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	✓	LOB	BYIST	
Name of Filing C	Committee, Candid	ate or L	obbyist:			-	ON THE	СОММІ	TTEE	TO EL	ECT PA	HOUSE	40		
Street Address:	221 OLD OAK	RD													
City:	MCMURRAY						State:	PA			Zip Co	de: 15	317-2	710	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	30 DA PRIM		POST- 3.			AMENDMENT REPORT?		Yes	No	\checkmark		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA	30 DA ELEC		POST- 6.			TERMIN REPORT		Yes	No	\checkmark		
report type)	ANNUAL REPORT	7. X	. X Year 2023 FILING ME								PAPER		\checkmark	DISKE	TTE
Name of Office Sought by Candidate:							DATE O	F ELEO	СТІО	N	District Number	Office Code	Par	ty Code	County Code
							мо	DAY	YE	AR					
							11		7	2023		(SEE INS	STRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR			мо	DAY	YI	EAR	FC	OR OFFIC	E USE	ONLY	
Expenditures	s from:		1 1	1 20)23 T	0	12	3	31	2023					
A. Amount Bro	ught Forward From	n Last R	eport			\$			16,0)51.77					
B. Total Monet	ary Contributions	And Rec	eipts (Fror	n Scheo	dule I)	\$				0.00					
C. Total Funds Available (Sum Of Lines A and B) \$ 16,051.77															
D. Total Expen	ditures (From Scho	edule II	I)			\$			1,2	200.00					
E. Ending Cash	Balance (Subtract	t Line D	From Line	C)		\$			14,8	51.77					
F. Value Of In-	Kind Contributions	Receiv	ed (From S	Schedul	e II)	\$				0.00	-				
G. Unpaid Deb	ts And Obligations	(From S	Schedule I	V)		\$				0.00					
				AFF	IDAVI	T SE	CTION								
PART I - If this is	s a Committee rep	ort, trea	surer sign	here. I	f this is	a Car	ndidate re	eport, c	andi	date sig	gn here.				
I swear (or affirm correct and compl) that this report, incl ete.	uding the	e attached so	chedules	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	scribed before me this day of	5	20						S	ignature	e of Perso	n Submitt	ing Rep	oort	
	Signatu	re				-					Prir	ted Name			
My Commission E	xpires					_					Ema	il			
	МО	D	AY	YR				Are	ea Cod	le	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a cand	lidate's	authorized	d Comm	ittee, C	andid	ate shall	sign he	ere.						
I swear (or affirm) No 320) as amendo) that to the best of n ed.	ıy knowl	edge and bel	lief 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	cribed before me this									s	ignature	of Candida	ite		
	day of					-					Printe	ed Name			
	Signature					-									
My Commission Exp											Ema	il			
	мо	D	AY	YR		-		Area	Code		D	aytime Te	elephor	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Detailed Summary Pa	ye			
Name of Filing Committee or Candidate	Reporting	g Period		
GUIDI, SHARON THE COMMITTEE TO ELECT PA HOUSE 40	<u>1/1/20</u>	<u>23</u> To:	<u>12/31/2023</u>	
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporti	ng 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 Reporti	ng 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 Reporti	ng Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part I	=)			
TOTAL for the Reporti	ng 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					
F						То	:			
					DATE			AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4	4)							
							ſ	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 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 Candidate			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		AMO	UNT
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
Employer Name			Occupa	tion		•	
Employer Mailing Address/ Business	Principal Place of	City	•	State		Zip Code (Plus 4)
Enter Grand Total of Par	t C on Schedule I, Detail	ed Summary Page, Sect	ion 3.			PAG	E 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	Name of Filing Committee or Candidate			ting Perio	od				
				From: To:					
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$	i	0.00
City	State	Zip Code (Plus 4)						
Receipt Description					1	1			
Enter Grand Total of Part E	on Schodulo I. Dotailog		Section	4				PAGE TOT	AL
Linter Granu Total of Part E		i Suillilai y 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 Period									
GUIDI, SHARON THE COMMITTEE TO ELECT PA HOUSE 40	From:	<u>1/1/2023</u> To:	<u>12/31/2023</u>							
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS 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, 2		\$	0.00							

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate R				Reporting Period					
	From:			То:					
				DATE		АМС	DUNT		
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	5	0.00		

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

Name of Filing Committee or Candidate					Rej	Reporting Period				
					Fro	rom: To:				
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor						Occupat	tion	_		
Employer Mailing Address/Principal Place of City State Business					Zip 4)	Code(Plus	Descri	otion of	f Contribution	

		I		
Enter Grand Total of Part G on Schedule II, In	-Kind Contribut	ions Detailed		PAGE TOTAL
Summary Page, Section 3.				0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate				Reporting Period				
GUIDI, SHARON THE COMMITTEE TO ELECT PA HOUSE 40			From	<u>1/:</u>	<u>1/2023</u>	То:	<u>12/31/2023</u>	
				DATE				
To Whom Paid friends of christina demarco-breeden			мо	DAY	YEAR			
Mailing Address po box 224			9	17	2023	\$	200.00	
City washington	State PA	Zip Code (Plus 4) 15301		Description of Expenditure washington co row DA				
To Whom Paid jen grossman			мо	DAY	YEAR			
Mailing Address 169 Pleasantview dr			9	17	2023	\$	300.00	
City mcmurry	State PA	Zip Code (Plus 4) 15317	Description of Expenditure Peters twp school board					
To Whom Paid CTE sandy sabot			мо	DAY	YEAR			
Mailing Address 35 milbeck dr			9	17	2023	\$	100.00	
City washington	State PA	Zip Code (Plus 4) 15301	Description of Expenditure washington co prothonotary					
To Whom Paid vote bobby dellorso			мо	DAY	YEAR			
Mailing Address 414 east street			9	17	2023	\$	100.00	
City canonsburg	State PA	Zip Code (Plus 4) 15317	-	Description of Expenditure clerk of courts				
To Whom Paid Sara innamorato			мо	DAY	YEAR			
Mailing Address act blue po box 441146			7	20	2023	\$	500.00	
City sommerville	State MA	Zip Code (Plus 4) 02144		Description of Expenditure allegheny co exec				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL	
						\$	1,200.00	