Commonwealth of Pennsylvania

CAMPAIGN FINANCE REPORT

PAGE 1 OF (COVER PAGE)

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

	→ 2003	コフリー	Report Filed By:	CANDID	ATE	COMMITTEE	X LOBBY	IST
Name of Filing Comm	ittee, Candidate or Lobby	rist:	-					
Street Address: C	Care-mo 525 PM	SKOW Z	Traisu	791-		.,		
City			<u> </u>	Stoto:		Zip Code:		
ブ.€	enkintow:)		P.		19046		
TYPE OF	6TH TUESDAY 1.	2ND FEIDA	Contract of the contract of	30 DAY POST PRIMA	RY 3.	AMENDMENT REPORT?	YES	NO
REPORT	BTH TUESDAY 4.	-7ND FRIE		30 DÂY POST ELECT	ON S	TERMINATION	-YES	NO
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report type	REPORT		<u> </u>	CHECK	ELECTION	District Offic	The state of	County
Name of Office Soug		1		ு ஆர்க்கிரம் இரும்பட்டுள்ளது. இது இருந்து இருந்து இருந்து இருந்து இருந்து இருந்து இருந்து இருந்து இருந்து இருந்	YEAR	Number Code	Code	Code
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Summary of R	eceipts	10 35 3c		MO. DAY	YEAR O	55	2011	
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	Contributions and Recallable (Sum of Lines		\$	13,689.			co [i	1
	res (From Schedule II			<u>ルロテラント</u> 40ぎ ぐるう	- 7		\rightarrow	ì
	lance (Subtract Line D		\$	199,798			ე ე	'
	nd Contributions Rece		dule II) \$	1777,770.		Í	ল	0
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SCHEDULE 1

PAGE 2 OF ______

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

	I'Dine Resind
Name of Filing Committee or Candidate	Reporting Period
/ /	From 10/25/11 To 11/28/11
Friends of Josh Shapino	7012 132
111010	· · · · · · · · · · · · · · · · · · ·

TOTAL for the Reporting Period (1) \$ -0 -	1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONT	RIBL	TOR
		\$	-0 -

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)		
Contributions Received from Political Committees (Part A)	\$	-0-
All Other Contributions (Part B)	\$	10000
TOTAL for the Reporting Period	(2) \$	100.00

SE CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$ 450 00
All Other Contributions (Part D)	\$ 5,000.00
TOTAL for the Reporting Period	(3) \$ 13.570.00

4. OTHER RECEIPTS - REFUNDS INTEREST EARNED, RETURNED CHECK	S, ETC). (FI	ROM PAR	r E
TOTAL for the Reporting Period		\$		5

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 Page 1, Report Cover Page, Item B.)	\$ 13,688 38

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 F	Period	11 To 11/28/11
Friends of Josh SM	apiro		<u></u>		V/V J /	
			Tr. 17 (829)	DATE	VEAD 1	AMOUNT
Full Name of Contributing Committee	. —		MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
						J.
City	State	Zip Code (Plus 4) —	∴Mo∴	DAY	YEAR	\$
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee			: MO:	DAY	YEAR !	\$
Mailing Address		Section 1997	MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	=MO.	DAY	YEAR	\$
			.″-Mo.	DAY	YEAR	
Full Name of Contributing Committee			1			\$
Mailing Address	 ;		Mo.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee			· Mo	DAY	YEAR	\$
Mailing Address		·	MO.	DAY	YEAR	\$
		Zip Code (Plus 4)	***	DAY	YEAR	
City	State	-	MO.			\$
Full Name of Contributing Committee			MO	DAY	YEAR	\$
Mailing Address			MO	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO	DAY	YEAR	\$
Full Name of Contributing Committee			MO	DAY	YEAR	\$
Mailing Address			MO	DAY	YEAR	\$
Ćity	State	Zip Code (Plus 4)	мо	DAY	YEAR	s
						PAGE TOTAL
Enter Grand Total of Part A on Se	chedule i	, Detailed Summa	ary Pag	je, Sectio	on 2.	\$ ^(. <
DSEB-502 (7-99)						

