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	4058	1				port ed B		CAND	CANDIDATE COMMITTEE LOBBYIST								
Name of Filing C	ommitte	e, Candida	ate or Lo	obbyist:		SHA	APIR	O, JO	SH									
Street Address:																		
City:									State:				Zip Code	e:				
TYPE OF REPORT	6TH TUES PRE-PRIN		1.	2ND FRIDA PRIMARY	Y PRE	-	2. X	30 DA PRIMA		POST-	3.		AMENDME REPORT?	NT	Yes	No	•	/
(place X to the right of	6TH TUES		4.	2ND FRIDA ELECTION	y pri	E-	5.	30 DA ELECT		POST-	6.		TERMINAT REPORT?	ΓΙΟΝ	Yes	No	•	/
report type)	ANNUAL	. REPORT	7.	Year 2004					IG METH				PAPER DISKET				TTE	
Name of Office S	L Sought by	, Candidat	:e:						DATE (OF ELE	CTI	ON	District Number	Office Code	Par	ty Code	Coun	
									МО	DAY	Y	EAR	153	STH	DEN	1	46	
REPRESENTATI	VE IN TH	ie gener	AL ASS	EMBLY					11	1	2	2004	04 (SEE INSTRUCTIONS FOR CODES)					,
Summary of	Receipts	s and	МО	DAY	YEAR	2			МО	DAY	Y	'EAR	FOF	OFFIC	E USE	ONLY		
Expenditures	from:			1 1		1	T	0	4	4	12	2004						
A. Amount Bro	ught For	ward Fron	ı Last R	eport			•	\$	•	•	•	0.00	1					
B. Total Moneta	ary Contr	ibutions <i>A</i>	And Rec	eipts (From	Sche	dule	e I)	\$			1,	.001.03						
C. Total Funds Available (Sum Of Lines A and B) \$ 1,001.03																		
D. Total Expenditures (From Schedule III) \$ 1,001.03																		
E. Ending Cash	Balance	(Subtract	Line D	From Line	C)			\$				0.00						
F. Value Of In-	Kind Con	tributions	Receiv	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	nittee repo	ort, trea	surer sign	here.	If th	nis is	a Can	ndidate r	eport,	cand	idate sig	jn here.					
I swear (or affirm) correct and comple		report, incl	uding the	attached scl	hedule	s file	d on	paper (or by elec	tronic m	ediun	n, are to t	the best of	my know	/ledge	and beli	ef , trı	ıe'
Sworn to and subs	cribed bef day of	ore me this		20								Signature	of Person	Submitt	ing Rep	ort		-
	_	Signatur	·e					-					Printe	ed Name				-
My Commission Ex	pires							_					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	Comn	nitte	ee, C	andida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende		e best of m	ıy knowle	edge and beli	ef this	poli	itical	commi	ittee has	not viola	ted a	ny provis	ions of the	act of Ju	ne 3,1	937 (P.L	. 1333	3,
Sworn to and subsc		re me this										s	ignature of	Candida	te			-
	day of —							-					Printed	Name				-
		Signature						-										_
My Commission Exp	ires												Email					
	_	МО	D	AY	YR	<u> </u>		-		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 Period		
SHAPIRO, JOSH	From:	To:	4/12/2004
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)		\$	1,001.03
All Other Contributions (Part D)		\$	0.00
TOTAL for the Reporting	Period (3)	\$	1,001.03
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 ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa		\$	1,001.03

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 Candidat	Name of Filing Committee or Candidate			Reporting Period						
		F	rom:		То	:				
				DATE			AMOUNT			
Full Name of Contributing Committee			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

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)

(EXCID	ue contributions noi	in pontical comm	iiiie	es re	por teu	III Pait	Α)	
Name of Filing Committe	e or Candidate		Rep	oorting P	Period			
			Fro	m:		To):	
		'			DATE			AMOUNT
Full Name of Contributor				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.

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	e of Filing Committee or Candidate Repo				ng Period					
SHAF	PIRO, JOSH			From:			То:	<u>4/:</u>	12/2004	
					DA	TE		АМ	OUNT	
Full N	Name of Contributing Committee				мо	DAY	YEAR			
FRIE	NDS OF JOSH SHAPIRO					2711	1	\$	39.22	
Maili	ng Address				1	10	2004			
City	ABINGTON	State	Zip Cod	e (Plus 4)	_	10	2004			
		PA	19001							
Full 1	Name of Contributing Committee				мо	DAY	YEAR			
FRIE	NDS OF JOSH SHAPIRO				1.0	5711	1 LAIR	 	861.81	
Maili	ng Address				2	11	2004]		
City	ABINGTON	State	Zip Cod	e (Plus 4)		**	2004			
		PA	19001							
Full N	Name of Contributing Committee				мо	DAY	YEAR			
FRIE	NDS OF JOSH SHAPIRO				140		ILAK	 	100.00	
Maili	ng Address				3	21	2004]		
City	ABINGTON	State	Zip Cod	e (Plus 4)	3	21	2004			
		PA	19001							
		_					Γ			

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

PAGE TOTAL \$ 1,001.03

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	ame of Filing Committee or Candidate			orting Pe	eriod			
			Fror	n:		To) :	
				D	ATE		А	MOUNT
Full Name of Contributor				МО	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	s 4)					
Employer Name		I		Occupa	tion	•		
Employer Mailing Address/Principal Place	e of Business	City		•	State		Zip Cod	ie (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Si	ummary Page	, Sectio	on 3.			P	PAGE 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		Report	ing Peri	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plus 4)					
Receipt Description	•	•			•			
Forten Commit Tatal of Boot	F an Cabadala I Batallad	I C B	C					PAGE TOTAL
Enter Grand Total of Part	e on Schedule I, Detalled	summary Page,	Section	4.			\$	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 Period							
SHAPIRO, JOSH	From:	To:	<u>4/12/2004</u>					
L. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR								
TOTAL for the Reporting Pe	eriod (1)	\$	0.00					
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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:			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 Sche Section 2.	dule II, In-Kind (Contributions Detai	iled Sum	mary Pag	je,		PAGE TOTAL	
						\$	(0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	me of Filing Committee or Candidate			Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or	Candidate		Reporti	ng Period			
SHAPIRO, JOSH			From			То:	4/12/2004
				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
US POSTAL SERVICE			1-10				
Mailing Address			1	10	2004	\$	39.22
City ABINGTON	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	19001	POSTAC				
To Whom Paid IBERTY CITY				DAY	YEAR		
Mailing Address				19	2004	\$	100.00
City PHILADELPHIA State Zip Code (Plus 4)			Descrip	tion of Exp	enditure		
	PA	19102	DONAT	ION			
To Whom Paid T-MOBILE			МО	DAY	YEAR		
Mailing Address			2	11	2004	\$	320.99
City CINCINNATI	State	Zip Code (Plus 4)	Descrip	l tion of Exp	ı enditure		
	ОН	45274	CELL PH	HONE			
To Whom Paid BALLARD SPAHR			МО	DAY	YEAR		
Mailing Address				11	2004	\$	362.85
City PHILADELPHIA State Zip Code (Plus 4)			Descrip	l tion of Exp	l enditure	<u> </u>	
	PA 19103			SE AND PR			
To Whom Paid	•	•	мо	DAY	YEAR		

Zip Code (Plus 4)

State

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

OFFICE DEPOT

Mailing Address

City

0/1/	/2025	5:57:25	ΛM

177.97

1,001.03

PAGE TOTAL

2004

\$

Description of Expenditure

OFFICE SUPPLIES