

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: 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 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. X	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2015	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				
						11	3	2015				
									(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		10	20	2015		11	23	2015				
A. Amount Brought Forward From Last Report						\$ 1,358,418.01						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 43,732.46						
C. Total Funds Available (Sum Of Lines A and B)						\$ 1,402,150.47						
D. Total Expenditures (From Schedule III)						\$ 7,201.65						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 1,394,948.82						
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 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
Friends of Josh Shapiro	From: <u>10/20/2015</u> To: <u>11/23/2015</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)	\$ 1,100.00
TOTAL for the Reporting Period (2)	\$ 1,100.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 10,500.00
All Other Contributions (Part D)	\$ 31,900.00
TOTAL for the Reporting Period (3)	\$ 42,400.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 182.46

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.)	\$ 43,732.46
---	--------------

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

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>10/20/2015</u> To: <u>11/23/2015</u>
---	--

				DATE		AMOUNT	
Full Name of Contributor Walter Kielar				MO	DAY	YEAR	\$ 100.00
Mailing Address 12 Blantyre Cir				10	30	2015	
City Thornton	State PA	Zip Code (Plus 4) 193732013					
Full Name of Contributor Dennis Gregory				MO	DAY	YEAR	\$ 100.00
Mailing Address 17 Oneida Ct				10	30	2015	
City Chester Springs	State PA	Zip Code (Plus 4) 194252935					
Full Name of Contributor Brian D Gralnick				MO	DAY	YEAR	\$ 250.00
Mailing Address 7808 Spring Ave				10	20	2015	
City Elkins Park	State PA	Zip Code (Plus 4) 190272620					
Full Name of Contributor Denise Wylie				MO	DAY	YEAR	\$ 200.00
Mailing Address 205 Fairview Rd				10	30	2015	
City Clarks Green	State PA	Zip Code (Plus 4) 184111207					
Full Name of Contributor James Tabak				MO	DAY	YEAR	\$ 200.00
Mailing Address 105 Marlbrooke Way				10	30	2015	
City Kennett Sq	State PA	Zip Code (Plus 4) 193481719					

Full Name of Contributor			MO	DAY	YEAR	\$ 250.00
Deborah S Kuhn						
Mailing Address			10	21	2015	
1936 Panama St						
City Philadelphia	State PA	Zip Code (Plus 4) 191036610				

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

PAGE TOTAL
\$ 1,100.00

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: <u>10/20/2015</u> To: <u>11/23/2015</u>

				DATE		AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 1,000.00
Swanson Street Associates				10	26	2015	
Mailing Address 350 Sentry Parkway Building 630 Suite 300							
City Blue Bell		State PA	Zip Code (Plus 4) 194222314				
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 2,500.00
Aetna, Inc. Political Action Committee				11	9	2015	
Mailing Address 20 F St NW Ste 350							
City Washington		State DC	Zip Code (Plus 4) 200016706				
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 1,000.00
Chimicles and Tikellis LLP				10	26	2015	
Mailing Address 361 Lancaster Ave One Haverford Centre							
City Haverford		State PA	Zip Code (Plus 4) 190411554				
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 5,000.00
Sheet Metal Workers Local #19				10	30	2015	
Mailing Address 1301 S Columbus Blvd							
City Philadelphia		State PA	Zip Code (Plus 4) 191475505				
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 1,000.00
PLP PAC				10	26	2015	
Mailing Address 333 E City Ave Ste 300							
City Bala Cynwyd		State PA	Zip Code (Plus 4) 190041512				

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

PAGE TOTAL

\$ 10,500.00

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>10/20/2015</u> To: <u>11/23/2015</u>
---	--

				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
Marsha Perelman				10	21	2015	\$ 2,500.00
Mailing Address 1 Cherry Ln							
City Wynnewood	State PA	Zip Code (Plus 4) 190961235					
Employer Name Woodforde Management, Inc.				Occupation CEO			
Employer Mailing Address/Principal Place of Business 401 Times Building			City Ardmore		State PA	Zip Code (Plus 4) 19003	
Ken Lawrence				10	26	2015	\$ 1,000.00
Mailing Address 351 Knoll Rd							
City Plymouth Meetin	State PA	Zip Code (Plus 4) 194627152					
Employer Name Temple University				Occupation Senior Vice President			
Employer Mailing Address/Principal Place of Business 1330 Polett WalkSullivan Hall Room G-12			City Philadelphia		State PA	Zip Code (Plus 4) 19122	
Joseph C. Kohn Esq.				10	27	2015	\$ 1,000.00
Mailing Address 240 Sugartown Rd							
City Devon	State PA	Zip Code (Plus 4) 193331612					
Employer Name Kohn Swift & Graf				Occupation Attorney			
Employer Mailing Address/Principal Place of Business 1 S Broad StSte 2100			City Philadelphia		State PA	Zip Code (Plus 4) 19107	

Full Name of Contributor Thaddeus Bartkowski			MO	DAY	YEAR	\$ 5,000.00
Mailing Address 3400 W Chester Pike Ste 100			10	26	2015	
City Newtown Square	State PA	Zip Code (Plus 4) 190734640				
Employer Name Catalyst Outdoor Advertising			Occupation Advertising			
Employer Mailing Address/Principal Place of Business PO Box 1421		City Malvern	State PA	Zip Code (Plus 4) 19355		

Full Name of Contributor Arnold Berman			MO	DAY	YEAR	\$ 5,000.00
Mailing Address 809 Morris Ave			11	3	2015	
City Bryn Mawr	State PA	Zip Code (Plus 4) 190101820				
Employer Name Surgeon			Occupation Self			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

