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 :	on 2003	274			Report Filed B		CA	NDI	DATE		COMN	AITTEE	~	LO	DD I	131	
Name of Filing C	ommittee, Candid	ate or L	obbyist:	Ī	Friends	of Jos	sh Sh	apir	О								
Street Address:	528 Pine Tree	Road,,	c/o Caren I	Moskov	witz, Tre	easur	er										
City:	Jenkintown						State	e:	PA			Zip Co	de: 1	9046			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2.	30 DA		P	POST-	3.		AMENDN REPORT		Yes	7	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	AY PRE	- 5. X	30 DA		P	POST-	6.		TERMINA REPORT		Yes		No	\
report type)	ANNUAL REPORT	7.	Year 2014				NG ME					PAPER		Y	D	ISKET	TE
Name of Office S	- Sought by Candida	te:					DAT	ΈΟ	F ELEC	TION	N	District Number	Office Code	P.	arty	Code	ounty ode
							МО		DAY	YEA	AR			·		·	
								11	•	4	2014		(SEE I	NSTRUC	TIONS	FOR CO	DES)
	Receipts and	МО	DAY	YEAR			МО		DAY	YEA	AR	FC	OR OFFI	CE US	E O	NLY	
Expenditures	from:		9 16	20)14 T	0		10	2	0	2014						
A. Amount Bro	ught Forward Fror	n Last R	eport		·	\$			1,0	38,75	56.90						
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sche	dule I)	\$				15,48	35.16						
C. Total Funds	Available (Sum Of	Lines A	and B)			\$			1,0	54,24	12.06						
D. Total Expend	ditures (From Sch	edule II	I)			\$				1,82	27.71						
E. Ending Cash	Balance (Subtrac	t Line D	From Line	C)		\$			1,0	52,41	.4.35						
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedul	e II)	\$					0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	/)		\$					0.00			•			
					IDAVI												
	that this report, incl	-	_								_		of my kno	owledg	e and	d belief	, true
-	cribed before me this	.								Sic	anature	of Perso	n Submi	tting D	enor		
	day of		_ 20			-				3ig	gilature	or reiso	iii Subiiii	ttillig K	ерог		
	Signatu	re				-						Prin	ted Nam	ie			
My Commission Ex	·					_		•				Ema					
	МО		AY	YR						a Code		Daytin	ne Telep	hone N	lumb	er	
	a report of a cand that to the best of n				•						provide	ions of th	e act of	luna ?	102	7 (B L -	1333
No 320) as amende		ily Kilowi	euge and ben	iei tilis	political	Commi	ittee i	ias iii	———	eu any	provis	ions or th	e act or .	Julie 3,	.193/	/ (P.L.	
	day of		20									ignature (of Candid	date			
						- -						Printe	ed Name				
My Commission Exp	Signature ires											Ema	nil				-
	МО	D	AY	YR		-			Area C	ode		D	aytime '	Telepho	one N	Number	<u> </u>

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	Period		
Friends of Josh Shapiro	From:	9/16/201	<u>.4</u> To:	10/20/2014
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)			\$	2,000.00
All Other Contributions (Part D)			\$	13,350.00
TOTAL for the Reporting	Period	(3)	\$	15,350.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	Period	(4)	\$	135.16
Total Monetary Contributions and Receipts During this Reporting Period (Add an	d enter am	ount		15 405 15
totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page			\$	15,485.16

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize onl with an aggregate val	-			-			
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		1			DATE			AMOUNT
Full Name of Contribution	ng Committee			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

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 Fining Committee of Candidate					Reporting Period From: To:							
					DATE		AN	4OUNT				
Full Name of Contributor				МО	DAY	YEAR						
Mailing Address							\$ \$	0.00				
City	State	Zip Code (Plus 4)	1									

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			
Friends of Josh Shapiro			From:	9/1	<u>6/2014</u>	То:	10/20/2014
				DA	TE		AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR	
IUOE Local 542 Political Action Fund		1-10					
Mailing Address 1375 Virginia Drive Suite 100					16	2014	\$ 1,000.00
City Fort Washington	State	Zip Code	e (Plus 4)	10	16	2014	
	PA	190343	257				
Full Name of Contributing Committee				мо	DAY	YEAR	
KSMRS PAC				140	DAI	ILAK	
Mailing Address 910 Harvest Drive Fl 2							\$ 1,000.00
City Blue Bell	State	Zip Code	e (Plus 4)	10	16	2014	
	PA	19422					

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

PAGE TOTAL \$ 2,000.00

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.)