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	-, ,		Report	ing Period	- uhal
Friends of Josh	Shapino		Fron	n 10/25/11	_ To 11/28/11
			DA		AMOUNT
uil Name of Contributor			MO: Di	YUU WYEAR	\$
Mailing Address	acq est	do.	MO. D	YEAR	\$
THE RESERVE OF THE PARTY OF THE	State Zip	Code (Plus 4)	MO. D	YEAR	<u> </u>
Blassing D	REP BOX	Z Z -			\$
Full Name of Contributor Donald Kirch ho Mailing Address 2212 1+114horpe City Abinator	Aer		1) /s	YEAR	\$ 100.00
Poval (KIrch No Mailing Address) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1-1-		Mo. D.	AY YEAR	\$
2212 TTTTPHOY PE	State Zig	Code (Plus 4)	D. COM	AY YEAR	
Abinaton	BA 190	00]			\$
Full Name of Contributor			MO. D	AY YEAR	\$
Mailing Address		<u></u> .	MO. D	AY YEAR	\$
	State Zip	Code (Plus 4)		AYEE LYEAR	
City	State		MO. D	AT TEAN	\$
Full Name of Contributor			MO O	AY YEAR	\$
Mailing Address		 -	MO. D	AY YEAR	<u> </u>
					<u> </u>
City	State Zij	p Code (Plus 4) —	т мо ∵ т т	AY YEAR	\$
Full Name of Contributor			™MO E	AY	\$
No. Com Address			MO- C	AY YEAR	
Mailing Address					\$
City	State Zi	p Code (Plus 4)	MO. C	YAY YEAR	\$
Full Name of Contributor			MO:	AY YEAR	
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Mailing Address			110.		\$
City	State Zi	p Code (Plus 4)	MO	YEAR	\$
5 th New of Contributor			MO	AY YEAR	<u></u>
Full Name of Contributor			:::MO; ::' :::'!	DAY YEAR	\$
Mailing Address			- RACO.	TEAR	\$
City	State Z	p Code (Plus 4)	MO:	YEAR	\$
T. U. Name of Constituto			MO.	DAY YEAR	
Full Name of Contributor			region (a lay a lay		\$
Mailing Address			MO.	DAY	\$
City	State Z	ip Code (Plus 4)	Mo.	DAY YEAR	\$
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Enter Grand Total of Part B on	Schedule I, Deta	aneo Summa	ny rage, se	SOLIOII Z.	7 700 000

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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 over \$250.00 in the reporting period.

Name of Filing Committee or Candidate Friends of Josh Shapino		From	0/25/1	1 To 11/28/11
11/4/102 01 003/1 2/00/21	-	DATE		AMOUNT
-ull Name of Contributing Committee 1 0 1	MO.	DAY		\$ 2500.00
Full Name of Contributing Committee Friends of Math Smith Mailing Address	Mo.		VEAR	2000
PO BOX 13445				\$
POBOX 13445 City PIHSDUIGH PA 15243-	MO.	DAY	YEAR	\$
	мо	DAY	YEAR	\$ 1500.00
Full Name of Contributing Committee Timonal Knox LLP PA Mailing Addrest 400 May 19n1 Drive POBOX 7544 State J Zip Code (Plus	. Mo		YEAR	\$
400 Mayland Drive 80100x 7544	4)	TVANZ"	YEAR	-
Ft. Washington PA 19034 -				\$
		. DAY.	YEAR /	\$ 500.00
Full Name of Contributing Committee Craeniae fartners State PAC Mailing Address	Mo		YEAR	\$
P.D. BOX 11972 State Zip Code (Plus	4) in MC	. DAY	YEAR	
Harisburg PA 17108 - 1	972			\$
Full Name of Contributing Committee		DAY	YEAR	\$
Mailing Address	- Mc	DAY	YEAR	\$
City State Zip Code (Plus	4) Mic) DAY	YEAR	\$
	Mo	DAY	YEAR	
Full Name of Contributing Committee				\$
Mailing Address	· MC). DAY	YEAR	\$
City State Zip Code (Plus	(4) M(). DAY	YEAR	\$
		DAY	YEAR	<u> </u>
Full Name of Contributing Committee				\$
Mailing Address	_ MA	DAY	YEAR	\$
City State Zip Code (Plus	s 4) M	DAY	YEAR	\$
_		o. DAY	YEAR	1
Full Name of Contributing Committee				\$
Mailing Address	E ₩			\$
City State Zip Code (Plu	s 4) 📉	O. DAY	YEAR	\$
Full Name of Contributing Committee	::dw	D. DAY	YEAR	\$
Mailing Address		O. DAY	YEAR	\$
I Sesta 1 - Zio Code (Plu	s 4)	O DAY	YEAR	· · · · · · · · · · · · · · · · · · ·
City State Zip Code (Plu		DATE	1500	*
				PAGE TOTAL
Enter Grand Total of Part C on Schedule I, Detailed Su	mmary Pa	ge, Sectio	on 3.	\$ 4500.00

