Campaign Finance Report

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

				-		-			,						
Filer Identificat Number :	ion 6017	'0			Repor Filed E		CANDI	DATE	\checkmark	cc	OMMITTEE		LOBE	BYIST	
Name of Filing	Committee, Candid	ate or L	obbyist:		SHAPIR	0, JO	SH								
Street Address:	Street Address:														
City:							State:	Zip Code:							
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRID PRIMARY	DAY PRE	- 2.	30 DA PRIMA		POST-	3. X		AMENDMI REPORT?	ENT	Yes	No	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRID		E- 5.	30 DA ELECT		POST- 6.			TERMINATION REPORT?		Yes	No	\checkmark
report type)	ANNUAL REPORT	7.	Year 200	6			FILING METHOD () CHECK ONE								TTE
Name of Office	Sought by Candida	te:				•	DATE O	F ELE	CTION		District Number	Office Code	Par	ty Code	County Code
	IVE IN THE GENER		SEMPLY				мо	DAY	YEAI	R	153	STH	DEN	1	46
REPRESENTAL	IVE IN THE GENER	KAL ASS	DEMIDLY				11		7 2	2006		(SEE INS	STRUCTIO	ONS FOR (ODES)
	Receipts and	мо	DAY	YEAF	2		мо	DAY	YEA	R	FOI	R OFFIC	E USE	ONLY	
Expenditures	s from:		1	1	1 T	0	6		5 2	2006					
A. Amount Bro	ought Forward From	n Last R	leport		-	\$			(0.00					
B. Total Monet	ary Contributions	And Rec	eipts (Fro	om Sche	edule I)	\$			34	1.79					
C. Total Funds Available (Sum Of Lines A and B)						\$			34	1.79					
D. Total Expen	ditures (From Sch	edule II	I)			\$			341	L.79					
E. Ending Cash	n Balance (Subtrac	t Line D	From Line	e C)		\$			C	0.00	-				
F. Value Of In-	Kind Contribution	s Receiv	ed (From	Schedu	le II)	\$			0	0.00					
G. Unpaid Deb	ts And Obligations	(From	Schedule 1	(V)		\$			(0.00					
				AFF	IDAVI	T SE	CTION								
	s a Committee rep		_								-	_			
I swear (or affirm correct and compl) that this report, inc lete.	luding th	e attached s	schedule	s filed on	paper	or by elect	ronic m	edium, a	re to f	the best of	my knov	vledge	and beli	ef , true
Sworn to and sub	scribed before me this day of	5	20						Sigr	nature	e of Person	Submitt	ing Rep	ort	
						_					Print	ed Name			
My Commission E	Signatu xpires	re									Email				
	мо	D	AY	YR		Area Code Daytime Telephone Number									
Part II- If this is	a report of a can	didate's	authorize	d Comr	nittee, C	Candid	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amend) that to the best of r ed.	ny knowl	edge and be	elief this	s political	comm	ittee has n	ot viola	ted any p	provis	ions of the	act of Ju	ine 3,19	937 (P.L	. 1333,
Sworn to and subse	cribed before me this									s	ignature of	f Candida	ite		
	day of 					_					Printed	l Name			
	Signature					_									
My Commission Ex	pires										Email				
	мо	D	AY	YF	ł	-		Area	Code		Da	ytime Te	elephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** From: To: SHAPIRO, JOSH 6/5/2006 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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)** 341.79 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 341.79 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 341.79 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4	4)							
								PAGE TOTAL		
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.								0.00		

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. (Exclude contributions from political committees reported in Part A)										
Name of Filing Committee or Candidate Reporting Period										
			From: To			D:				
					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 Candidate			Reporting	g Period				
SHAPIRO, JOSH			From:			То:	<u>(</u>	<u>6/5/2006</u>
				DA	TE		AI	MOUNT
Full Name of Contributing Committee FRIENDS OF JOSH SHAPIRO				мо	DAY	YEAR	\$	296.79
Mailing Address PO BOX 162				5	2	2006		
City ABINGTON	State	Zip Code	e (Plus 4)					
	РА	19001						
				мо	DAY	YEAR		
FRIENDS OF JOSH SHAPIRO							\$	45.00
Mailing Address PO BOX 162		1		5	23	2006		
City ABINGTON	State	Zip Code	e (Plus 4)					
	РА	19001						
								PAGE TOTAL
Enter Grand Total of Part C on Schee	lule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	341.79

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:				m:			То:			
				D	ATE		АМ	IOUNT		
Full Name of Contributor				мо	DAY	YEAR	\$	0.00		
Mailing Address										
City	State	Zip Code (Pl	ıs 4)							
Employer Name				Occupation						
Employer Mailing Address/Principal Place of Business City				•	State		Zip Code	e (Plus 4)		
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Sectio							P#	AGE 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			Reporting Period						
			From:			То:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (Plus 4)						
Receipt Description	·	•					•		
		_						PAGE TO	TAL
Enter Grand Total of Part E on Sched	ule 1, Detailed Sumn	nary 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>6/5/2006</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	\$	0.00	
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	ſF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, 1		\$	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				DAY	YEAR			
Mailing Address		_				7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:			1					
Enter Grand Total of Part F on Sched Section 2.	ailed Summary Page,			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:		То:				
					DATE		AMOUNT			
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address			-				\$ 0.00			
City	State	Zip Code(Plus 4)								
Employer of Contributor				Occupa	ation					
Employer Mailing Address/Principal Place of Business City				e Zip	Code(Plus 4)	Descri	ption 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			Reporti	ng Period			
SHAPIRO, JOSH						То:	<u>6/5/2006</u>
				DATE			AMOUNT
To Whom Paid				DAY	YEAR		
CINGULAR WIRELESS			мо				
Mailing Address PO BOX 17542				2	2006	\$	296.79
City BALTIMORE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	MD	21297	PHONE				
To Whom Paid			мо	DAY	YEAR		
LUKOIL							
Mailing Address OLD YORK RD			5	17	2006	\$	45.00
City ABINGTON	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
PA 19001				PENSE			
							PAGE TOTAL
Enter Grand Total of Expenditures of	on Page 1, Report C	over Page, Item I).			\$	341.79