

Commonwealth of Pennsylvania

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 : 2003274		Report Filed By :		CANDIDATE	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST				
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF JOSH SHAPIRO										
Street Address: C/O CAREN MOSKOWITZ, TREASURER, 528 PINE TREE ROAD										
City: JENKINTOWN			State: PA		Zip Code: 19046					
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3. <input checked="" type="checkbox"/>	AMENDMENT REPORT?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2012	FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/>		DISKETTE <input type="checkbox"/>		
Name of Office Sought by Candidate:				DATE OF ELECTION			District Number	Office Code	Party Code	County Code
				MO	DAY	YEAR	DEM 46			
				11	6	2012	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY	
		4	10	2012	TO	5	14	2012		
A. Amount Brought Forward From Last Report				\$		148,290.21				
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		10,403.38				
C. Total Funds Available (Sum Of Lines A and B)				\$		158,693.59				
D. Total Expenditures (From Schedule III)				\$		11,734.32				
E. Ending Cash Balance (Subtract Line D From Line C)				\$		146,959.27				
F. Value Of In-Kind Contributions Received (From Schedule II)				\$		0.00				
G. Unpaid Debts And Obligations (From Schedule IV)				\$		0.00				

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
 My Commission Expires _____
 MO DAY YR

 Signature of Person Submitting Report

 Printed Name

 Email

 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
 My Commission Expires _____
 MO DAY YR

 Signature of Candidate

 Printed Name

 Email

 Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF JOSH SHAPIRO	From: <u>4/10/2012</u> To: <u>5/14/2012</u>

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

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)	\$ 550.00
TOTAL for the Reporting Period (2)	\$ 550.00

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)	\$ 9,050.00
TOTAL for the Reporting Period (3)	\$ 9,050.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 753.38

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.)	\$ 10,403.38
---	--------------

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	
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 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 Candidate FRIENDS OF JOSH SHAPIRO	Reporting Period From: <u>4/10/2012</u> To: <u>5/14/2012</u>
---	--

			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	
STEPHEN TEICH						
Mailing Address 1633 TUCKERSTOWN ROAD			4	19	2012	\$ 250.00
City DRESHER	State PA	Zip Code (Plus 4) 190251306				
CHARLES GOTTLIEB						
Mailing Address 40 OVERBROOK PARKWAY			4	19	2012	\$ 150.00
City WYNNEWOOD	State PA	Zip Code (Plus 4) 190963512				
MURRAY UFFBERG						
Mailing Address 644 CHARLES AVENUE			4	19	2012	\$ 150.00
City KINGSTON	State PA	Zip Code (Plus 4) 18704				

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

PAGE TOTAL
\$ 550.00

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	MO	DAY	YEAR	
Mailing Address				\$ 0.00
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 FRIENDS OF JOSH SHAPIRO	Reporting Period From: <u>4/10/2012</u> To: <u>5/14/2012</u>
---	--

				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
WILLIAM PETRUCCI							
Mailing Address 1570 BAUMAN DRIVE				4	19	2012	\$ 300.00
City MAPLE GLEN	State PA	Zip Code (Plus 4) 19002					
Employer Name ABINGTON MEDICAL SPECIALISTS CARDIOLOGY				Occupation PHYSICIAN			
Employer Mailing Address/Principal Place of Business 1235 OLD YORK RD.LEVY MEDICAL BLDG, STE. 222			City ABINGTON	State PA	Zip Code (Plus 4) 19001		
Full Name of Contributor				MO	DAY	YEAR	
EMANUEL KOSTACOS							
Mailing Address 405 NEWBOLD ROAD				4	19	2012	\$ 750.00
City JENKINTOWN	State PA	Zip Code (Plus 4) 19046					
Employer Name ABINGTON MEDICAL SPECIALISTS CARDIOLOGY				Occupation PHYSICIAN			
Employer Mailing Address/Principal Place of Business 1235 OLD YORK RDLEVY MEDICAL BLDG, STE. 222			City ABINGTON	State PA	Zip Code (Plus 4) 19001		
Full Name of Contributor				MO	DAY	YEAR	
SCOTT SHAPIRO							
Mailing Address 1555 BARDSEY DRIVE				4	19	2012	\$ 1,000.00
City LOWER GWYNEDD	State PA	Zip Code (Plus 4) 19002					
Employer Name ABINGTON MEDICAL SPECIALISTS CARDIOLOGY				Occupation PHYSICIAN			
Employer Mailing Address/Principal Place of Business 1235 OLD YORK RDLEVY MEDICAL BLDG STE 222			City ABINGTON	State PA	Zip Code (Plus 4) 19001		

