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		CAN	IDI	DATE	\	/ Co	MMITTEE		LOBI	BYIST	
Name of Filing C	ommitte	e, Candida	ate or Lo	obbyist:				.O, JO	SH						_			
Street Address:														Ι				
City:	_								State	:				Zip Code	e:			
TYPE OF REPORT	6TH TUES PRE-PRIN	_	1.	2ND FRIDA PRIMARY	Y PRE	-	2.	30 DA PRIMA		P	OST-	3.		AMENDME REPORT?	NT	Yes	No	\
(place X to the right of	6TH TUES		4.	2ND FRIDATELECTION	Y PRE	E-	5.	30 DA		Р	OST-	6.	x	TERMINAT REPORT?	ΓΙΟΝ	Yes	No	
report type)	ANNUAL	. REPORT	7.	Year 2004					IG ME					PAPER		⋈	DISKE	TTE
Name of Office S	aught h	. Candidai							DAT	ΕO	F ELE	<u> </u>	ON	District	Office	Par	ty Code	
Name of Office S	ougnt by	/ Candidat	e:						МО		DAY		YEAR	Number 153	Code STH	DEN	1	Code 46
REPRESENTATI	VE IN TH	HE GENER	AL ASS	EMBLY						11		2	2004		(SEE INS	STRUCTION	ONS FOR O	CODES)
Summary of	Receipts	s and	МО	DAY	YEAR	₹			МО		DAY		YEAR	FOF	OFFIC			•
Expenditures				1 1		1	Т	0		11	2	22	2004					
A. Amount Bro	ught For	ward Fron	ı Last R	eport				\$	•		•		0.00	1				
B. Total Moneta	ary Contr	ibutions A	And Rec	eipts (From	Sche	dule	e I)	\$					500.00	1				
C. Total Funds	Available	(Sum Of	Lines A	and B)				\$					500.00					
D. Total Expend	ditures (I	From Sche	dule II	I)				\$					500.00					
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	oligations	(From S	Schedule IV)			\$					0.00		,			
					AFF	·ID	AVI	T SE	CTIC	N								
PART I - If this is	s a Comm	nittee repo	ort, trea	surer sign	here.	If th	nis is	a Car	ndidat	e re	port, c	and	didate sig	gn here.				
I swear (or affirm) correct and comple		report, incl	uding the	attached scl	hedule	s file	ed on	paper	or by e	lecti	ronic me	ediu	ım, are to t	the best of	my knov	vledge	and belie	ef , true
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	0.5	_											Email				
		мо	D	AY	YR			_			Are	ea C	ode	Daytime	Teleph	one Nu	mber	
Part II- If this is	a report	of a cand	lidate's	authorized	Comn	nitte	ee, C	andid	ate sh	all s	sign he	ere.						
I swear (or affirm) No 320) as amende		ne best of m	ıy knowle	edge and beli	ef this	poli	itical	comm	ittee h	as no	ot viola	ted	any provis	ions of the	act of Ju	ıne 3,1	937 (P.L	. 1333,
Sworn to and subsc	ribed befo	re me this											s	ignature of	Candida	ite		
	day of							_										
		. .						_						Printed	Name			
My Commission Exp		Signature												Email				
	-	мо	D	AY	YR	R.		-			Area	Cod	e	Day	time Te	elephon	e Numb	 er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period		
SHAPIRO, JOSH	From:	To:	11/22/2004
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)		\$	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)	\$	500.00
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		\$	500.00

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 Candida	te		Reporting	Period			
			From:		То	•	
		•		DATE			AMOUNT
Full Name of Contributing Committee			МО	DAY	YEAR		
Mailing Address	_	_				\$	0.00
City	State	Zip Code (Plus 4)					

s

PAGE TOTAL

0.00

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

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 Committe	e or Candidate		Rep	orting P	eriod			
			Fro	m:		Тс) :	
		•			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 of Filing Committee or Cai	ndidate		Reporting	Period				
			From:			То:		
				DA	TE		Α	AMOUNT
Full Name of Contributing Comm	nittee			мо	DAY	YEAR		0.00
Mailing Address							- \$	0.00
City	State	Zip Code	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C o	on Schedule I, Detaile	d Summary 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				Repo	orting Pe	riod					
				Fron	n:		٦	То:			
					D	ATE			А	MOUNT	
Full Name of Contributor					мо	DAY	YEAR	R	\$		0.00
Mailing Address											
City	State	Zip	Code (Plus	4)							
Employer Name					Occupa	tion					
Employer Mailing Address/Principal Plac	e of Business		City			State		z	ip Cod	de (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Sເ	umm	nary Page,	Section	on 3.			\$	F	PAGE TOTA	L .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 Car	ndidate		Report	ing Perio	od			
SHAPIRO, JOSH			From:			To:		11/22/2004
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	500.00
FRIENDS OF JOSH SHAPIRO								500.00
Mailing Address								
City ABINGTON	State	Zip Code (Plus 4)			Ī	Ī	
	PA	19001						
Receipt Description REIMBUR	RSEMENT	•			•	•		
						ſ		PAGE TOTAL
Enter Grand Total of Part E on	Schedule I, Detailed	l Summary Page,	Section	4.			\$	500.00

