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 2018	0183			Report Filed B		CANDI	DATE		СОМ	MITTEE	✓	LOBI	BYIST		
Name of Filing C	Committee, Candida	ate or Lo	obbyist:			-	TO ELECT	SHAR	ON G	GUIDI F	PA HOUS	SE 40				
Street Address:	221 OLD OAK	RD														
City:	MCMURRAY						State:	PA			Zip Code: 15317					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2.	30 DA PRIMA		POST-	3.		AMENDMENT REPORT?		Yes	No	\checkmark	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 DA ELECT		POST-	6.		TERMIN REPORT		Yes	No	\checkmark	
report type)	ANNUAL REPORT	7. X	Year 2018				NG METHO				PAPER		\checkmark	DISKE	TTE	
Name of Office S	Sought by Candidat	:e:					DATE O	F ELEC	CTIO	N	District Number	Office Code	Par	ty Code	County Code	
								DAY	YE	AR			DEN	1		
									6	2018		(SEE INS	STRUCTI	ONS FOR (ODES)	
	Receipts and	мо	DAY	YEAR			мо	DAY	YE	AR	FC	OR OFFIC	E USE	ONLY		
Expenditures	s from:	1	1 27	20	018 T	0	12	3	31	2018						
A. Amount Bro	ught Forward Fron	n Last Ro	eport			\$			23,9	27.58						
B. Total Monet	ary Contributions A	And Reco	eipts (Fron	1 Sched	dule I)	\$	\$ 0.00									
C. Total Funds	\$			23,9	27.58											
D. Total Expen	ditures (From Sche	edule II	[)			\$			19,5	71.85						
E. Ending Cash	Balance (Subtract	Line D	From Line	C)		\$			4,3	55.73						
F. Value Of In-	Kind Contributions	Receive	ed (From S	chedul	e II)	\$				0.00	4					
G. Unpaid Deb	ts And Obligations	(From S	chedule IV	')		\$	\$ 0.00									
				AFF	IDAVI	T SE	CTION									
	s a Committee repo	•	-					• •			-					
I swear (or affirm correct and complete) that this report, incl ete.	uding the	attached sc	hedules	filed on	paper	or by elect	ronic me	edium,	, are to t	the best o	f my knov	vledge	and beli	ef , true	
Sworn to and subs	cribed before me this day of		20						s	ignature	e of Perso	n Submitt	ing Rep	oort		
	Signatur	e				_					Prin	ted Name				
My Commission E	xpires					_					Ema	il				
	мо	DA	AY	YR				Are	a Cod	e	Daytin	ne Teleph	one Nu	mber		
Part II- If this is	a report of a cand	lidate's	authorized	Comm	ittee, C	andid	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of med.	ıy knowle	edge and beli	ef this	political	comm	ittee has n	ot violat	ed an	y provis	ions of th	e act of Ju	ine 3,1	937 (P.L	. 1333,	
Sworn to and subso	ribed before me this day of		20							s	ignature	of Candida	ite			
						-					Printe	ed Name				
My Commission Exp	Signature					-					Ema	il				
, =/						_										
	мо	DA	AY .	YR				Area (Code		D	aytime Te	elephon	e Numb	er	

SCHEDULE I **CONTRIBUTIONS AND RECEIPTS**

Detailed Summary Page

-	-			
Name of Filing Committee or Candidate	Reporting	g Period		
COMMITTEE TO ELECT SHARON GUIDI PA HOUSE 40	<u>11/27/20</u> 2	<u>18</u> To:	<u>12/31/2018</u>	
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Repor	ting 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 Repor	(2)	\$	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 Repor	ting Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part	: E)			
TOTAL for the Repor	ting Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover			\$	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:	:		То	:				
		·			DATE			AMOUNT			
Full Name of Contributing Committee			м	10	DAY	YEAR					
Mailing Address							\$	0.00			
City	State	Zip Code (Plus 4	4)								
							Γ	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 Candidat	e			orting P	eriod				
			Fro	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 S	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 Can	didate		Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Comm	ittee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C or	n Schedule I, Detaile	ed Summary 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	
	From:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

