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 201	70368				port ed B		CANDI	COMMITTEE V LOBBYIST								
Name of Filing C	Committee, Candi	date or L	obbyist:	•	SHA	AFFE	R, JEF	REMY FR	ENDS	OF							
Street Address:	118 BERWYN	I RD															
City:	PITTSBURGH							State:	PA			Zip Cod	ie: 15	5237			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	-	2.	30 DA PRIMA		POST-	3.		AMENDMENT REPORT?		Yes	No	•	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	-	5.	30 DA		POST- 6.			TERMINA REPORT		Yes	No	`	
report type)	ANNUAL REPORT	7. X	Year 2019					IG METHO				PAPER			DISKE	TTE	
Name of Office S	Sought by Candid	ate:	•					DATE O	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Count Code	у
								МО	DAY	YE	AR		10000	REP		02	
								11		5	2019		(SEE IN	STRUCTIO	ONS FOR C	ODES)	
,	Receipts and	МО	DAY	YEAR	}			МО	DAY	YI	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	s from:		1 1	20	019	T	0	12	:	31	2019						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			57,0	083.14						
B. Total Moneta	ary Contributions	And Rec	eipts (From S	Sche	dule	e I)	\$				0.00						
C. Total Funds Available (Sum Of Lines A and B)								57,0	083.14								
D. Total Expenditures (From Schedule III) \$ 25.00																	
E. Ending Cash Balance (Subtract Line D From Line C)						\$			57,0	58.14							
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	hedu	le II	I)	\$				0.00						
G. Unpaid Debt	ts And Obligation	s (From S	Schedule IV)				\$		(640,0	00.00			1			
				AFF	ΊD	AVI	T SE	CTION									
PART I - If this is	s a Committee re	ort, trea	surer sign he	ere. 1	[f th	nis is	a Can	ndidate re	eport, o	candi	date sig	ın here.					
I swear (or affirm) correct and comple) that this report, in ete.	cluding the	e attached sche	edules	file	d on	paper (or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and belie	ef , tru	e,
Sworn to and subs	cribed before me th day of	is	20							S	Signature	of Perso	n Submit	ting Rep	ort		-
	— Signat	ure					-					Prin	ted Name	e			-
My Commission Ex	kpires						_					Ema	il				-
	мо	D	AY	YR					Arc	ea Cod	le	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a car	didate's	authorized C	Comm	nitte	ee, C	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and belief	f this	poli	tical	commi	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L.	1333,	
Sworn to and subsc	ribed before me this	.									s	ignature o	of Candid	ate			-
	day of						-					Printe	d Name				-
	Signature						-										-
My Commission Exp	ires											Ema					
	МО	D	AY	YR			•		Area	Code		Da	aytime T	elephon	e Numbe	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period						
SHAFFER, JEREMY FRIENDS OF	From:	1/1/201	<u>9</u> To:	12/31/2019				
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00				

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				
			From: 1			То	o:		
		<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 Fining Committee of Camulate			Rep Fro					
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	1					

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:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00

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		Rep	orting Pe	riod			
			Fror	n:		To) :	
				D	ATE		А	MOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address	Idress						\$	0.00
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupa	tion		•	
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Coo	de (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed S	ummary Page	Section .	on 3.			\$	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 Ca	ndidate		Repor	ting Perio	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	•				•	•	
Enter Grand Total of Part E on	Schedule T Detailed	l Summary Page	Section	4			ı	PAGE TOTAL
zinci. Grana rotal or rait z on	ocilculate 1, Detailet	. Janimary rage,	Section				\$	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							
SHAFFER, JEREMY FRIENDS OF	From:	<u>1/1/2019</u> To:	<u>12/31/2019</u>					
1. 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 PAR	T 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 Candidat	:e		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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Re	porting l	Period			
					Fro	om:		To:		
					•		DATE			AMOUNT
Full Name of Contributor						МО	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupa	ition		•	
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iption	of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, I	in-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Filing Committee or Candidate Reporting Period					
SHAFFER, JEREMY FRIENDS OF	From	1/1/2019	То:	12/31/2019		
		DATE		AMOUNT		

				DATE			AMOUNT	
To Whom Paid PNC Bank				DAY	YEAR			
Mailing Address 107 Federal St			1	31	2019	\$	25.00	
City Pittsburgh	State	Zip Code (Plus 4)	Descrip	otion of Exp	enditure			
	PA	15212	bank fe	ee				
Futor Consideration of Francisco								
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	25.00	

STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate			Reporting Period						
SHAFFER, JEREMY FRIENDS OF			From:		<u>1/1/2019</u> To:		<u>1</u>	12/31/2019	
					DATE			Outstanding Balance of Debt	
Name of Creditor Jeremy Shaffer				мо	DAY	YEAR			
Mailing Address 118 Berwyn Rd				12	31	2019	\$	640,000.00	
City Pittsburgh	State PA	Zip Code (Pl 15237	us 4)	Description of Debt 2018 campaign funding					
	· ·	•						PAGE TOTAL	
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							\$	640,000.00	