

Campaign Finance Report

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

Filer Identification Number :		20180071		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: GAYDOS FOR PA												
Street Address: 411 TRAILSIDE DR.												
City: SEWICKLEY						State: PA			Zip Code: 15143			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY PRIMARY	POST-	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	ANNUAL REPORT	7. X	Year 2020	FILING METHOD () CHECK ONE				PAPER <input checked="" type="checkbox"/>	DISKETTE			
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code
						MO	DAY	YEAR	REP			
						11	3	2020	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		11	24	2020		12	31	2020				
A. Amount Brought Forward From Last Report						\$ 15,115.11						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 0.00						
C. Total Funds Available (Sum Of Lines A and B)						\$ 15,115.11						
D. Total Expenditures (From Schedule III)						\$ 2,630.82						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 12,484.29						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 5,000.00						

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
GAYDOS FOR PA	From: <u>11/24/2020</u> To: <u>12/31/2020</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting 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 Period (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 Reporting Period (3)	\$ 0.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 0.00

Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 0.00
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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				MO	DAY	YEAR	\$ 0.00
Mailing Address							
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: To:

DATE				AMOUNT
Full Name of Contributing Committee				
Mailing Address				
City	State	Zip Code (Plus 4)		

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

PAGE TOTAL
\$ 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: To:

			DATE	AMOUNT
Full Name of Contributor			MO	DAY
Mailing Address			YEAR	\$ 0.00
City	State	Zip Code (Plus 4)		
Employer Name			Occupation	
Employer Mailing Address/Principal Place of Business	City	State	Zip Code (Plus 4)	

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

PAGE 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	Reporting Period From: To:
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			DATE			AMOUNT
Full Name			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Receipt Description						

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL
\$ 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	
GAYDOS FOR PA		From: <u>11/24/2020</u> To: <u>12/31/2020</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period		(1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period		(2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period		(3)	\$ 0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)			\$ 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 From: To:
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						PAGE TOTAL \$ 0.00

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

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
GAYDOS FOR PA	From <u>11/24/2020</u> To: <u>12/31/2020</u>

				DATE	AMOUNT		
To Whom Paid				MO	DAY	YEAR	\$ 15.89
ADOBE				12	28	2020	
Mailing Address 345 PARK AVENUE							
City	SAN JOSE	State	CA	Zip Code (Plus 4)	95110	Description of Expenditure SOFTWARE	
To Whom Paid				MO	DAY	YEAR	\$ 335.70
STAPLES				12	28	2020	
Mailing Address 1675 PA-228							
City	CRANBERRY TWP	State	PA	Zip Code (Plus 4)	16066	Description of Expenditure SUPPLIES	
To Whom Paid				MO	DAY	YEAR	\$ 158.99
BESTBUY				12	28	2020	
Mailing Address 1000 CRANBERRY SQUARE DR							
City	CRANBERRY TWP	State	PA	Zip Code (Plus 4)	16066	Description of Expenditure SOFTWARE	
To Whom Paid				MO	DAY	YEAR	\$ 12.84
WIX.COM				12	18	2020	
Mailing Address 500 TERRY A FRANCOIS BOULEVARD SIXTH FLOOR							
City	SAN FRANCISCO	State	CA	Zip Code (Plus 4)	94158	Description of Expenditure WEBSITE	
To Whom Paid				MO	DAY	YEAR	\$ 84.00
PA GOP				12	14	2020	
Mailing Address 112 STATE ST							
City	HARRISBURG	State	PA	Zip Code (Plus 4)	17101	Description of Expenditure CONTRIBUTION	
To Whom Paid				MO	DAY	YEAR	\$ 100.00
BROCK MEANOR				12	9	2020	
Mailing Address 2260 CAMPMEETING RD.							
City	SEWICKLEY	State	PA	Zip Code (Plus 4)	15143	Description of Expenditure QV BASKETBALL SPONSORSHIP	

To Whom Paid			MO	DAY	YEAR	\$ 55.00
USPS						
Mailing Address 521 THORN ST.			12	9	2020	
City SEWICKLEY	State PA	Zip Code (Plus 4) 15143	Description of Expenditure STAMPS			

To Whom Paid			MO	DAY	YEAR	\$ 61.31
USPS						
Mailing Address 521 THORN ST.			12	8	2020	
City SEWICKLEY	State PA	Zip Code (Plus 4) 15143	Description of Expenditure POSTAGE			

To Whom Paid			MO	DAY	YEAR	\$ 325.00
HAIR SYMMETRY						
Mailing Address 2578 BRANDT SCHOOL RD			12	7	2020	
City WEXFORD	State PA	Zip Code (Plus 4) 15090	Description of Expenditure VOLUNTEER THANK YOU			

To Whom Paid			MO	DAY	YEAR	\$ 743.16
1360 LLC						
Mailing Address 29374 NETWORK PLACE			12	7	2020	
City CHICAGO	State IL	Zip Code (Plus 4) 60673	Description of Expenditure DATA			

To Whom Paid			MO	DAY	YEAR	\$ 197.95
MAILCHIMP						
Mailing Address 675 PONCE DE LEON AVE NE SUITE 5000			12	7	2020	
City ATLANTA	State GA	Zip Code (Plus 4) 30308	Description of Expenditure EMAILS			

To Whom Paid			MO	DAY	YEAR	\$ 103.00
PNC BANK						
Mailing Address 401 BEAVER ST			12	1	2020	
City SEWICKLEY	State PA	Zip Code (Plus 4) 15143	Description of Expenditure SERVICE CHARGE			

To Whom Paid			MO	DAY	YEAR	\$ 105.79
VERIZON						
Mailing Address 539 BEAVER ST			12	1	2020	
City SEWICKLEY	State PA	Zip Code (Plus 4) 15143	Description of Expenditure CAMPAIGN PHONE			

To Whom Paid			MO	DAY	YEAR	\$ 15.89
ADOBE						
Mailing Address 345 PARK AVENUE			11	30	2020	
City SAN JOSE	State CA	Zip Code (Plus 4) 95110	Description of Expenditure SOFTWARE			

To Whom Paid CAPITOL PRESERVATION COMMITTEE			MO	DAY	YEAR	\$ 296.85
Mailing Address 462 MAIN CAPITOL BLDG			12	1	2020	
City HARRISBURG	State PA	Zip Code (Plus 4) 17120	Description of Expenditure CONTRIBUTION			

To Whom Paid BLACK RIFLE COFFEE			MO	DAY	YEAR	\$ 19.45
Mailing Address 1144 500 W			12	8	2020	
City SALT LAKE CITY	State UT	Zip Code (Plus 4) 84101	Description of Expenditure FOOD			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 2,630.82

SCHEDULE IV

STATEMENT OF UNPAID DEBTS

**Use this Section to itemize all unpaid debts and obligations
which are outstanding at the end of the reporting period**

Name of Filing Committee or Candidate GAYDOS FOR PA	Reporting Period From: <u>11/24/2020</u> To: <u>12/31/2020</u>
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				DATE			Outstanding Balance of Debt
Name of Creditor				MO	DAY	YEAR	\$ 5,000.00
VALERIE GAYDOS							
Mailing Address				3	8	2016	\$ 5,000.00
411 TRAILSIDE DR.							
City	State	Zip Code (Plus 4)	Description of Debt				
SEWICKLEY	PA	15143	PERSONAL LOAN				

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.	PAGE TOTAL \$ 5,000.00
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