

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 : 2016C0749		Report Filed By :	CANDIDATE <input checked="" type="checkbox"/>	COMMITTEE	LOBBYIST					
Name of Filing Committee, Candidate or Lobbyist: JOSHUA SHAPIRO										
Street Address: 1550 CLOVERLY LANE										
City: RYDAL			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	No	<input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	Year 2016	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	8	2016	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY	
		4	12	2016	TO	5	16	2016		
A. Amount Brought Forward From Last Report				\$		0.00				
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		452.38				
C. Total Funds Available (Sum Of Lines A and B)				\$		452.38				
D. Total Expenditures (From Schedule III)				\$		452.38				
E. Ending Cash Balance (Subtract Line D From Line C)				\$		0.00				
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
JOSHUA SHAPIRO	From: <u>4/12/2016</u> To: <u>5/16/2016</u>

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)	\$ 0.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 0.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 0.00

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.)	\$ 0.00
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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	Reporting Period
	From: _____ To: _____

				DATE	AMOUNT	
Full Name of Contributor						
Mailing Address	MO	DAY	YEAR			\$ 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 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			
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 30%; padding: 5px;">City</td> <td style="width: 20%; padding: 5px;">State</td> <td style="width: 50%; padding: 5px;">Zip Code (Plus 4)</td> </tr> </table>	City	State	Zip Code (Plus 4)				
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	Reporting Period
	From: To:

	DATE			AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		
Employer Name	Occupation			
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
\$ 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 Candidate	Reporting Period
	From: _____ To: _____

			DATE	AMOUNT	
Full Name	MO	DAY	YEAR		
Mailing Address				\$	0.00
City	State	Zip Code (Plus 4)			
Receipt Description					

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

PAGE TOTAL
\$ 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 JOSHUA SHAPIRO	Reporting Period From: <u>4/12/2016</u> To: <u>5/16/2016</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
JOSHUA SHAPIRO	From <u>4/12/2016</u> To: <u>5/16/2016</u>

			DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR	
BURGER KING	3	17	2016	\$ 4.98
Mailing Address SOUTH SOMERSET TRAVEL PLAZA				
City SOMERSET	State PA	Zip Code (Plus 4) 15501	Description of Expenditure SNACK	
To Whom Paid SPASSO ITALIAN GRILL	1	28	2016	\$ 118.28
Mailing Address 34 S. FRONT STREET				
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19106	Description of Expenditure DINNER	
To Whom Paid COMMERCE SQUARE PARKING	1	25	2016	\$ 29.00
Mailing Address 2010 MARKET STREET				
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103	Description of Expenditure PARKING	
To Whom Paid LIBERTY PLACE GARAGE	3	13	2016	\$ 23.00
Mailing Address 1625 CHESTNUT				
City PHILADELPHIA	State PA	Zip Code (Plus 4) 15206	Description of Expenditure PARKING	
To Whom Paid THE COFFEE ROASTERS	3	11	2016	\$ 2.19
Mailing Address 5524 WALNUT STREET				
City PITTSBURGH	State PA	Zip Code (Plus 4) 15232	Description of Expenditure COFFEE	

To Whom Paid SUNOCO			MO	DAY	YEAR	
Mailing Address 14731 WEST PA TURNPIKE			3	17	2016	\$ 6.28
City BEDFORD	State PA	Zip Code (Plus 4) 15522	Description of Expenditure SNACKS			
To Whom Paid HOTEL INDIGO EAST LIBERTY			MO	DAY	YEAR	
Mailing Address 123 N. HIGHLAND AVENUE			3	30	2016	\$ 10.83
City PITTSBURGH	State PA	Zip Code (Plus 4) 15206	Description of Expenditure INTERNET			
To Whom Paid COMMERCE SQUARE PARKING			MO	DAY	YEAR	
Mailing Address 2010 MARKET STREET			3	15	2016	\$ 29.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103	Description of Expenditure PARKING			
To Whom Paid SUNOCO BEDFORD			MO	DAY	YEAR	
Mailing Address 14738 EAST PA TURNPIKE			3	31	2016	\$ 4.23
City BEDFORD	State PA	Zip Code (Plus 4) 15222	Description of Expenditure SNACKS			
To Whom Paid GOOD 2 GO SANDWHICH SHOP			MO	DAY	YEAR	
Mailing Address PHILADELPHIA INTL AIRPORT			3	30	2016	\$ 4.35
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19153	Description of Expenditure DRINK			
To Whom Paid PHILADELPHIA TAXI			MO	DAY	YEAR	
Mailing Address 700 PACKER AVENUE			3	23	2016	\$ 6.79
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19148	Description of Expenditure RIDE			

To Whom Paid AU BON PAIN			MO	DAY	YEAR	
Mailing Address 2005 MARKET STREET			2	24	2016	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103	Description of Expenditure LUNCH			
To Whom Paid HILTON GARDENS - ERIE			MO	DAY	YEAR	
Mailing Address 2225 DOWNS DRIVE			1	30	2016	
City ERIE	State PA	Zip Code (Plus 4) 16509	Description of Expenditure INTERNET			
To Whom Paid TERRACE ROOM PITTSBURGH			MO	DAY	YEAR	
Mailing Address 530 WILLIAM PENN PLACE			2	2	2016	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15219	Description of Expenditure MEAL			
To Whom Paid COMMERCE SQUARE PARKING			MO	DAY	YEAR	
Mailing Address 2010 MARKET STREET			2	3	2016	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103	Description of Expenditure PARKING			
To Whom Paid PAGANO'S MARKET			MO	DAY	YEAR	
Mailing Address 2001 MARKET STREET			2	26	2016	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103	Description of Expenditure DRINK			
To Whom Paid WHOLEFOODS MARKET			MO	DAY	YEAR	
Mailing Address 550 W. GERMANTOWN PIKE			3	7	2016	
City PLYMOUTH MEETING	State PA	Zip Code (Plus 4) 19462	Description of Expenditure LUNCH			

To Whom Paid COMMERCE SQUARE PARKING			MO	DAY	YEAR	
Mailing Address 2010 MARKET STREET			3	14	2016	\$ 8.73
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103	Description of Expenditure PARKING			
To Whom Paid IRON HILL BREWERY			MO	DAY	YEAR	
Mailing Address 8400 GERMANTOWN AVE			4	12	2016	\$ 78.10
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19118	Description of Expenditure DINNER MEETING			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 452.38