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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	From 10/25///	1 To 11/28/11
Friends of Josh Shapino		
	DATE MO A DAY YEAR	AMOUNT
Full Name of Contributor Eric Kretschman Mailing Address	El Cott Vivi	\$ 5000.00
Mailing Address	MO. DAY YEAR	\$
City O State Zip Code (Plus 4)	MO. DAY YEAR	
Mailing Address 1428 SCrope Rd, City Rydal PA 19046		\$
Constant Name	Occupation (ivactor
OVMOUS CAPITAL GROUP Employer Mailing Address/Principal Place of Business	1 Managing D	
485 Madison Avene, 18th Floor, New York A	N 10002-5861	· ·
Full Name of Contributor Robert S. Tay 10 M	MO: DAY YEAR	\$ 1000.00
Kobert S. Tay 10 -	MO. DAY YEAR	\$
Mailing Address 220		**
Sole bury State Zip Code (Plus 4)	MO. DAY YEAR	\$
Employer Name	Occupation	· · · · · · · · · · · · · · · · · · ·
The Comeron Companies Employer Mailing Address/Principal Place of Business	Chairman and	d CEO
Employer Mailing Address/Principal Place of Business 5049 Swamp Road, Fourtamville, PA	18923	
Full Name of Contributor	MO. DAY YEAR	c .
Milton Schneider	// / // MO. DAY YEAR	\$ 1000. DO
Meiling Address	MO. DAY YEAR	\$
345 Fishers Rd State Zip Code (Plus 4)	MO DAY YEAR	\$
Bryn Mawr M. 19010 -	Occupation	
Employer Name	Developer	•
Employer Mailing Address/Principal Place of Business	1	1011152
580 W. Germantown Pike, Plymas	MO DAY YEAR	
Full Name of Contributor	11 15 11	\$ 1000.00
LOUIS Caputo Meiling Address	MO. DAY YEAR	\$
	MO DAY YEAR	
Venetia PA 15367		\$
Employer remine	Occupation COOM	
CADUTO + CAPUTO PC Employer Mailing Address/Principal Place of Business	1 Attorney	
213 SMHHFIED St., 303 PH+ BIDG PH+Sbur	Jah 199 15997	
Full Name of Contributor	MO DAY YEAR	\$
Mailing Address	MO. DAY YEAR	\$
		•
City State Zip Code (Plus 4)	MO. YEAR	\$
Employer Name	Occupation	
Employer Mailing Address/Principal Place of Business		
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Enter Grand Total of Part D on Schedule I, Detailed Summa	,	\$ 8000 CC
DSEB-502 (7-99)		

Reporting Period

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.

