Campaign Finance Report

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

Filer Identification 20180183 Number :							Repo			CA	NDII	DATE		СОМ	4ITTEE	√	LOE	BBY	IST		
Name of Filing C	ommittee	, Candida	te or Lo	obbyis	it:		GUID	οΙ, 9	SHAR	ON T	HE (COMM	ITTE	E TO EL	ECT PA	HOUSE	40				
Street Address:	221 C	DLD OAK	RD																		
City:	MCML	JRRAY					_			State	e:	PA	_		Zip Co	de: 1	5317-	271 -	10	_	
TYPE OF REPORT	6TH TUES		1.	2ND F PRIMA	RIDAY ARY	PRE-	2.		30 DA		Р				AMENDM REPORT	Yes		No			
(place X to the right of	6TH TUES		4.	2ND F	FRIDAY FION	/ PRE	- 5.		30 DA		Р				TERMINATION REPORT?		Yes		No		/
report type)	ANNUAL	REPORT	7.	Year	2020					IG ME					PAPER		\	D	ISKET	TE	
Name of Office S	ought by	Candidat	e:							DAT	E O	F ELE	CTI	ON	District Number	Office Code	Pa	irty	Code	Count	ty
DEDDECENITATI	\	E CENED	AL ACC	-MDI	.,					МО		DAY	Y	EAR	40	STH	DE	M	()2	
REPRESENTATI	VE IN THI	E GENERA	AL ASS	EMBL	Y						11		3	2020		(SEE II	NSTRUCT	ION	S FOR CO	DDES)	
Summary of		and	МО	DA	Y	YEAR				МО		DAY	Y	EAR	FC	R OFFI	CE US	ΕO	NLY		
Expenditures	from:		1	10	20	20	020	T	0		11	:	23	2020							
A. Amount Bro	ught Forw	ard From	Last R	eport					\$				30,	319.67							
B. Total Moneta	ary Contri	butions A	nd Rec	eipts ((From	Sche	dule 1	I)	\$					544.01							
C. Total Funds	Available	(Sum Of	Lines A	and B	3)				\$				30,	863.68							
D. Total Expend	ditures (F	rom Sche	dule II	I)					\$				11,	530.01							
E. Ending Cash Balance (Subtract Line D From Line C)								\$				19,	333.67								
F. Value Of In-	Kind Cont	ributions	Receive	ed (Fr	om Sc	hedul	e II)		\$				1,	000.00							
G. Unpaid Debt	s And Obl	igations ((From S	chedu	ıle IV)			\$					0.00							_
						AFF	IDA'	VI٦	ΓSE	CTI	NC										
PART I - If this is		-	•									•		_							
I swear (or affirm) correct and comple		eport, inclu	iding the	attach	ned sch	edules	filed	on p	oaper	or by e	electr	onic m	ediun	n, are to t	he best o	f my kno	wledge	e an	d belief	f , tru	.e
Sworn to and subs	cribed befo day of	re me this		20										Signature	of Perso	n Submi	tting Re	epor	t		-
		Signatur	e	_					-						Prin	ted Nam	e				-
My Commission Ex	pires										•				Ema	il					-
	<u> </u>	чо	D/	ΑY		YR						Are	ea Co	de	Daytim	ie Telep	hone N	umb	oer		
Part II- If this is	a report	of a cand	idate's	autho	rized	Comm	ittee	, Ca	andid	ate sl	nall s	sign he	ere.								
I swear (or affirm) No 320) as amende		best of m	y knowle	edge an	nd belie	ef this	politio	cal	comm	ittee h	as no	ot viola	ted a	ny provis	ions of th	e act of :	June 3,	193	7 (P.L.	1333	,
Sworn to and subsc		e me this												s	ignature o	of Candid	late				-
	day of ——			20 -					•						Printe	ed Name					-
	S	ignature							-												_
My Commission Exp	ires										Email										
		мо	D	AY		YR						Area	Code		D	aytime 1	Γelepho	ne l	Numbe	r	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
GUIDI, SHARON THE COMMITTEE TO ELECT PA HOUSE 40	From:	10/20/202	<u>:0</u> To:	11/23/2020
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reportin	g Period	(1)	\$	294.01
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	250.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reportin	g Period	(2)	\$	250.00
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 Reportin	g Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reportin	g Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add a totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page 1, Report Cover Page 2, Report Cover Page 3, Report Cover P			\$	544.01

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

GUIDI, SHARON THE COMMITTEE TO ELECT PA HOUSE 40

From: 10/20/2020

To: 11/23/2020

DATE AMOUNT

Full Name of Contributing Committee pa federation of democratic women	МО	DAY	YEAR			
Mailing Address 148 rock hill rd						\$ 250.00
City centre hall	State PA	Zip Code (Plus 4) 16826	10	20	2020	