Full Name of Contributor MARC C. COHEN			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 1445 HUNTINGDON ROAD			4	19	2012	
City ABINGTON	State PA	Zip Code (Plus 4) 19001				
Employer Name ABINGTON MEDICAL SPECIALISTS CARDIOLOGY			Occupation PHYSICIAN			
Employer Mailing Address/Principal Place of Business 1235 OLD YORK RD LEVY MEDICAL BLDG STE 222		City ABINGTON	State PA	Zip Code (Plus 4) 19001		

Full Name of Contributor ADAM M. COHEN			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 49 OAKWOOD DRIVE			4	19	2012	
City DRESHER	State PA	Zip Code (Plus 4) 19025				
Employer Name ABINGTON MEDICAL SPECIALISTS CARDIOLOGY			Occupation PHYSICIAN			
Employer Mailing Address/Principal Place of Business 1235 OLD YORK RD LEVY MEDICAL BLDG STE 222		City ABINGTON	State PA	Zip Code (Plus 4) 19001		

Full Name of Contributor PATRICK AQUILINA			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 1131 ARABIAN RD.			4	19	2012	
City WARRINGTON	State PA	Zip Code (Plus 4) 189762727				
Employer Name ABINGTON MEDICAL ASSOCIATES CARDIOLOGY			Occupation PHYSICIAN			
Employer Mailing Address/Principal Place of Business 1235 OLD YORK RD LEVY MEDICAL BLDG STE 222		City ABINGTON	State PA	Zip Code (Plus 4) 19001		

Full Name of Contributor BRUCE KLUGHERZ			MO	DAY	YEAR	\$ 500.00
Mailing Address 1200 RED BARN RD.			4	19	2012	
City LOWER GWYNEDD	State PA	Zip Code (Plus 4) 190021278				
Employer Name ABINGTO MEDICAL ASSOCIATES CARDIOLOGY			Occupation PHYSICIAN			
Employer Mailing Address/Principal Place of Business 1235 OLD YORK RD. LEVY MEDICAL BLDG. STE 222		City ABINGTON	State PA	Zip Code (Plus 4) 19001		

Full Name of Contributor RICHARD A. GOLDSTEIN			MO	DAY	YEAR	\$ 500.00
Mailing Address 1157 TIMBERGATE DRIVE			4	19	2012	
City RYDAL	State PA	Zip Code (Plus 4) 19046				
Employer Name ABINGTON MEDICAL ASSOCIATES CARDIOLOGY			Occupation PHYSICIAN			
Employer Mailing Address/Principal Place of Business 1235 OLD YORK RD.LEVY MEDICAL BLDG STE. 222		City ABINGTON	State PA	Zip Code (Plus 4) 19001		

Full Name of Contributor RICHARD BORGE			MO	DAY	YEAR	\$ 500.00
Mailing Address 14 MILLERS LANE			4	19	2012	
City NEWTOWN	State PA	Zip Code (Plus 4) 18940				
Employer Name ABINGTON MEDICAL ASSOCIATES CARDIOLOGY			Occupation PHYSICIAN			
Employer Mailing Address/Principal Place of Business 1235 OLD YORK RD.LEVY MEDICAL BLDG STE 222		City ABINGTON	State PA	Zip Code (Plus 4) 19001		

Full Name of Contributor BRUCE C. BERGER			MO	DAY	YEAR	\$ 500.00
Mailing Address 1763 OAK HILL DRIVE			4	19	2012	
City HUNTINGDON VALLEY	State PA	Zip Code (Plus 4) 19006				
Employer Name ABINGTON MEDICAL ASSOCIATES CARDIOLOGY			Occupation PHYSICIAN			
Employer Mailing Address/Principal Place of Business 1235 OLD YORK RDLEVY MEDICAL BLDG STE 222		City ABINGTON	State PA	Zip Code (Plus 4) 19001		