re of Filing Committee or Candidate Friends of 509	h Shapir	<i>U</i>	From	10/25	/11 to 11/28/1
I Name				· · · · · · · · · · · · · · · · · · ·	
Name D Bank					
PO BOX 1377	Te	Zip Code (Plus 4)	MO. DAY	YEAR	Amount
PO BOX 1377 ty Lewistown	State	04243	10 31	//	\$ 88.28
sceipt Description					
INTPRE 3					
ailing Address			<u> </u>		
	T Co-co	Zip Code (Plus 4)	MO. DA	YEAR	Amount
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Full Name					
Mailing Address					
City	State	Zip Code (Plus 4)	MO. D	YEAR	Amount \$
Receipt Description					7
meaning model (private					PAGE TOTAL

SCHEDULE !!

PAGE 8 OF 12

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 Friends of Josh Shapino	Reporting Peri	od 25/11	то <u>///28///</u>
TOTAL for the Reporting Period		ESS PE	R CONTRIBUTOR
2 IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$2 TOTAL for the Reporting Period			- 0 -
3 IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FR) \$	- C -
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, Report Cover Page, Item F.)		\$	-C-

SCHEDULE II PART F

IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate	101	' \	Reporting	g Period	1 то 11/28/1
Friends of Jos	1 Shap	10		·····	
			DATE MO. DAY		AMOUNT
Full Name of Contributor			MONTH MAKE	1277	\$
Mailing Address			MO. DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO. DAY	YEAR	\$
Description of Contribution:					
Full Name of Contributor	<u> </u>		MO. DAY	YEAR	
					\$
Mailing Address			Mo. DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO. DAY	YEAR	\$
Description of Contribution:			<u> </u>	11	
Full Name of Contributor			MO. DAY	YEAR	
Full Name of Contributor					\$
Mailing Address			MG. DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO. DAY	YEAR'	\$
Description of Contribution:					
City Name of Consciouses		· · · · · · · · · · · · · · · · · · ·	MO. DAY	YEAR I	
Full Name of Contributor				1.00	\$
Mailing Address			MO. DAY	/ YEAR	\$
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Mailing Address			MO: DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO. DAY	YEAR	\$
Description of Contribution:					
Full Name of Contributor	<u> </u>		MO. DA	Y	
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Mailing Address			MO DA	YEAR	\$
City	State	Zip Code (Plus 4)	MOVE PDA	Y YEAR	\$
Description of Contribution:	11_		<u> </u>		
	<u> </u>			_	PAGE TOTAL
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<u> </u>				Ļ	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate Friends of Josi	4 51	hapiro	l n	From	0/25/	/11 to 11/28/11
				DATE		AMOUNT
ull Name of Contributor			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY.	YEAR	\$
sity	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Employer of Contributor			Occupati	on		
·			Decaries	ion of Cont	ribution	
Employer Mailing Address/Principal Place of Business	i		Descript	ion or com		
Full Name of Contributor			МО.	- DAY	YEAR	\$
Mailing Address	<u>.</u>	· · · · · · · · · · · · · · · · · · ·	MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	· MO.	DAY	YEAR	\$
Employer of Contributor			Occupat	ion		
Employer Mailing Address/Principal Place of Business	3		Descript	ion of Con	tribution	
Full Name of Contributor			MG.	DAY	YEAR :	\$
Mailing Address			MIO	DAY	YEAR	
	[÷, -, -]	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
City	State	Zip Code (Flus 4)	Jaro.			\$
Employer of Contributor			Occupat	ion		
Employer Mailing Address/Principal Place of Busines:	5		Descrip	tion of Con	tribution	
Full Name of Contributor		MO	DAY	YEAR	\$	
Mailing Address	· -		MD.:	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	Mo.	DAY	YEAR	\$
Employer of Contributor			Occupat	ion	1	
Employer Mailing Address/Principal Place of Busines	s	<u></u>	Descrip	tion of Cor	ntribution	
Full Name of Contributor			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MG.	DAY	YEAR	
Employer of Contributor	<u> </u>	_	Occupa	tion	<u></u>	\$
					adriburt:	
Employer Mailing Address/Principal Place of Busines			Descrip	ition of Co		
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DSEB-502 (7-99)

