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 20	18C1000			Repor Filed		CANDI	DATE	\checkmark	co	OMMITTE	E	LOBI	BYIST		
Name of Filing C	Committee, Cano	didate or L	obbyist:		VALER	IE GA	/DOS									
Street Address:																
City:							State:				Zip Code: 15143					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	AY PRE	- 2.	30 D/ PRIM		POST-	3.		AMENDM REPORT?		Yes	No	· 🗸	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA	AY PRE	E- 5.	30 D/ ELEC		POST-	6.		TERMINA REPORT?		Yes	No	· 🗸	
report type)	ANNUAL REPO	RT 7. X	Year 2018	3			NG METHO CHECK O				PAPER		\checkmark	DISKE	TTE	
Name of Office Sought by Candidate:							DATE O	F ELE	CTION		District Number	Office Code	Par	ty Code	County Code	
REPRESENTATI	REPRESENTATIVE IN THE GENERAL ASSEMBLY								YEA	R	44	STH	REP	•		
							11		6	2018]	(SEE INS	TRUCTI	ONS FOR	CODES)	
	Receipts and	мо	DAY	YEAR	Ł		мо	DAY	YEA	R	FO	R OFFIC	E USE	ONLY		
Expenditures	s from:		11 27	7 2	018 1	Ю	12	:	31	2018						
A. Amount Bro	ught Forward F	rom Last R	Report			\$		(23,115	5.92)						
B. Total Monet	ary Contributior	ns And Rec	eipts (Fror	n Sche	dule I)	\$	5	0.00								
C. Total Funds	Available (Sum	Of Lines A	and B)			\$;	(23,115	5.92)						
D. Total Expen	ditures (From S	chedule II	II)			\$;		3,11	5.92						
E. Ending Cash	Balance (Subtr	act Line D	From Line	C)		\$;	(20,000	.00)						
F. Value Of In-	Kind Contribution	ons Receiv	ed (From S	Schedu	le II)	\$;			0.00	-					
G. Unpaid Deb	ts And Obligatio	ns (From S	Schedule I	V)		\$;			0.00						
				AFF	IDAV	IT SE	CTION									
PART I - If this is																
I swear (or affirm correct and compl		including th	e attached so	chedule	s filed on	paper	or by elect	ronic m	edium, a	are to	the best of	my knov	vledge	and beli	ef , true	
Sworn to and subs	cribed before met day of	this	20						Sig	natur	e of Person	Submitt	ing Rep	oort		
	Signa	ature				_					Print	ed Name				
My Commission E	xpires										Emai	I				
	мо	D	AY	YR				Are	ea Code		Daytime	e Teleph	one Nu	mber		
Part II- If this is	a report of a ca	andidate's	authorized	d Comn	nittee, O	Candid	late shall	sign he	ere.							
I swear (or affirm) No 320) as amendo		of my knowl	edge and bel	lief this	political	comm	nittee has n	iot viola	ted any	provis	ions of the	act of Ju	ine 3,1	937 (P.I	1333,	
Sworn to and subso	ribed before me th day of	nis	20							s	ignature o	f Candida	ite			
											Printe	d Name				
My Commission From	Signatu	re									Emai	1				
My Commission Exp						_										
	мо	D	ΑΥ	YR				Area	Code		Da	ytime Te	elephor	e Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Dementin	- Davia d		
	Reporting	g Period		
VALERIE GAYDOS	From:	<u>11/27/20</u>	<u>18</u> То:	<u>12/31/2018</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	J 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	\$	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	J Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	J 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			\$	0.00

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 Committee or Candidate				Reporting Period						
				From: To:				:		
		·			DATE			AMOUNT		
Full Name of Contributing Committee			м	10	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		

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 Candida	te		Rep	orting P	eriod			
			Fror	m:		Тс):	
					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, 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					
				То:				
				DA	TE		A	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR	\$	0.00
Mailing Address							7 *	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Sched	lule I, Detailed Sun	nmary 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				
		Fror	n:		Т):		
			D	ATE		AM	OUNT	
			мо	DAY	YEAR	\$	0.00	
State	Zip Code (Plu	s 4)						
•			Occupat	ion				
ce of Business	City			State		Zip Code	(Plus 4)	
dule I, Detailed Su	ummary Page	Sectio	on 3.				GE TOTAL 0.00	
	State ce of Business	State Zip Code (Plus ce of Business City	State Zip Code (Plus 4) ce of Business City	From: DA DA State Zip Code (Plus 4) Occupat	From: DATE DATE DATE State Zip Code (Plus 4) City Occupation Ce of Business City State	From: To DATE MO DAY YEAR State Zip Code (Plus 4) Image: Comparison of the second	From: To: DATE AM MO DAY YEAR \$ State Zip Code (Plus 4) Occupation ce of Business City State Zip Code	

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:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$	0.0	00
Mailing Address									
City	State	Zip Code (Plus 4)						
Receipt Description	·								
		_	.					PAGE TOTAL	
Enter Grand Total of Part E on Schedu	lie 1, Detailed Sumn	nary 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 Perio	d	
VALERIE GAYDOS	From:	<u>11/27/2018</u> To:	<u>12/31/2018</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	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			Reporting Period					
F			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:			1					
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	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	Name of Filing Committee or Candidate				Reporting Period				
						То:			
					DATE		AMOUNT		
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address			-				\$ 0.00		
City	State	Zip Code(Plus 4)							
Employer of Contributor				Occupa	ation				
Employer Mailing Address/Principal Plac	e of Business	City	State	e Zip	Code(Plus 4)	Descri	ption of Contribution		
Enter Grand Total of Part G on Scho Summary Page, Section 3.	edule II, In-Kind	d Contributions D	etaile	d			PAGE TOTAL 0.00		

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Cand	Reporting Period						
VALERIE GAYDOS	From	om <u>11/27/2018</u> To: <u>12/</u>					
				DATE			AMOUNT
To Whom Paid			мо	DAY	YEAR		
VALERIE GAYDOS							
Mailing Address 411 TRAILSID	E DR		12	17	2018	\$	0.00
City SEWICKLEY	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	15143	LOAN R	EPAYMENT	-		
							PAGE TOTAL
Enter Grand Total of Expenditu	ires on Page 1, Re	port Cover Page, Item I).			\$	0.00