# **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		СОМІ	MITTEE	✓	LOB	BYIST	
Name of Filing C	Committee, Candida	ate or Lo	obbyist:			-	ON THE	СОММІ	TTEE	TO EL	ECT PA	HOUSE	40		
Street Address:	221 OLD OAK	RD													
City:	MCMURRAY						State:	PA			Zip Co	<b>de:</b> 15	317-2	710	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2.	30 DA PRIM		POST-	3.		AMENDN REPORT		Yes	No	· 🗸
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5. <b>X</b>	30 DA ELEC		POST-	6.		TERMIN REPORT		Yes	No	° 🗸
report type)	ANNUAL REPORT	7.	<b>Year</b> 2022				NG METHO		PAPER V DIS					DISKE	TTE
Name of Office S	Sought by Candidat	te:					DATE O	F ELEO	CTIC	N	District Number	Office Code	Par	ty Code	County Code
							мо	DAY	Y	AR					
							11		8	2022	]	(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR			мо	DAY	Y	EAR	FC	OR OFFIC	E USE	ONLY	
Expenditures	s from:		9 20	20	022 <b>T</b>	0	10	2	24	2022					
A. Amount Bro	ught Forward Fron	n Last R	eport			\$			18,0	051.77					
B. Total Monet	ary Contributions A	And Rec	eipts (Fron	n Sche	dule I)	\$	\$ 0.00								
C. Total Funds	Available (Sum Of	Lines A	and B)			\$			18,0	)51.77					
D. Total Expen	ditures (From Sche	edule II	I)			\$			2,0	00.00					
E. Ending Cash	Balance (Subtract	t Line D	From Line	C)		\$			16,0	)51.77					
F. Value Of In-	Kind Contributions	Receive	ed (From S	chedul	le II)	\$				0.00					
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 compl	) that this report, incl ete.	uding the	attached sc	hedules	s filed on	paper	or by elect	ronic me	edium	, are to	the best o	f my knov	vledge	and beli	ef , true
Sworn to and subs	cribed before me this day of	;	20						S	Signaturo	e of Perso	n Submitt	ing Rep	oort	
	Signatu	re				_					Prin	ted Name			
My Commission E	xpires					_					Ema	il			
	мо	DA	AY	YR				Are	ea Coo	le	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a cand	lidate's	authorized	Comm	nittee, 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	ief this	political	comm	ittee has n	ot violat	ted an	ıy provis	ions of th	e act of Ju	ine 3,1	937 (P.I	1333,
Sworn to and subso	ribed before me this day of		20							s	ignature	of Candida	ite		
						-					Printe	ed Name			
My Commission F	Signature					-					Ema	il			
My Commission Exp	nres					_									
	мо	DA	AY.	YR				Area	Code		D	aytime Te	elephor	e Numb	er

#### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Detailed Summary Pag	e			
Name of Filing Committee or Candidate	Reporting	g Period		
GUIDI, SHARON THE COMMITTEE TO ELECT PA HOUSE 40	From:	<u>9/20/202</u>	<u>2</u> To:	<u>10/24/2022</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			-	
TOTAL for the Reportin	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)			\$	0.00
TOTAL for the Reportin	g 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 Reportin	g Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E	)			
TOTAL for the Reportin	ıg 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 P			\$	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 Candida	Name of Filing Committee or Candidate			porting	Period			
Fro			om:		:			
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City State Zip Code (Plus 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		Rep	orting P	eriod				
From: To:									
					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, Detailed Summary Page, Section 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 Cand	lidate		Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Commit	ttee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C on	Schedule I, Detail	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 I	Period	
	From:		То:
		DATE	AMOUNT

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City State Zip 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 Candidate			Report	ing Perio	od				
			From:	rom: To:					
				D	ATE			AMOUNT	Г
Full Name				мо	DAY	YEAR			
Mailing Address							\$	5	0.00
City	State	Zip Code (	Plus 4)						
Receipt Description	·						•		
Enter Grand Total of Part F on Sched	ule I. Detailed Sum	mary Page	Section	4				PAGE TO	TAL
	inter Grand Total of Part E on Schedule I, Detailed Summary Page, 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	d	
GUIDI, SHARON THE COMMITTEE TO ELECT PA HOUSE 40	From:	<u>9/20/2022</u> <b>To:</b>	<u>10/24/2022</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
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, 3		\$	0.00

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

# VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporting	g Period			
			From:			То:	
				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 Schedule II, In-Kind Contributions Detail Section 2.			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					Rep	oorting P	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					Occupation					
Employer Mailing Address/Principal Place of City State Business				State		Zip Code(Plus 4) Description			otion o	of Contribution
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Det				taile	d				PAGE TOTAL	

Summary Page, Section 3.

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Cano	lidate		Reporti	ng Period						
GUIDI, SHARON THE COMMITTE	E TO ELECT PA HOUS	SE 40	From	<u>9/2</u>	0/2022	То:	<u>10/24/2022</u>			
				DATE			AMOUNT			
To Whom Paid Act Blue			мо	DAY	YEAR					
Mailing Address po box 44114	6		9	9 28 2022 <b>\$</b> 500.00						
City sommerville	State	Zip Code (Plus 4)	Description of Expenditure							
	MA	02144	fetterm	fetterman						
To Whom Paid Act Blue			мо	DAY	YEAR					
Mailing Address po box 44114	6		10	14	2022	\$	250.00			
City State Zip Code (Plus 4)			Description of Expenditure							
MA 02144			chris to	bdd						
<b>To Whom Paid</b> Act Blue			мо	DAY	YEAR					
Mailing Address po box 44114	6		10	14	2022	\$	250.00			
City sommerville	State	Zip Code (Plus 4)	Descrip	ption of Exp	penditure	•				
	MA	02144	chris deluzzio							
<b>To Whom Paid</b> Act Blue			мо	DAY	YEAR					
Mailing Address po box 44114	6		10	14	2022	\$	500.00			
<b>City</b> sommerville	State	Zip Code (Plus 4)	Descrip	ption of Exp	penditure	•				
	MA	02144	shapiro	)						
<b>To Whom Paid</b> Act Blue			мо	DAY	YEAR					
Mailing Address po box 44114	6		10	15	2022	\$	500.00			
<b>City</b> sommerville	State	Zip Code (Plus 4)	Descrip	ption of Exp	penditure	•				
	MA	02144	fetterm	nan						
							PAGE TOTAL			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D						\$	2,000.00			