Name of Filing Committee or Candidate				Rep	orting Pe	riod				
Friends of Josh Shapiro				Fron	n:	9/16/2	014 To) :	10/20/2014	
					D/	ATE		АМ	OUNT	
Full Name of Contributor James Bogrette					мо	DAY	YEAR			
Mailing PO Box 327 1208 Gy	psy Hill Road							\$	500.00	
City Gwynedd Valley	State	Zip	Code (Plus	i 4)	9	17	2014	.		
2 Gwylledd Valley	PA	19	4370327							
Employer Name Kimmel Bogrette					Occupat	tion	t			
Employer Mailing Address/Principal Plac Business	e of		City			State		Zip Code	(Plus 4)	
151 E. 10th AvenueSuite 300 Conshohock			ocken		PA		19428			
Full Name of Contributor Christopher M. Placitella					МО	DAY	YEAR			
Mailing 15 Goose Point Drive								\$	2,000.00	
City Colts Neck	State	Zip	Code (Plus	34)	9	19	2014	+		
	NJ	07	7222112							
Employer Name Cohen, Placitella & Ro	th				Occupation Attorney					
Employer Mailing Address/Principal Plac Business	e of		City			State		Zip Code	(Plus 4)	
Two Commerce Square2001 Market Str	eet, Suite 2900		Philadelp	hia		PA		19103		
Full Name of Contributor										
Harry M. Roth					МО	DAY	YEAR			
Mailing 2217 Saint James Place Address								\$	1,000.00	
City Philadelphia	State	Zip	Code (Plus	i 4)	9	19	2014	+		
PA 19103										
Employer Name Cohen, Placitella & Roth				Occupat	tion A	ttorney	,			
Employer Mailing Address/Principal Plac Business	e of		City			State		Zip Code (Plus 4)		
Two Commerce Square2001 Market Str			Philadelp	hia		PA		19103		

Full Name of Cont	tributor				мо	DAY	YEAR			
Mark Fishman								Ц		
Mailing Address	848 Roscommon Rd					10	2014	\$	1,000.00	
City Bryn Maw	ır	State	Zij	Code (Plus 4)	9	19	2014			
		PA	19	0101845						
Employer Name	Fishman and Tobin, Ir	nc.			Occupat	ion A	pparel	•		
Employer Mailing Business	Address/Principal Place	e of		City		State		Zip Code (Plus 4)		
4000 Chemical R	oadSuite 500			Plymouth Meeti	ng	PA		19462		
Full Name of Cont	tributor									
Mitch Russell					МО	DAY	YEAR			
Mailing Address	1407 Scrope Rd							\$	1,000.00	
City Rydal		State	Zij	Code (Plus 4)	9	19	2014			
, aa.		PA	19	0461219						
Employer Name Russell Law Group, P.C.					Occupat					
Employer Mailing Address/Principal Place of City					State		Zip Code (P	lus 4)		
Business 93 Old York Rd				Jenkintown		PA		19046		
Full Name of Cont	tributor					-	\			
Robert Cantor					МО	DAY	YEAR			
Mailing Address	532 Red Oak Drive						2014	\$	1,000.00	
City Elkins Par	·k	State	Zij	Code (Plus 4)	9	19	2014			
		PA	19	0027						
Employer Name	Insinger Machine Co.				Occupat	ion	Commer	cial Dishwas	her Sal	
Employer Mailing Business	Address/Principal Plac	e of		City	<u>I</u>	State	T	Zip Code (P	lus 4)	
6425 State Road				Philadelphia		PA		19135		
Full Name of Cont Stewart Cohen	tributor				мо	DAY	YEAR			
Mailing 620 Montgomery School Ln								\$	2,000.00	
City Wynnewo	and	State	Zij	p Code (Plus 4)	9	19	2014			
wynnewc	ou	PA	19	0961029						
Employer Name Cohen Placitella and Roth				Occupat	ion A	ttorney				
Employer Mailing Address/Principal Place of City				State Zip Code (Plus 4)			lus 4)			
	Business Two Commerce Square2001 Market Street, Suite 2900 Philadelphia				PA		19103			
				l		•	I			

