

# Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

<b>Filer Identification Number :</b>		2016C0749		<b>Report Filed By :</b>		<b>CANDIDATE</b> <input checked="" type="checkbox"/>		<b>COMMITTEE</b>		<b>LOBBYIST</b>		
<b>Name of Filing Committee, Candidate or Lobbyist:</b> JOSHUA SHAPIRO												
<b>Street Address:</b>												
<b>City:</b>						<b>State:</b>		<b>Zip Code:</b> 19046				
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6. X	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2016	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>				
<b>Name of Office Sought by Candidate:</b>						<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
ATTORNEY GENERAL						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	ATT DEM			
						11	8	2016	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>					
				10	25	2016	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>		
								11	28	2016		
<b>A. Amount Brought Forward From Last Report</b>						\$ 0.00						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 1,124.91						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 1,124.91						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 1,124.91						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 0.00						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$ 0.00						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$ 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**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
JOSHUA SHAPIRO	From: <u>10/25/2016</u> To: <u>11/28/2016</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 0.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 0.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 1,124.91
<b>All Other Contributions (Part D)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 1,124.91

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

<b>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.)</b>	\$ 1,124.91
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

<b>PAGE TOTAL</b>	
\$	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.**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>	
JOSHUA SHAPIRO	<b>From:</b> <u>10/25/2016</u>	<b>To:</b> <u>11/28/2016</u>

				DATE		AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 879.24
SHAPIRO FOR PENNSYLVANIA				11	11	2016	
Mailing Address 21 E. AIRY STREET							
City	NORRISTOWN	State	PA	Zip Code (Plus 4)	19401		
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 245.67
SHAPIRO FOR PENNSYLVANIA				11	17	2016	
Mailing Address 21 E. AIRY STREET							
City	NORRISTOWN	State	PA	Zip Code (Plus 4)	19401		

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

<b>PAGE TOTAL</b>	
\$	1,124.91

**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: <span style="float: right;">To:</span>

				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.

<b>PAGE TOTAL</b>
\$ 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: <span style="float: right;">To:</span>
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			DATE	AMOUNT
Full Name	MO	DAY	YEAR	
Mailing Address				\$ 0.00
<div style="display: flex; justify-content: space-between;"> <span>City</span> <span>State</span> <span>Zip Code (Plus 4)</span> </div>				
Receipt Description				

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

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
JOSHUA SHAPIRO		From: <u>10/25/2016</u> To: <u>11/28/2016</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period		(1)	\$ 0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period		(2)	\$ 0.00
<b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>			
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: <span style="float: right;">To:</span>
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			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.						<b>PAGE TOTAL</b>  \$ 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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
JOSHUA SHAPIRO	From <u>10/25/2016</u> To: <u>11/28/2016</u>

DATE				AMOUNT		
To Whom Paid THE COURTHOUSE CAFE			MO	DAY	YEAR	\$ 13.55
Mailing Address 100 WEST AIRY STREET			7	18	2016	
City NORRISTOWN	State PA	Zip Code (Plus 4) 19401	Description of Expenditure MEAL			
To Whom Paid PARKING - AVE OF ARTS			MO	DAY	YEAR	\$ 29.00
Mailing Address 1501 SPRUCE ST			7	25	2016	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19102	Description of Expenditure PARKING			
To Whom Paid CAPITAL GRILLE			MO	DAY	YEAR	\$ 54.36
Mailing Address 1338 CHESTNUT ST.			8	3	2016	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19107	Description of Expenditure MEAL			
To Whom Paid PARC RESTAURANT			MO	DAY	YEAR	\$ 25.33
Mailing Address 227 S. 18TH STREET			8	8	2016	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19103	Description of Expenditure MEAL			
To Whom Paid UBER			MO	DAY	YEAR	\$ 106.51
Mailing Address 555 MARKET ST			8	10	2016	
City SAN FRANCISCO	State CA	Zip Code (Plus 4) 94105	Description of Expenditure TRAVEL			

To Whom Paid BRUEGGERS			MO	DAY	YEAR	\$ 7.58
Mailing Address 411 SEVENTH AVE.			8	15	2016	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15219	Description of Expenditure MEAL			
To Whom Paid JAMBA JUICE			MO	DAY	YEAR	\$ 9.34
Mailing Address 8000 ESSINGTON AVE			8	10	2016	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19153	Description of Expenditure SMOOTHIE			
To Whom Paid BRUEGGER'S			MO	DAY	YEAR	\$ 4.39
Mailing Address 531 GRANT STREET			10	16	2016	
City PITTSBURGH	State PA	Zip Code (Plus 4) 15219	Description of Expenditure MEAL			
To Whom Paid SUNOCO			MO	DAY	YEAR	\$ 6.39
Mailing Address 256 DANNER RD SUITE 3			10	13	2016	
City JIM THORPE	State PA	Zip Code (Plus 4) 18229	Description of Expenditure EYE DROPS			
To Whom Paid STARBUCKS			MO	DAY	YEAR	\$ 5.39
Mailing Address 5 MARSH RD			10	13	2016	
City ELVERSON	State PA	Zip Code (Plus 4) 19520	Description of Expenditure COFFEE			
To Whom Paid BURGER KING			MO	DAY	YEAR	\$ 5.19
Mailing Address 327 INDUSTRIAL PARK RD			7	13	2016	
City SOMERSET	State PA	Zip Code (Plus 4) 15501	Description of Expenditure LUNCH			

<b>To Whom Paid</b> SUNOCO			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> PA ROUTE 625 & PA TURNPIKE			7	14	2016	
<b>City</b> BOWMANVILLE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17507	<b>Description of Expenditure</b> SNACKS			

  

<b>To Whom Paid</b> STARBUCKS			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 120 N. MICHIGAN AVE			7	19	2016	
<b>City</b> ATLANTIC CITY	<b>State</b> NJ	<b>Zip Code (Plus 4)</b> 08401	<b>Description of Expenditure</b> BREAKFAST			

  

<b>To Whom Paid</b> YELLOW CAB COMPANY			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 1101 BEAVER AVE			10	15	2016	
<b>City</b> PITTSBURGH	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 15233	<b>Description of Expenditure</b> TRAVEL			

  

<b>To Whom Paid</b> APPLE WILLOW GROVE PARK			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 2500 WEST MORELAND RD			10	1	2016	
<b>City</b> WILLOW GROVE	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19090	<b>Description of Expenditure</b> TECHNOLOGY			

  

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 1,124.91

