

Campaign Finance Report

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

Filer Identification Number : 40581		Report Filed By :		CANDIDATE <input checked="" type="checkbox"/>		COMMITTEE		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: SHAPIRO, JOSH											
Street Address:											
City:				State:			Zip Code:				
TYPE OF REPORT (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 <input checked="" type="checkbox"/>	No		
	ANNUAL REPORT	7.	Year 2004	FILING METHOD () CHECK ONE			PAPER <input checked="" type="checkbox"/>	DISKETTE			
Name of Office Sought by Candidate:					DATE OF ELECTION			District Number	Office Code	Party Code	County Code
REPRESENTATIVE IN THE GENERAL ASSEMBLY					MO	DAY	YEAR	153	STH	DEM	46
					11	2	2004	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO		MO	DAY	YEAR	FOR OFFICE USE ONLY	
		1	1	1			11	22	2004		
A. Amount Brought Forward From Last Report					\$		0.00				
B. Total Monetary Contributions And Receipts (From Schedule I)					\$		500.00				
C. Total Funds Available (Sum Of Lines A and B)					\$		500.00				
D. Total Expenditures (From Schedule III)					\$		500.00				
E. Ending Cash Balance (Subtract Line D From Line C)					\$		0.00				
F. Value Of In-Kind Contributions Received (From Schedule II)					\$		0.00				
G. Unpaid Debts And Obligations (From Schedule IV)					\$		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

Name of Filing Committee or Candidate	Reporting Period
SHAPIRO, JOSH	From: To: <u>11/22/2004</u>

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 500.00
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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 Candidate				Reporting Period			
				From:		To:	
				DATE	AMOUNT		
Full Name of Contributing Committee				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					

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

PAGE TOTAL	
\$	0.00

Name of Filing Committee or Candidate	Reporting Period
	From: To:

				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
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 Period	
	From:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$	0.00
Mailing Address							
City	State	Zip Code (Plus 4)					

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

PAGE TOTAL
\$ 0.00

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: To:

			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.

PAGE TOTAL
\$ 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 SHAPIRO, JOSH	Reporting Period From: To: <u>11/22/2004</u>
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				DATE	AMOUNT		
Full Name FRIENDS OF JOSH SHAPIRO				MO	DAY	YEAR	\$ 500.00
Mailing Address PO BOX 162							
City ABINGTON	State PA	Zip Code (Plus 4) 19001					
Receipt Description REIMBURSEMENT							

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

PAGE TOTAL
\$ 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:	To: <u>11/22/2004</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period		(1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period		(2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
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: To:
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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.						PAGE TOTAL \$ 0.00

SCHEDULE II
PART G
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OVER \$250.00

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
				DATE		AMOUNT	
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

Name of Filing Committee or Candidate	Reporting Period
SHAPIRO, JOSH	From To: <u>11/22/2004</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
WEST AVENUE GRILLE				
Mailing Address 718 WEST AVE.	9	4	2004	\$ 52.46
City JENKINTOWN	State PA	Zip Code (Plus 4) 19046	Description of Expenditure FOOD EXPENSE CAMPAIGN/ VOLUNTEERS	
To Whom Paid	MO	DAY	YEAR	
BAJA FRESH				
Mailing Address 1437 OLD YORK ROAD	9	8	2004	\$ 25.71
City ABINGTON	State PA	Zip Code (Plus 4) 19001	Description of Expenditure FOOD EXPENSE CAMPAIGN/VOLUNTEERS	
To Whom Paid	MO	DAY	YEAR	
THE VILLAGE DINER				
Mailing Address 299 KESWICK AVENUE	9	9	2004	\$ 48.44
City GLENSIDE	State PA	Zip Code (Plus 4) 19038	Description of Expenditure FOOD EXPENSE VOLUNTEERS	
To Whom Paid	MO	DAY	YEAR	
IHOP				
Mailing Address 481 OLD YORK ROAD	9	10	2004	\$ 28.16
City JENKINTOWN	State PA	Zip Code (Plus 4) 19046	Description of Expenditure FOOD EXPENSE VOLUNTEERS	
To Whom Paid	MO	DAY	YEAR	
FILL-A-BAGEL				
Mailing Address 424 OLD YORK ROAD	9	20	2004	\$ 15.15
City JENKINTOWN	State PA	Zip Code (Plus 4) 19046	Description of Expenditure FOOD EXPENSE VOLUNTEERS	
To Whom Paid	MO	DAY	YEAR	
ROMAN DELIGHT				
Mailing Address 1418 OLD YORK ROAD	9	28	2004	\$ 15.80
City ABINGTON	State PA	Zip Code (Plus 4) 19001	Description of Expenditure FOOD EXPENSE VOLUNTEERS	

To Whom Paid			MO	DAY	YEAR	\$ 12.94
FILL-A-BAGEL						
Mailing Address 424 OLD YORK ROAD			10	5	2004	
City JENKINTOWN	State PA	Zip Code (Plus 4) 19046	Description of Expenditure FOOD EXPENSE VOLUNTEERS			

To Whom Paid			MO	DAY	YEAR	\$ 15.93
BAJA FRESH						
Mailing Address 1437 OLD YORK ROAD			10	12	2004	
City ABINGTON	State PA	Zip Code (Plus 4) 19001	Description of Expenditure FOOD EXPENSE VOLUNTEERS CAMPAIGN			

To Whom Paid			MO	DAY	YEAR	\$ 11.88
FILL-A-BAGEL						
Mailing Address 424 OLD YORK RD.			10	15	2004	
City JENKINTOWN	State PA	Zip Code (Plus 4) 19046	Description of Expenditure FOOD EXPENSE VOLUNTEERS CAMPAIGN			

To Whom Paid			MO	DAY	YEAR	\$ 51.73
ROMAN DELIGHT						
Mailing Address 1418 OLD YORK RD			10	19	2004	
City ABINGTON	State PA	Zip Code (Plus 4) 19001	Description of Expenditure FOOD EXPENSE VOLUNTEERS AND CAMPAIGN STAFF			

To Whom Paid			MO	DAY	YEAR	\$ 21.30
NICKS PIZZERIA						
Mailing Address			10	20	2004	
City DRESHER	State PA	Zip Code (Plus 4) 19025	Description of Expenditure FOOD EXPENSE- VOLUNTEERS			

To Whom Paid			MO	DAY	YEAR	\$ 17.20
BONNETT LANE DINER						
Mailing Address			10	23	2004	
City	State	Zip Code (Plus 4)	Description of Expenditure FOOD EXPENSE CAMPAIGN VOLUNTEERS			

To Whom Paid			MO	DAY	YEAR	\$ 74.30
BONNETT LANE DINER						
Mailing Address			11	1	2004	
City	State	Zip Code (Plus 4)	Description of Expenditure FOOD EXPENSE CAMPAIGN VOLUNTEERS			

To Whom Paid			MO	DAY	YEAR	\$ 109.00
DUNKIN DONUTS						
Mailing Address			11	2	2004	
City ABINGTON	State PA	Zip Code (Plus 4) 19001	Description of Expenditure FOOD EXPENSE CAMPAIGN VOLUNTEERS			

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

PAGE TOTAL

\$ 500.00