SCHEDULE III

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period /
Friends of Josh Shapind	From 10/25/11 To 11/28/11
To Whom Paid	MO. DAY YEAR Amount 10 35)1 \$ 250,000,00
Shapiro / Richards	Description of Expenditure
Mailing Address 1:0. Box 24 State 7 in Code (Plus 4)	CONTIDITION
City A State Zip Code (Plus 4)	
Abinaton PA 19001	Amount
To Whom Paid Shapiro/Richards	10 31 11 \$150,000.00
	Description, of Expenditure
1 State Zin Code (Plus 4)	Contribution
City Ab/ 1400 State Zip Code (Plus 4)	
To Whom Paid () TD Rank	MO. DAY YEAR Amount 10 26 // \$ 15.00
	10 20 11 \$ 15.00 Description of Expenditure
PO 1371	bank fee
City State Zip Code (Plus 4)	
	MO. DAY YEAR Amount
TD Bank	MO. DAY YEAR Amount \$5350.00 Description of Expenditure
Mailing Address	9ift Cards for election day
PO POX 1377 City State Zip Code (Plus 4)	
bewistown ME 04243 137	
To Whom Paid CCD Debit Fees	MD. DAY YEAR Amount 10 28 11 \$ 24.97
Mailing Address	Description of Expenditure
Mailing Address PO 190X 407066 State, Zip Code (Plus 4)	on-line giving fees
Ft Lauderdale State Zip Code (Plus 4)	
	10 28 71 \$ 19
CCD Debit Fees	/0 28 // \$ 19
Mailing Address PO BOX 407066 State Zin Code (Plus 4)	on-line giving fees
Ft. Lauderdake FU 33340-	MO. DAY YEAR Amount
To Whom Paid HTA T	11 14 11 \$ 143.70
Mailing Address	Description of Expenditure
PO BOX 6463 City State Zip Code (Plus 4)	phore
Carol Stream 14 60197-646	3
To Whom Paid	MD YEAR Amount
Mailing Address	Description of Expenditure
City State Zip Code (Plus 4)	
	PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover I	Page, Item D. \$ 405 533 5%

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		R	eporting F	Period	/11 To 11/28/11
Friends of Josh	Stapino		From /L	1/00/	11/28/1/
					Outstanding Balance of Debt
Jame of Creditor					\$
Mailing Address	DATE DEBT	MO.	DAY	YEAR.	
Sity	INCURRED	State	Zip Code ((Plus 4)	
Description of Debt		<u> </u>			
					Outstanding Balance of Debt
Name of Creditor					\$
Mailing Address	DATE DEBT	MO.	DAY	YEAR	
City	INCURRED	State	Zip Code	(Plus 4)	
Description of Debt					
Name of Creditor					Outstanding Balance of Debt
	DATE	MO.	Logo	YEAR	
Mailing Address	DEBT	I Vanco (BFG) Since		ice i Drivi Gerga	
City		State	Zip Code —	(Plus 4)	
Description of Debt		.4 1			
Name of Creditor					Outstanding Balance of Debt
				New transfer to	\$
Mailing Address	DATE DEBT	MO.	DAY	YEAR	
City	INCURRED	State	Zip Code	(Plus 4)	
Description of Debt			<u> </u>		<u> Astronia (1916) (1916) a filosoficio (1916) a fil</u>
			-		Outstanding Balance of Deb
Name of Creditor				A Francisco	\$
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR	
City	INCORRED	State	Zip Code	(Plus 4)	
Debt.				<u> </u>	
Description of Debt					
Name of Creditor					Outstanding Balance of Deb
Mailing Address	DATE DEBT	MO.	DÄY	YEAR	White the same of
	INCURRED	State	Zip Code	(Plus 4)	
City					
Description of Debt					
					PAGE TOTAL
Enter Grand Total of Unpaid Debts of	on Page 1, Report Cover	Page,	ltem G.		\$ -0
•					