | DAY           | YEAR             |           |            |  |  |  |  |
| Mailing Address                    |                                       |                       |          |               |                  | <b>\$</b> | 0.00       |  |  |  |  |
| City                               | State                                 | Zip Code (Plus 4)     |          |               |                  |           |            |  |  |  |  |
| Description of Contribution:       |                                       |                       |          |               |                  |           |            |  |  |  |  |
| Enter Grand Total of Part F on S   | chedule II In-Kir                     | nd Contributions Deta | iled Sum | mary Pag      | ле Г             |           | PAGE TOTAL |  |  |  |  |
| Section 2.                         | incudic 11, 111 Kii                   | ia contributions beta | nea Sam  | illial y I as | ,                |           | PAGE TOTAL |  |  |  |  |
|                                    |                                       |                       |          |               |                  | \$        | 0.00       |  |  |  |  |

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

| Name of Filing Committee or Candidate                          |             |         |            |         |            | porting l | Period    |       |        |                        |
|--|-------------|---------|------------|---------|------------|-----------|-----------|-------|--------|------------------------|
|  |             |         |            |         | Fro        | om:       |           | To:   |        |                        |
|  |             |         |            |         | •          |           | DATE      |       |        | AMOUNT                 |
| Full Name of Contributor                                       |             |         |            |         |            | МО        | DAY       | YEAR  |        |                        |
| Mailing Address  |             |         |            |         |            |           |           |       | \$     | 0.00                   |
| City   | State       |         | Zip Code(I | Plus 4) |            |           |           |       |        |                        |
| Employer of Contributor  |             |         |            |         | Occupation |           |           |       |        |                        |
| Employer Mailing Address/Principal Plac<br>Business            | ce of       | City    |            | State   |            | Zip<br>4) | Code(Plus | Descr | iption | of Contribution        |
| Enter Grand Total of Part G on Sch<br>Summary Page, Section 3. | edule II, I | in-Kind | Contributi | ons De  | etaile     | ed        |           |       |        | <b>PAGE TOTAL</b> 0.00 |

## STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate        |                         |                    |                                | Reporting Period   |             |               |          |            |  |
|--|-------------------------|--------------------|--------------------------------|--|-------------|---------------|----------|------------|--|
| Com. To Elect John Sabatina Jr.              |                         |                    |                                | From   | 1/2         | <u>1/2010</u> | То:      | 12/31/2010 |  |
|  |                         |                    |                                |  | DATE        |               |          | AMOUNT     |  |
| <b>To Whom Paid</b> Friends of John Sabatina |                         |                    |                                | мо   | DAY         | YEAR          |          |            |  |
| Mailing Address 7720 Castor Ave 2nd Fl       |                         |                    |                                | 12   | 31          | 2010          | \$       | 10,300.00  |  |
| <b>City</b> Phila                            | State Zip Code (Plus 4) |                    |                                | Descrip  | tion of Exp | enditure      | 1        |            |  |
|  |                         | PA                 | 19152                          | Donation   |             |               |          |            |  |
| To Whom Paid John Sabatina Jr                |                         |                    |                                | МО   | DAY         | YEAR          |          |            |  |
| Mailing Address 2217 Fuller St               |                         |                    | 12                             | 31   | 2010        | \$            | 319.41   |            |  |
| <b>City</b> Phila                            |                         | State              | Zip Code (Plus 4)              | Descrip  | tion of Exp | enditure      |          |            |  |
|  |                         | PA                 | 19152                          | Reimbursement office xmas dinner                                 |             |               |          |            |  |
| To Whom Paid John Sabatina Jr                |                         |                    | мо                             | DAY  | YEAR        |               |          |            |  |
| Mailing Address 2217 Fuller St               |                         |                    | 12                             | 31   | 2010        | \$            | 1,519.01 |            |  |
| <b>City</b> Phila                            |                         | State              | Zip Code (Plus 4)              | Description of Expenditure                                       |             |               |          |            |  |
| PA 19152                                     |                         |                    |                                | Reimbursement lodging, parking, transportation & office supplies |             |               |          |            |  |
| <b>To Whom Paid</b><br>Verizon Wireless      |                         |                    |                                | мо   | DAY         | YEAR          |          |            |  |
| Mailing Address PO Box 4003                  |                         |                    |                                | 12   | 20          | 2010          | \$       | 149.32     |  |
| <b>City</b> Acworth                          |                         | <b>State</b><br>GA | <b>Zip Code (Plus 4)</b> 30101 | Description of Expenditure  Cell Phone expense                   |             |               |          |            |  |
| <b>To Whom Paid</b><br>Friends of Alan Bu    | tkovics                 |                    |                                | МО   | DAY         | YEAR          |          |            |  |
| Mailing Address                              | 7730 Richard st         |                    |                                | 12   | 20          | 2010          | \$       | 100.00     |  |