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:	То:	11/22/2004
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER 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 Candidate	Name of Contributor			Reporting Period				
			From:			To:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	-	-	•	•	•			
Enter Grand Total of Part F on Sche	dule II, In-Kind	d Contributions Deta	iled Sum	mary Pag	ge,		PAGE TOTA	L
Section 2.						\$		0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name 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	Reporting Period		
SHAPIRO, JOSH	From	То:	11/22/2004
	DATE		AMOUNT
To Whom Paid			

					DATE			AMOUNT
To Wh	om Paid			мо	DAY	YEAR		
WEST	AVENUE GRILLE			rio		1 = Alix		
Mailin	g Address			9	4	2004	\$	52.46
City	JENKINTOWN	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	19046	FOOD E	XPENSE C	AMPAIGN	I/ VOLUNTEI	ERS
To Wh	om Paid			мо	DAY	YEAR		
ВАЈА	FRESH			МО	DAI	ILAK		
Mailin	g Address			9	8	2004	\$	25.71
City	ABINGTON	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
		PA	19001	FOOD E	XPENSE C	AMPAIGN	I/VOLUNTEE	RS
To Wh	om Paid			мо	DAY	YEAR		
THE V	ILLAGE DINER							
Mailin	g Address			9	9	2004	\$	48.44
City	GLENSIDE	State	Zip Code (Plus 4)	Description of Expenditure				
		PA	19038	FOOD EXPENSE VOLUNTEERS				
To Wh	om Paid			мо	DAY	YEAR		
IHOP				1-10		1 = Alix		
Mailin	g Address			9	10	2004	\$	28.16
City	JENKINTOWN	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	19046	FOOD E	XPENSE V	OLUNTEE	RS	
To Wh	om Paid			мо	DAY	YEAR		
FILL-A	A-BAGEL			1-10		1 = Alix		
Mailin	g Address			9	20	2004	\$	15.15
City	JENKINTOWN	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	19046	FOOD E	XPENSE V	OLUNTEE	RS	
To Wh	om Paid			мо	DAY	YEAR		
ROMA	N DELIGHT					/ / /		
Mailin	g Address			9	28	2004	\$	15.80
City	ABINGTON	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	19001	FOOD E	XPENSE V	OLUNTEE	RS	

To Whom Paid				, MO	DAY	YEAR			
FILL-A-BAGEL				МО	DAY	YEAR			
Mailing Address			10	5	2004	\$	12.94		
City JENKINTOWN	Zip Code (Plus 4)	Description of Expenditure							
		PA	19046	FOOD EXPENSE VOLUNTEERS					
To Whom Paid				МО	DAY	YEAR			
BAJA FRESH				MO	DAT	TEAR			
Mailing Address			10	12	2004	\$	15.93		
City ABINGTON		State	Zip Code (Plus 4)	Description of Expenditure FOOD EXPENSE VOLUNTEERS CAMPAIGN					
		PA	19001						
To Whom Paid			мо	DAY	YEAR				
FILL-A-BAGEL									
Mailing Address				10	15	2004	\$	11.88	
City JENKINTOWN		State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
		PA	19046	FOOD E	XPENSE V	OLUNTEE	RS CAMPA	IGN	
To Whom Paid ROMAN DELIGHT				мо	DAY	YEAR			
Mailing Address				10	19	2004	\$	51.73	
City ABINGTON		State	Zip Code (Plus 4)	Descript	l tion of Exp	l enditure			
, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		PA	19001	FOOD EXPENSE VOLUNTEERS AND CAMPAIGN STAFF					
To Whom Paid				МО	DAY	YEAR			
NICKS PIZZERIA			МО	DAT	TEAR				
Mailing Address			10	20	2004	\$	21.30		
City DRESHER State Zip Code (Plus 4) Description of Ex				tion of Exp	enditure				
		PA	19025	FOOD EXPENSE- VOLUNTEERS					
To Whom Paid				мо	DAY	YEAR			
BONNETT LANE DINE	R								
Mailing Address				10	23	2004	\$	17.20	
City		State Zip Code (Plus 4)			Description of Expenditure				
				FOOD EXPENSE CAMPA			VOLUNTE	ERS	
To Whom Paid				мо	DAY	YEAR			
BONNETT LANE DINE	R								
Mailing Address				١	1	2004	\$	74.30	
Mailing Address				11		2004			
City		State	Zip Code (Plus 4)		tion of Exp				
		State	Zip Code (Plus 4)	Descript	lion of Exp	enditure	VOLUNTE		
		State	Zip Code (Plus 4)	Descript FOOD E	lion of Exp	enditure			
City		State	Zip Code (Plus 4)	Descript	tion of Exp	enditure AMPAIGN			
City To Whom Paid		State	Zip Code (Plus 4)	Descript FOOD E	tion of Exp	enditure AMPAIGN			
To Whom Paid DUNKIN DONUTS		State	Zip Code (Plus 4) Zip Code (Plus 4)	Descript FOOD E	TION OF EXP	enditure AMPAIGN YEAR 2004	VOLUNTE	ERS	

PAGE 13

		PAGE TOTAL	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.	\$	500.00	