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	2016	C0749				port		CAND	IDATE	~	co	MMITTEE		LOBI	BYIST	
Name of Filing C	Committe	e, Candida	ate or L	obbyist:		JOS	SHUA	SHA	PIRO								
Street Address:																	
City:									State:				Zip Code	: 19	046		
TYPE OF REPORT	6TH TUES		1.	2ND FRIDA PRIMARY	Y PRE	-	2.	30 DA		POST-	3.		AMENDME REPORT?	NT	Yes	No	~
(place X to the right of	6TH TUES		4. X	2ND FRIDATELECTION	Y PRI	E-	5.	30 DA		POST-	6.		TERMINAT REPORT?	ION	Yes	No	\
report type)	ANNUAL	REPORT	7.	Year 2016					IG METH CHECK (PAPER		\checkmark	DISKE	TTE
Name of Office S	L Sought by	· Candidat	te:						DATE (OF ELE	CTI	ON	District Number	Office Code	Par	ty Code	County Code
									МО	DAY	Y	'EAR	rumber	Couc			couc
									1	1	8	2016		(SEE INS	TRUCTI	ONS FOR C	CODES)
Summary of		and	МО	DAY	YEAF	2			мо	DAY	Y	/EAR	FOR	OFFIC	E USE	ONLY	
Expenditures	from:			5 17	2	016	T	0		9	19	2016					
A. Amount Bro	ught Forv	ward Fron	n Last R	eport				\$				0.00					
B. Total Moneta	ary Contr	ibutions A	and Rec	eipts (From	Sche	dul	e I)	\$			2,	,633.83					
C. Total Funds	Available	(Sum Of	Lines A	and B)				\$			2,	,633.83					
D. Total Expend	ditures (I	From Sche	edule II	I)				\$			2,	633.83					
E. Ending Cash	Balance	(Subtract	Line D	From Line	C)			\$				0.00					
F. Value Of In-	Kind Con	tributions	Receive	ed (From S	chedu	le I	I)	\$				0.00					
G. Unpaid Debt	s And Ob	ligations	(From S	Schedule IV	')			\$				0.00		,			
					AFF	·ID	AVI	T SE	CTION								
PART I - If this is	s a Comm	ittee repo	ort, trea	surer sign	here.	If th	nis is	a Car	ndidate	report,	cand	idate sig	jn here.				
I swear (or affirm) correct and comple		report, incl	uding the	attached scl	hedule	s file	ed on	paper	or by elec	tronic m	ediun	n, are to t	the best of	my know	/ledge	and belie	ef , true
Sworn to and subs	cribed befo	ore me this	i	20								Signature	e of Person	Submitt	ing Rep	ort	
	_	Signatur	re					- -					Printe	d Name			
My Commission Ex	cpires							_					Email				
		МО	D	AY	YR					Ar	ea Co	de	Daytime	Telepho	one Nu	mber	
Part II- If this is	a report	of a cand	lidate's	authorized	Comr	nitte	ee, C	andid	ate shal	l sign h	ere.						
I swear (or affirm) No 320) as amende		e best of m	ıy knowle	edge and beli	ef this	poli	itical	comm	ittee has	not viola	ted a	ny provis	ions of the	act of Ju	ine 3,1	937 (P.L	. 1333,
Sworn to and subsc		re me this										s	ignature of	Candida	te		
	day of —			_ 20				_					Printed	Name			
		Signature						-						•			
My Commission Exp	oires												Email				
	_	МО	D	AY	YR	ł		-		Area	Code	1	Day	time Te	lephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
JOSHUA SHAPIRO	From:	5/17/201	<u>6</u> To:	9/19/2016
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)			\$	2,633.83
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	2,633.83
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	2,633.83

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
	•	·			•	•	$\overline{}$	DACE TOTAL

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

PAGE TOTAL \$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 Filing Committee o	or Fining Committee or Candidate			Reporting Period From: To:				
			l		DATE			AMOUNT
Full Name of Contributor				МО	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 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 Pe			
JOSHUA SHAPIRO	From:	<u>5/17/2016</u>	То:	9/19/2016

DATE AMOUNT

Full Name of Contributing Committee SHAPIRO FOR PENNSYLVANIA			МО	DAY	YEAR	
Mailing Address 21 E ALLY ST						\$ 2,633.83
City NORRISTOWN	State PA	Zip Code (Plus 4) 19401	8	4	2016	

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

PAGE TOTAL 2,633.83

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 Candid	ate			Rep	orting Pe	riod			
				Fro	m:		То):	
					D	ATE		AN	MOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus	4)					
Employer Name		•			Occupa	tion	•	•	
Employer Mailing Address/Principal Business	Place of		City		•	State		Zip Code	e (Plus 4)
Enter Grand Total of Part C on S	chedule I, Deta	iled Sumr	mary Page,	Secti	on 3.			P	AGE TOTAL
								\$	0.00