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 C	Name of Filing Committee or Candidate			Reporting Period						
			From:			То:				
			I	D	ATE			AMOUNT		
Full Name				мо	DAY	YEAR				
Mailing Address							\$	i	0.00	
City	State	Zip Code (Plus 4)							
Receipt Description	I				1					
Enter Grand Total of Part E o	- Schodulo I. Dotailoc	l Summary Page	Section	4				PAGE TOT	AL	
	i Schedule 1, Detailet	summary raye,	Section				\$		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	od	
COMMITTEE TO ELECT SHARON GUIDI PA HOUSE 40	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	2	
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 Candidate	Name of Filing Committee or Candidate				Reporting Period					
			From:			То:				
				DATE		АМО	UNT			
Full Name of Contributor			мо	DAY	YEAR					
Mailing Address						\$	0.00			
City	State	Zip Code (Plus 4)	,							
Description of Contribution:										
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL			
					4	6	0.00			

0.00

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

Name of Filing Committee or Candidate					Reporting Period					
					Fro	m:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(P	Plus 4)						
Employer of Contributor			•			Occupat	tion			
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip 4)	Code(Plus	Descri	otion o	f Contribution
Enter Grand Total of Part G on Sch	edule II, 1	In-Kind	Contributio	ons De	taile	d				PAGE TOTAL

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate		Reporting Period						
COMMITTEE TO ELECT SHARON GUIDI PA HOUSE 40		From	<u>11/2</u>	7/2018	То:	<u>12/31/2018</u>		
			DATE				AMOUNT	
To Whom Paid NOAH ERWIN			мо	DAY	YEAR			
Mailing Address 405 FRANKLIN AVE #2			12	20	2018	\$	500.00	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15221	Description of Expenditure CAMPAIGN MANAGER SALARY					
To Whom Paid SARA BLUMENSTEIN			мо	DAY	YEAR			
Mailing Address 620 SOUTH LANG AVE			12	20	2018	\$	200.00	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15208	Description of Expenditure FIELD DIRECTORY SALARY					
To Whom Paid SHARON GUIDI			мо	DAY	YEAR			
Mailing Address 221 OLD OAK RD			12	19	2018	\$	49.00	
City MCMURRAY	State PA	Zip Code (Plus 4) 15317	Description of Expenditure REIMBURSEMENT FOR WOMEN OF THE FUTURE PITTSBURGH CELE					
To Whom Paid SHARON GUIDI			мо	DAY	YEAR			
Mailing Address 221 OLD OAK RD			12	19	2018	\$	50.00	
City MCMURRAY	State PA	Zip Code (Plus 4) 15317	Description of Expenditure REIMBURSEMENT FOR MAYOR PEDUTO ANNUAL HOLIDAY PARTY EV					
To Whom Paid VERIZON		мо	DAY	YEAR				
Mailing Address PO BOX 408			12	18	2018	\$	22.08	
City NEWARK	State NJ	Zip Code (Plus 4) 07101	Description of Expenditure HOT SPOT, WIRELESS					

							12
To Whom Paid VANTIV ECOMMERCE FUNDS DISB			мо	DAY	YEAR		
Mailing Address 366 SUMMER STREET			12	18	2018	\$	4.01
City SOMERVILLE	State MA	Zip Code (Plus 4) 02143	Description of Expenditure SERVICE FEES FOR ACTBLUE ACCOUNT				
To Whom Paid MEGAN GUIDI			мо	DAY	YEAR		
Mailing Address 278 WERNEBERG WAY			12	10	2018	\$	8,746.76
City PITTSBURGH	State PA	Zip Code (Plus 4) 15201	Description of Expenditure REIMBURSEMENT FOR FACEBOOK ADS				
To Whom Paid SHARON GUIDI			мо	DAY	YEAR		
Mailing Address 221 OLD OAK RD			11	30	2018	\$	10,000.00
City MCMURRAY	State PA	Zip Code (Plus 4) 15317	Description of Expenditure REIMBURSEMENT FOR CAMPAIGN LOAN				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.					PAGE TOTAL		
Enter Grand Total of Expend	litures on Page 1, Re	port Cover Page, Item D	·			\$	19,571.85