Zip Code (Plus 4)

19152

**Description of Expenditure** 

Donation

State

PA

City

Phila

|   |  |                    |                                   |   |  |      | FAGL   | 12     |  |
|---|--|--------------------|-----------------------------------|---|--|------|--------|--------|--|
| To Whom Paid Phila Portuguese Club                |  |                    |                                   | мо  | DAY  | YEAR |        |        |  |
| Mailing Address 2019 Rhawn St                     |  |                    |                                   | 12  | 4  | 2010 | \$     | 135.00 |  |
| <b>City</b> Phila                                 |  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19152 | Description of Expenditure  Donation          |  |      |        |        |  |
| To Whom Paid 7th PDAC                             |  |                    |                                   | МО  | DAY  | YEAR |        |        |  |
| Mailing Address 9845 Bustleton Ave                |  |                    |                                   | 12  | 7  | 2010 | \$     | 100.00 |  |
| <b>City</b> Phila                                 |  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b> 19115    | <b>Descrip</b><br>Donatio                     | scription of Expenditure<br>nation                                     |      |        |        |  |
| To Whom Paid Pegasus Riding Academy               |  |                    |                                   | МО  | DAY  | YEAR |        |        |  |
| Mailing Address 8297 Bustleton Ave                |  |                    | 12                                | 17  | 2010   | \$   | 150.00 |        |  |
| <b>City</b> Phila                                 |  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19152 | <b>Description of Expenditure</b> Advertising |  |      |        |        |  |
| To Whom Paid Bustleton Memorial Post              |  |                    |                                   | МО  | DAY  | YEAR |        |        |  |
| Mailing Address 9151 Old Newtown Rd               |  |                    |                                   | 12  | 16   | 2010 | \$     | 300.00 |  |
| <b>City</b> Phila                                 |  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19115 |   | Description of Expenditure Fundraiser deposit Friends of John sabatina |      |        |        |  |
| To Whom Paid 25th Ward Democratic Executive Cttee |  |                    |                                   | МО  | DAY  | YEAR |        |        |  |
| Mailing Address 2637 E. Clearfield St             |  |                    |                                   | 12  | 4  | 2010 | \$     | 50.00  |  |
| <b>City</b> Phila                                 |  | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19134 | Description of Expenditure  Donation          |  |      |        |        |  |
| <b>To Whom Paid</b> 298 Inc                       |  |                    |                                   | мо  | DAY  | YEAR |        |        |  |
| Mailing Address 115 E. Glenside Ave Ste 11        |  |                    |                                   | 12  | 3  | 2010 | \$     | 50.00  |  |
| _   |  |                    |                                   |   |  |      |        |        |  |

| To Whom Paid Verizon Wireless   |                    |                                | мо | DAY             | YEAR                              |              |
|---|--------------------|--------------------------------|----|-----------------|-----------------------------------|--------------|
| Mailing Address PO Box 4003   |                    |                                | 12 | 5               | 2010                              | \$<br>149.32 |
| <b>City</b> Acworth   | <b>State</b><br>GA | <b>Zip Code (Plus 4)</b> 30101 |    | otion of Expone |                                   |              |
| Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. |                    |                                |    |                 | \$<br><b>PAGE TOTAL</b> 13,322.06 |              |
|   |                    |                                |    |                 |                                   |              |
|   |                    |                                |    |                 |                                   |              |