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		Repor	ting Perio	od			
			From:			To:		
			•	D	ATE		AI	MOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	•	•		•		•	•	
Enter Grand Total of Part E o	on Schedule I. Detailed	d Summary Page	Section	4			PA	GE TOTAL
- Inc. Statia Total of Fall E	Jonedane 1, Betanet	. Jammary rage,	500.011				\$	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 Perio	od	
JOSHUA SHAPIRO	From:	<u>5/17/2016</u> To:	9/19/2016
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	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,	<u> </u>	\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candid	ate		Reporting	g Period			
			From:			То:	
				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 S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	ле Г		PAGE TOTAL
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidat	e				Re	porting F	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor	•		•			Occupa	tion		•	
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, I	In-Kind	Contributi	ons De	taile	ed				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Car	ndidate		Reportii	ng Period				
JOSHUA SHAPIRO			From	5/17	7/2016	То:	9/19/2016	
				DATE AMOU				
To Whom Paid PARKING AT AVE. OF THE ARTS			мо	DAY	YEAR			
Mailing Address 1501 SPRUCI	E ST		7	24	2016	\$	29.00	
City PHILADELPHIA	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	19102	PARKING					
To Whom Paid BEDFORD PARK			МО	DAY	YEAR			
Mailing Address 330 E JOHN	ST		7	11	2016	\$	27.00	
City BEDFORD	State PA	Zip Code (Plus 4) 15522	1	otion of Exp				
To Whom Paid THE CAPITAL GRILLE			мо	DAY	YEAR			
Mailing Address 1338-46 CHE	STNUT ST		8	3	2016	\$	54.36	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19107	Descrip MEAL	otion of Exp	penditure			
To Whom Paid TREENAUS			МО	DAY	YEAR			
Mailing Address 830 3RD AVE	ENUE		8	2	2016	\$	7.07	
City NEW YORK	State NY	Zip Code (Plus 4) 10022	Descrip COFFEE	otion of Exp	penditure			
To Whom Paid ARAMARK - WELLS FARGO CENT	TER		МО	DAY	YEAR			
Mailing Address 3601 S BROA	AD STREET		7	25	2016	\$	9.50	

Zip Code (Plus 4)

19148

Description of Expenditure

WATER

State

PΑ

City

PHILADELPHIA

To Whom Paid THE CAPITAL GRILLE	МО	DAY	YEAR					
Mailing Address 1338-46 CHESTNUT ST			6	24	2016	\$		42.91
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19107	Descrip MEAL	ription of Expenditure				
To Whom Paid TAPHOUSE 23			МО	DAY	YEAR			
Mailing Address 266 E 4TH STREET			5	19	2016	\$		47.22
City BRIDGEPORT	State PA	Zip Code (Plus 4) 19405	Descrip MEAL	ription of Expenditure				
To Whom Paid SUNOCO GAS STATION			МО	DAY	YEAR			
Mailing Address ROUTE 441 AND INDUSTRIAL LN.			5	18	2016	\$		2.19
City MIDDLETOWN	State PA	Zip Code (Plus 4) 17057	Description of Expenditure SNACK					
To Whom Paid HOTEL MONACO PITTSBURGH			МО	DAY	YEAR			
Mailing Address 620 WILLIAM PENN PLACE			5	17	2016	\$		479.11
City PITTSBURGH	State	Zip Code (Plus 4)	Description of Expenditure LODGING					
	PA	15219	1		enditure			
To Whom Paid CAFE FRESCO	PA	15219	1		YEAR			
		15219	LODGIN	NG		\$		7.16
CAFE FRESCO		15219 Zip Code (Plus 4) 17101	MO 5	DAY	YEAR 2016			7.16
CAFE FRESCO Mailing Address 215 N SECOND ST	#1 State	Zip Code (Plus 4)	MO 5 Descrip	DAY 23	YEAR 2016			7.16
CAFE FRESCO Mailing Address 215 N SECOND ST City HARRISBURG To Whom Paid	#1 State PA	Zip Code (Plus 4)	MO 5 Descrip MEAL	DAY 23 btion of Exp	YEAR 2016 penditure			7.16

							17101 13
To Whom Paid ROBEKS 96			мо	DAY	YEAR		
Mailing Address 1707 L STRE	ET NW		5	26	2016	\$	9.88
City WASHINGTON	State	Zip Code (Plus 4)	Description of Expenditure			<u> </u>	
WASHINGTON WASHINGTON	DC	20036	SMOOT		benaiture		
To Whom Paid CLEAR MACHINE CAR WASH			мо	DAY	YEAR		
Mailing Address 401 W. GLENSIDE AVE.			6	2	2016	\$	10.00
City GLENSIDE	State	Zip Code (Plus 4)	Descri				
GLENSIDE	PA	19038	Description of Expenditure CAR WASH				
To Whom Paid PA BAR INSTITUTE			МО	DAY	YEAR		
Mailing Address 100 E. PENN	SQUARE		6	7	2016	\$	349.00
City PHILADELPHIA	State	Zip Code (Plus 4)	Descrip	ption of Exp	enditure		
	PA	19107	FEE				
To Whom Paid STARBUCKS			МО	DAY	YEAR		
Mailing Address 202 6TH STREET			6	12	2016	\$	6.85
City PITTSBURGH	State	Zip Code (Plus 4)	Description of Expenditure COFFEE				
To Whom Paid BRUEGGERS	<u>'</u>	<u> </u>	МО	DAY	YEAR		
Mailing Address 411 SEVENTH	1 AVE.		6	13	2016	\$	4.70
City PITTSBURGH	State PA	Zip Code (Plus 4) 15219	Description of Expenditure COFFEE				
To Whom Paid APPLE STORE, SHADYSHIDE	<u> </u>	·	мо	DAY	YEAR		
Mailing Address 5508 WALNU	T STREET		5	16	2016	\$	1,516.14
City PITTSBURGH	State	Zip Code (Plus 4)	Description of Expenditure COMPUTER, ADAPTER				
- FILISBORGII	PA	15232					
							PAGE TOTAL
Enter Grand Total of Expendi	tures on Page 1, Re	port Cover Page, Item D	•			\$	2,633.83