										-
Full Name of Cont	tributor				мо	DAY	YE	AR		
-										
Mailing Address	44 W Lancaster Ave S	Ste 110							\$	2,500.00
City Ardmore		State	Zij	Code (Plus 4)	10	2	20)14		
		PA	19	00031339						
Employer Name	Greentree Properties	1			Occupat	tion	Real I	Esta	te Developer	
Employer Mailing Business	Address/Principal Place	e of		City		State			Zip Code (Plu	ıs 4)
44 W Lancaster A	AveSuite 110			Ardmore		PA			19003	
Full Name of Cont	tributor				мо	DAY	YE	AR		
Mailing	1320 Homestead Lane									
Address	1320 Homestead Lane				10	2) 20)14	\$	500.00
City Lancaster		State		Code (Plus 4)	10	2	20	714		
		PA	17	'603						
Employer Name CM3 Business Solutions, I					Occupation Web Design					
Employer Mailing Address/Principal Place of Business City				State			Zip Code (Plu	ıs 4)		
185 Commerce D	riveSuite 110			Fort Washington	า	PA			19034	
Full Name of Cont	tributor						1			
P. Sherrill Neff					МО	DAY	YE	AK		
Mailing Address	619 Revere Rd						2 20		- \$	350.00
City Merion St	ation	State	Zij	Code (Plus 4)	10	2	20)14		
		PA	19	0066						
Employer Name	Quaker Bio Ventures				Occupat	tion	Ventu	ıre C	Capitalist	
Employer Mailing Business	Address/Principal Place	e of		City	•	State			Zip Code (Plu	ıs 4)
2929 Arch Street				Philadelphia		PA			19104	
Full Name of Cont	tributor				мо	DAY	YE	ΔR		
Richard Lewis					140	DAI		-110		
Mailing Address	155 Railroad Plz								\$	500.00
City Royersfor	rd	State	Zij	Code (Plus 4)	10	3	20)14		
		PA	19	4681953					<u> </u>	
Employer Name Lewis Environmental				Occupat	tion	Presid	dent			
Employer Mailing Business	Employer Mailing Address/Principal Place of Business City			City	State Zip Code (Plus 4)			ıs 4)		
PO Box 639 Royersford					PA			19468		
						•		ı		

Full Name of Contributor Kenneth A Kind	Kenneth A Kind						
Mailing 1330 Old Ford Rd							\$ 1,000.00
Huntingdon Valley		p Code (Plus 4) 90068106	10	7	2014		
Employer Name N/A		Occupat	t ion	Retired	•		
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
\$ 13,350.00

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 Candidate			Report	ing Perio	d			
Friends of Josh Shapiro			From:		9/16/201	<u>4</u> To:		10/20/2014
				D	ATE			AMOUNT
Full Name TD Bank				МО	DAY	YEAR		
Mailing Address PO Box 1377							\$	135.16
City Lewiston	State ME	Zip Code (04243	Plus 4)	9	30	2014	1	
Receipt Description Interest							·	
Enter Grand Total of Part E on Schedu	ule T. Detailed Sumi	mary Page	Section	4				PAGE TOTAL
Lines Grand Total of Part L on Schede	ne i, betanea 3ann	mary rage,	Section	7.			\$	135.16

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	
Friends of Josh Shapiro	From:	<u>9/16/2014</u> To:	10/20/2014
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)	\$	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,		\$	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			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 C	ontributions 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 Candida	te				Re	porting	Period					
					Fro	m:		То	:			
							DATE				AMOUNT	
Full Name of Contributor						мо	DAY	YEAR	1			
Mailing Address										\$		0.00
City	State		Zip Code(F	Plus 4)								
Employer of Contributor	•		•			Occupa	ation					
Employer Mailing Address/Principal P Business	lace of	City		State		Zip 4)	Code(Plus	Desc	cripti	ion of (Contributio	on
Enter Grand Total of Part G on S	chedule II, I	In-Kind	Contributi	ons De	taile	ed					PAGE TOT	ΓAL
Summary Page, Section 3.												0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period						
Friends of Josh Shapiro			From	9/10	5/2014	То:	10/20/2014		
-				AMOUNT					
To Whom Paid AT&T Mobility				DAY	YEAR				
Mailing Address P.O. Box 6463			10	8	2014	\$	355.74		
City Carol Stream State Zip Code (Plus 4)			Description of Expenditure						
	IL	60197	Cell phone bill						
To Whom Paid CCD Debit				DAY	YEAR				
Mailing Address PO Box 407066			9	30	2014	\$	30.14		
City Fort Lauderdale State Zip Code (Plus 4)			Description of Expenditure						
	FL	33340	Online giving fee						
To Whom Paid Josh Shapiro			мо	DAY	YEAR				
Mailing Address 1550 Cloverly Ln			9	30	2014	\$	441.83		
City Rydal State Zip Code (Plus 4)			Description of Expenditure						
ŕ	PA	190461405	Reimbursement						
To Whom Paid NGP VAN			МО	DAY	YEAR				
Mailing Address 1101 15th Street NW Suite 500			10	8	2014	\$	750.00		
City Washington	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
•	DC	20005	Database						
To Whom Paid		-	МО	DAY	YEAR				
Willow Grove NAACP									
Mailing Address P.O. Box 140			10	17	2014	\$	150.00		
City Willow Grove	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	l	1,000	1						

19090

Contribution

PA

To Whom Paid Lebanon County Democratic Committee	мо	DAY	YEAR		
Mailing Address PO Box 1128	9	23	2014	\$	100.00
City Lebanon State Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	Contribu				
					PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.				\$	1,827.71
			'		