Full Name of Contributor ASOKA BALARATNA			MO	DAY	YEAR	\$ 500.00
Mailing Address 919 WOODCREST RD.			4	19	2012	
City ABINGTON	State PA	Zip Code (Plus 4) 19001				
Employer Name ABINGTON MEDICAL ASSOCIATES CARDIOLOGY			Occupation PHYSICIAN			
Employer Mailing Address/Principal Place of Business 1235 OLD YORK RD.LEVY MEDICAL BLDG STE 222		City ABINGTON	State PA	Zip Code (Plus 4) 19001		

Full Name of Contributor ANDREW FIREMAN			MO	DAY	YEAR	\$ 500.00
Mailing Address PO BOX 523			4	19	2012	
City GWYNEDD VALLEY	State PA	Zip Code (Plus 4) 194370523				
Employer Name ABINGTON MEDICAL ASSOCIATES CARDIOLOGY			Occupation PHYSICIAN			
Employer Mailing Address/Principal Place of Business 1235 OLD YORK RD.LEVY MEDICAL BLDG STE 222		City ABINGTON	State PA	Zip Code (Plus 4) 19001		

Full Name of Contributor ROBERT A. WATSON III			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 120 GIFT CIRCLE			4	19	2012	
City AMBLER	State PA	Zip Code (Plus 4) 19002				
Employer Name ABINGTON MEDICAL ASSOCIATES CARDIOLOGY			Occupation PHYSICIAN			
Employer Mailing Address/Principal Place of Business 1235 OLD YORK RDLEVY MEDICAL BLDG STE 222		City ABINGTON	State PA	Zip Code (Plus 4) 19001		

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

PAGE TOTAL
\$ 9,050.00

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 FRIENDS OF JOSH SHAPIRO	Reporting Period From: <u>4/10/2012</u> To: <u>5/14/2012</u>
---	--

			DATE			AMOUNT
Full Name	Mailing Address	City	MO	DAY	YEAR	
TD BANK	PO BOX 1377	LEWISTOWN	4	30	2012	\$ 3.38
	State ME	Zip Code (Plus 4) 04243				
Receipt Description INTEREST						

Full Name	Mailing Address	City	MO	DAY	YEAR	
HUTNEY CONSTRUCTION CORP.	1150 OLD YORK RD. STE. 21	ABINGTON				\$ 750.00
	State PA	Zip Code (Plus 4) 19001				
Receipt Description SECURITY DEPOSIT REFUND						

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

PAGE TOTAL
\$ 753.38

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 FRIENDS OF JOSH SHAPIRO	Reporting Period From: <u>4/10/2012</u> To: <u>5/14/2012</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 RECEIVED - 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:

			DATE	AMOUNT
Full Name of Contributor	MO	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 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		
Mailing Address				\$	0.00
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
FRIENDS OF JOSH SHAPIRO	From <u>4/10/2012</u> To: <u>5/14/2012</u>

			DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR	
AT&T	4	10	2012	\$ 154.55
Mailing Address PO BOX 6463				
City CAROL STREAM	State IL	Zip Code (Plus 4) 60197	Description of Expenditure PHONE	
To Whom Paid FRIENDS OF STEVE MCCARTER	4	13	2012	\$ 500.00
Mailing Address PO BOX 467				
City GLENSIDE	State PA	Zip Code (Plus 4) 19038	Description of Expenditure CONTRIBUTION	
To Whom Paid BOBBY II	4	19	2012	\$ 1,000.00
Mailing Address PO BOX 22614				
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19110	Description of Expenditure CONTRIBUTION	
To Whom Paid JOSH SHAPIRO	4	19	2012	\$ 23.00
Mailing Address 1950 CLOVERLY LANE				
City RYDAL	State PA	Zip Code (Plus 4) 19046	Description of Expenditure REIMBURSE PARKING	
To Whom Paid FRIENDS OF MADELEINE DEAN	4	20	2012	\$ 10,000.00
Mailing Address PO BOX 381				
City ABINGTON	State PA	Zip Code (Plus 4) 19001	Description of Expenditure CONTRIBUTION	

To Whom Paid CCD DEBIT			MO	DAY	YEAR	\$ 25.00
Mailing Address PO BOX 407066			4	3	2012	
City FT LAUDERDALE	State FL	Zip Code (Plus 4) 33340	Description of Expenditure ON-LINE GIVING FEE			
To Whom Paid HARLAND CLARKE CHECKS			MO	DAY	YEAR	\$ 31.77
Mailing Address			4	20	2012	
City	State	Zip Code (Plus 4)	Description of Expenditure CHECKS FROM BANK			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 11,734.32