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

PAGE TOTAL \$ 250.00

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 Candida	te			oorting P	eriod			
			Fro	m:		To):	
					DATE		AMOUNT	
Full Name of Contributor				МО	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 \$ 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	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00

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.)

lame of Filing Committee or Candidate			Rep	orting Pe	riod			
			Fron	n:		To):	
				D	ATE		АМС	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupa	tion			
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			PA(GE 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 C	Candidate		Report	ting Perio	od			
			From:			To:		
				D	ATE		AMOUNT	
Full Name				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description								
Enter Grand Total of Part E o	on Schedule I. Detailed	d Summary Page.	Section	4.			PAGE TOTA	ıL
		· • • • • • • • • • • • • • • • • • • •					\$ C	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	
GUIDI, SHARON THE COMMITTEE TO ELECT PA HOUSE 40	From:	<u>10/20/2020</u> To:	11/23/2020
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)	\$	1,000.00
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,		\$	1,000.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	ame of Filing Committee or Candidate						
			From:			To:	
				DATE			AMOUNT
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 Sche	dule II. In-Kind (Contributions Deta	iled Sum	marv Pac	ıe.		PAGE TOTAL
Section 2.	,			,		\$	0.00

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

Name of Filing Committee or Candidate	Reporting Period
GUIDI, SHARON THE COMMITTEE TO ELECT PA HOUSE 40	From: <u>10/20/2020</u> To: <u>11/23/2020</u>

						DATE		AMOUNT
Full Name of Contributor PA DEMOCRATIC PARTY					мо	DAY	YEAR	
Mailing Address 229 STATE ST								\$ 1,000.00
City HARRISBURG	State		Zip Code(Plus 4)	10	22	2020	
	PA		17101					
Employer of Contributor pa democr	atic party				Occupa	tion	oolitics	
Employer Mailing Address/Principal Plac Business	ce of	City		State	Zip 4)	Code(Plus	Descri	ption of Contribution
229 state st		harrisb	urg	PA	171	.01	campa	ign ad
Enter Grand Total of Part G on Sch	edule II I	n-Kind (Contributi	ons Detai	led			PAGE TOTAL
Summary Page, Section 3.	icadic II, I	Killa		ons Detai				1,000.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting			
GUIDI, SHARON THE COMMITTEE TO ELECT PA HOUSE 40	From	10/20/2020	То:	11/23/2020

				DATE	AMOUNT	AMOUNT	
To Whom Paid PCC Print and Copy Center			МО	DAY	YEAR		
Mailing Address 731 Allegheny River Blvd			10	21	2020	\$	1,598.58
City Pittsburgh	State PA	Zip Code (Plus 4) 15147	Description of Expenditure printing yard signs				
To Whom Paid Facebook			МО	DAY	YEAR		
Mailing Address 1 hacker way			10	20	2020	\$	900.00
City menlo park	State CA	Zip Code (Plus 4) 94025	Description of Expenditure campaign adds				
To Whom Paid Minuteman Press			МО	DAY	YEAR		
Mailing Address 1003 Waterdam plaza dr			11	3	2020	\$	463.08
City canonsburg	State PA	Zip Code (Plus 4) 15317	Description of Expenditure yard signs				
To Whom Paid Act Blue			МО	DAY	YEAR		
Mailing Address po box 441146			11	4	2020	\$	18.86
City sommerville	State MA	Zip Code (Plus 4) 94025	Description of Expenditure transaction fee				
To Whom Paid megin guidi			МО	DAY	YEAR		
Mailing Address 278 werneberg way			11	9	2020	\$	1,800.00
City pittsburgh	State PA	Zip Code (Plus 4) 15201	Description of Expenditure reimburse for facebook adds				
		I					

To Whom Paid vantiv			мо	DAY	YEAR				
Mailing Address 8500 goveror hill rd			11	10	2020	\$	50.69		
City cincinnati	State OH	Zip Code (Plus 4) 45249	Description of Expenditure transaction fee						
To Whom Paid megin guidi			МО	DAY	YEAR				
Mailing Address 278 wernet	perg way		11	23	2020	\$	698.80		
City pittsburgh	State	Zip Code (Plus 4)	Description of Expenditure						
,	PA	15201	reimburse for facebook ads						
To Whom Paid alex franco			МО	DAY	YEAR				
Mailing Address 85 nancy dr			11	23	2020	\$	6,000.00		
City mcmurray	State	Zip Code (Plus 4)	Description of Expenditure						
,	PA	15317	subcontractor						
			•				PAGE TOTAL		
Enter Grand Total of Expend	ditures on Page 1, Re	eport Cover Page, Item D	•			\$	11,530.01		