Full Name of Contributor Meir Gelley			MO	DAY	YEAR	\$ 2,000.00
Mailing Address 429 15th St			10	30	2015	
City Lakewood	State NJ	Zip Code (Plus 4) 087011763				
Employer Name Nationwide HealthCare			Occupation Healthcare			
Employer Mailing Address/Principal Place of Business 801 N Broom St		City Wilmington	State DE	Zip Code (Plus 4) 19806		

Full Name of Contributor Stradley Ronon Attorneys at Law			MO	DAY	YEAR	\$ 5,000.00
Mailing Address 2600 One Commerce Sq			11	20	2015	
City Philadelphia	State PA	Zip Code (Plus 4) 191037018				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

Full Name of Contributor Raymond Levin			MO	DAY	YEAR	\$ 500.00
Mailing Address PO Box 196			11	1	2015	
City Wayne	State PA	Zip Code (Plus 4) 190870196				
Employer Name Self Employed			Occupation Real Estate			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

Full Name of Contributor Thomas M Federman			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 1363 Mill Rd			10	27	2015	
City Jenkintown	State PA	Zip Code (Plus 4) 190462530				
Employer Name Self Employed			Occupation Attorney			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

Full Name of Contributor Parkhouse Nursing & Rehab Center			MO	DAY	YEAR	\$ 2,000.00
Mailing Address 1600 Black Rock Rd			11	10	2015	
City Royersford	State PA	Zip Code (Plus 4) 194683147				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

Full Name of Contributor Jonathan Hoffman			MO	DAY	YEAR	\$ 5,000.00
Mailing Address 133 Old Gulph Rd			11	10	2015	
City Wynnewood	State PA	Zip Code (Plus 4) 190961016				
Employer Name self			Occupation finance			
Employer Mailing Address/Principal Place of Business 133 Old Gulph Rd		City Wynnewood	State PA	Zip Code (Plus 4) 19096		

Full Name of Contributor Paul Bach			MO	DAY	YEAR	\$ 400.00
Mailing Address 4005 Cloverland Dr			10	30	2015	
City Phoenix	State MD	Zip Code (Plus 4) 211312139				
Employer Name Genesis HealthCare			Occupation Healthcare			
Employer Mailing Address/Principal Place of Business 101 E State St		City Kennett Square	State PA	Zip Code (Plus 4) 19348		

Full Name of Contributor Regina Ceisler Shapiro			MO	DAY	YEAR	\$ 1,500.00
Mailing Address 34 Llanberris Rd			10	30	2015	
City Bala Cynwyd	State PA	Zip Code (Plus 4) 190042403				
Employer Name Hillel of Greater Philadelphia			Occupation Fundraisng			
Employer Mailing Address/Principal Place of Business 215 S 39th St		City Philadelphia	State PA	Zip Code (Plus 4) 19104		

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

PAGE TOTAL
\$ 31,900.00

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>10/20/2015</u> To: <u>11/23/2015</u>
---	--

				DATE	AMOUNT	
Full Name			MO	DAY	YEAR	
TD Bank						
Mailing Address PO Box 1377			10	31	2015	\$ 182.46
City Lewiston	State ME	Zip Code (Plus 4) 042431377				
Receipt Description Interest						

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

PAGE TOTAL
\$ 182.46

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	
Friends of Josh Shapiro		From: <u>10/20/2015</u> To: <u>11/23/2015</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	\$ 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:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
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
Friends of Josh Shapiro	From <u>10/20/2015</u> To: <u>11/23/2015</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
Parkhouse Nursing & Rehab Center				
Mailing Address 1600 Black Rock Rd	11	23	2015	\$ 2,000.00
City Royersford	State PA	Zip Code (Plus 4) 194683147	Description of Expenditure Contribution Refund	
To Whom Paid	MO	DAY	YEAR	
Caren G. Moskowitz				
Mailing Address 528 Pinetree Rd	10	30	2015	\$ 92.20
City Jenkintown	State PA	Zip Code (Plus 4) 190462228	Description of Expenditure Reimbursement - Ink	
To Whom Paid	MO	DAY	YEAR	
CCD Debit				
Mailing Address PO Box 407066	10	31	2015	\$ 160.54
City Fort Lauderdale	State FL	Zip Code (Plus 4) 333407066	Description of Expenditure Credit card processing	
To Whom Paid	MO	DAY	YEAR	
LGBT Community Center Coalition				
Mailing Address 1306 N 3rd St	11	9	2015	\$ 250.00
City Harrisburg	State PA	Zip Code (Plus 4) 171021970	Description of Expenditure Event tickets	
To Whom Paid	MO	DAY	YEAR	
AT&T Mobility				
Mailing Address PO Box 6463	11	9	2015	\$ 214.65
City Carol Stream	State IL	Zip Code (Plus 4) 601976463	Description of Expenditure Phone bill	

To Whom Paid AT&T Mobility			MO	DAY	YEAR	\$ 274.59
Mailing Address PO Box 6463			10	20	2015	
City Carol Stream	State IL	Zip Code (Plus 4) 601976463	Description of Expenditure Phone bill			

To Whom Paid Kevin Washo			MO	DAY	YEAR	\$ 4,000.00
Mailing Address 1900 Market St Fl 4			10	23	2015	
City Philadelphia	State PA	Zip Code (Plus 4) 191033574	Description of Expenditure Consulting			

To Whom Paid Josh Shapiro			MO	DAY	YEAR	\$ 209.67
Mailing Address 1550 Cloverly Ln			10	28	2015	
City Rydal	State PA	Zip Code (Plus 4) 190461405	Description of Expenditure Reimbursement - Travel, meals			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 7,201.65

