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	6017	0				port ed B		CANDI	DATE	✓	cc	MMITTEE		LOBE	BYIST		
Name of Filing C	ommitte	e, Candida	ate or Lo	obbyist:		SHA	APIR	0, 30	SH									_
Street Address:																		
City:									State:				Zip Code	e:				
TYPE OF REPORT	6TH TUES		1.	2ND FRIDA PRIMARY	Y PRE	-	2. X	30 DA PRIMA		POST-	3.		AMENDME REPORT?	ENT	Yes	No	٧	
(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 2006					NG METH				PAPER		\checkmark	DISKE	TTE	
Name of Office S	Cought by	, Candidat	te:						DATE C	F ELE	CTION		District Number	Office Code	Par	ty Code	County	,
									МО	DAY	YEA	R	153	STH	DEN	1	46	_
REPRESENTATI	VE IN TH	ie gener	AL ASS	EMBLY					11		7	2006	┢──	(SEE INS	TRUCTIO	ONS FOR	CODES)	_
Summary of	Receipts	s and	МО	DAY	YEAF	2			МО	DAY	YEA	ıR	FOF	OFFIC	E USE	ONLY		
Expenditures	from:			1 1		1	Т	0	5	5	1	2006						
A. Amount Bro	ught Forv	ward Fron	1 Last R	eport				\$	•	•	•	0.00						
B. Total Moneta	ary Contr	ibutions <i>F</i>	and Rec	eipts (From	Sche	dule	e I)	\$			52	25.52						
C. Total Funds	Available	(Sum Of	Lines A	and B)				\$			52	5.52						
D. Total Expend	ditures (I	From Sche	dule II	I)				\$			52	5.52						
E. Ending Cash	Balance	(Subtract	Line D	From Line	C)			\$				0.00						
F. Value Of In-	Kind Con	tributions	Receive	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	a Comm	nittee repo	ort, trea	surer sign	here.	If th	nis is	a Can	ndidate r	eport, o	candida	ite sig	gn here.					
I swear (or affirm) correct and comple		report, incl	uding the	attached scl	hedule	s file	ed on	paper (or by elect	tronic m	edium, a	are to 1	the best of	my know	/ledge	and beli	ef , true	1,
Sworn to and subs	cribed bef	ore me this		20							Sig	nature	e of Person	Submitt	ing Rep	ort		,
	_	Signatur	re					- -					Printe	ed Name				٠
My Commission Ex	pires							_					Email					
		мо	D/	AY	YR					Are	ea Code		Daytime	Teleph	one Nu	mber		╛
Part II- If this is	a report	of a cand	idate's	authorized	Comr	nitte	ee, C	andida	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende		ne best of m	ıy knowle	edge and beli	ef this	poli	itical	comm	ittee has r	not viola	ted any	provis	ions of the	act of Ju	ne 3,1	937 (P.L	. 1333,	ı
Sworn to and subsc	ribed befo day of	re me this		20								s	ignature of	Candida	te			
	——							_					Printed	Name				.
	:	Signature						-										.
My Commission Exp	ires												Email					
	_	мо	D	AY	YR	t		-		Area	Code		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:	То:	5/1/2006
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor			
TOTAL for the Reporting	g 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	g Period (2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)			
Contributions Received From Political Committees (Part C)		\$	525.52
All Other Contributions (Part D)		\$	0.00
TOTAL for the Reporting	g Period (3)	\$	525.52
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)			
TOTAL for the Reporting	g 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		\$	525.52

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 C	andidate	R	eporting	Period			
		Fi	rom:		То	:	
		•		DATE			AMOUNT
Full Name of Contributing Comm	ittee		МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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

PART B 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.

Name of Filing Commi	ttee or Candidate	1	Reporting I	Period			
		,	From:		Te	o:	
		L		DATE			AMOUNT
Full Name of Contributo	r		МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)		1	Ī	I	

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 Candidate			Reporting	Period			
SHAPIRO, JOSH			From:			То:	<u>5/1/2006</u>
				DA	TE		AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR	
FRIENDS OF JOSH SHAPIRO							\$ 395.38
Mailing Address PO BOX 162				1	6	2006	
City ABINGTON	State	Zip Code	e (Plus 4)] -		2000	
	PA	19001					
Full Name of Contributing Committee				мо	DAY	YEAR	
FRIENDS OF JOSH SHAPIRO				1.10	JA!	ILAK	\$ 130.1 ²
Mailing Address PO BOX 162				1	25	2006	
City ABINGTON	State	Zip Code	e (Plus 4)	1	23	2000	
	PA	19001					

 $\label{lem:constraint} \textbf{Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.}$

PAGE TOTAL \$ 525.52

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			Rep	orting Pe	riod			
			Fron	n:		To):	
				D	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupa	tion			
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary 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 Candidate		Report	ing Peri	od			
			From:			То:		
				C	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (F	Plus 4)					
Receipt Description	.	.		•	•	•		
Enton Cuand Total of Doub	E on Cohodulo I. Dotailed	Summany Dazz	Costis :-	4				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	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:	То:	<u>5/1/2006</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	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 Car	ndidate		Reportin	g 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 o	n Schedule II, In-Ki	nd Contributions Detai	led Sun	mary Pa	ge,		PAGE TOTAL	•
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

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period		
SHAPIRO, JOSH	From	To:	5/1/2006
	DATE		AMOUNT

				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
STAPLES			1410		ILAK		
Mailing Address 1025 N. EAS	TON PIKE		1	15	2006	\$	130.14
City WILLOW GROVE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	19090	OFFICE	SUPPLIES			
To Whom Paid			мо	DAY	YEAR		
FADO IRISH PUB & RESTAURAN	T		1-10		ILAK		
Mailing Address 1500 LOCUS	T STREET		1	3	2006	\$	60.46
City PHILADELPHIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA	19102	MEAL E	XPENSE			
To Whom Paid			мо	DAY	YEAR		
BONEFISH GRILL			1410		ILAK		
Mailing Address 1015 EASTO	N RD.		12	19	2005	\$	334.92
City WILLOW GROVE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	19090	MEAL E	XPENSE			
							PAGE TOTAL
Enter Grand Total of Expendi	tures on Page 1, Re	port Cover Page, Item D).			\$	525.52
						I	