

CAMPAIGN FINANCE REPORT

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

File Identification Number: <u>2003274</u>		Report Filed By: <u>CANDIDATE</u>		<input type="checkbox"/> CANDIDATE		<input checked="" type="checkbox"/> COMMITTEE		<input type="checkbox"/> LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: <u>Friends of Josh Shapiro</u>										
Street Address: <u>410 Caren Moskowitz 2, TRAVELER</u> <u>525 Pine Tree Rd?</u>										
City: <u>Jenkintown</u>					State: <u>PA</u>		Zip Code: <u>19046 -</u>			
TYPE OF REPORT (place X to the right of report type)	<input type="checkbox"/> 6TH TUESDAY PRE-PRIMARY		<input type="checkbox"/> 2ND FRIDAY PRE-PRIMARY		<input type="checkbox"/> 30 DAY POST PRIMARY		<input type="checkbox"/> AMENDMENT REPORT?		<input type="checkbox"/> YES	<input type="checkbox"/> NO
	<input type="checkbox"/> 8TH TUESDAY PRE-ELECTION		<input type="checkbox"/> 2ND FRIDAY PRE-ELECTION		<input checked="" type="checkbox"/> 30 DAY POST ELECTION		<input checked="" type="checkbox"/> TERMINATION REPORT?		<input type="checkbox"/> YES	<input type="checkbox"/> NO
	<input type="checkbox"/> ANNUAL REPORT		<input type="checkbox"/> YEAR		<input type="checkbox"/> FILING METHOD <input type="checkbox"/> CHECK ONE		<input checked="" type="checkbox"/> PAPER		<input type="checkbox"/> DISKETTE	
Name of Office Sought by Candidate: <u>State Representative / County Commissioner</u>					DATE OF ELECTION MO. DAY YEAR <u>11 8 2011</u>		District Number <u>153</u>	Office Code <u>5T14</u>	Party Code <u>DEM</u>	County Code <u>46</u>
Summary of Receipts and Expenditures from:										
MO. DAY YEAR <u>10 25 2011</u>			To MO. DAY YEAR <u>11 28 2011</u>			FOR OFFICE USE ONLY RECEIVED 2011 DEC - 8 A 9:05				
A. Amount Brought Forward From Last Report					<u>\$ 598,644.57</u>					
B. Total Monetary Contributions and Receipts (From Schedule I)					<u>\$ 13,685.28</u>					
C. Total Funds Available (Sum of Lines A and B)					<u>\$ 605,332.85</u>					
D. Total Expenditures (From Schedule III)					<u>\$ 405,533.86</u>					
E. Ending Cash Balance (Subtract Line D from Line C)					<u>\$ 199,798.99</u>					
F. Value of In-Kind Contributions Received (From Schedule II)					<u>\$ -0-</u>					
G. Unpaid Debts and Obligations (From Schedule IV)					<u>\$ -0-</u>					

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, on paper or computer diskette, are to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this 5th day of DECEMBER 2011

Robin A Beall Signature

Carrie Moskowitz Signature of Person Submitting Report

Carrie Moskowitz Printed Name

12 19 12 MO. DAY YR. Notary Public

215 537-9233 Area Code Daytime Telephone Number

NOTARIAL SEAL
 My commission expires Dec 19, 2012
 ROBIN A BEALL
 Notary Public
 ABINGTON TWP., MONTGOMERY COUNTY

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 5th day of DECEMBER 2011

Robin A Beall Signature

Josh Shapiro Signature of Candidate

Josh Shapiro Printed Name

12 19 12 MO. DAY YR. Notary Public

215 886 7376 Area Code Daytime Telephone Number

NOTARIAL SEAL
 My commission expires Dec 19, 2012
 ROBIN A BEALL
 Notary Public
 ABINGTON TWP., MONTGOMERY COUNTY

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate <i>Friends of Josh Shapiro</i>	Reporting Period From <u>10/25/11</u> To <u>11/28/11</u>
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period	(1) \$ <u>-0-</u>

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

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$ <u>470.00</u>
All Other Contributions (Part D)	\$ <u>5,000.00</u>
TOTAL for the Reporting Period	(3) \$ <u>12,570.00</u>

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)	
TOTAL for the Reporting Period	(4) \$ <u>88.75</u>

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.)	\$ <u>12,658.75</u>
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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 <i>Friends of Josh Shapiro</i>	Reporting Period From <i>10/25/11</i> To <i>11/28/11</i>
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				DATE			AMOUNT
				MO.	DAY	YEAR	
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$

PAGE TOTAL
\$ *765*

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 over \$250.00 in the reporting period.

Name of Filing Committee or Candidate <i>Friends of Josh Shapiro</i>	Reporting Period From <i>10/25/11</i> To <i>11/28/11</i>
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	DATE			AMOUNT
	MO.	DAY	YEAR	
Full Name of Contributing Committee <i>Friends of Matt Smith</i>	10	27	11	\$ 2500.00
Mailing Address <i>PO Box 13445</i>	MO.	DAY	YEAR	\$
City <i>Pittsburgh</i>	MO.	DAY	YEAR	\$
State <i>PA</i>	MO.	DAY	YEAR	\$
Zip Code (Plus 4) <i>15243-</i>	MO.	DAY	YEAR	\$
Full Name of Contributing Committee <i>Timony Knox LLP PAC</i>	11	2	11	\$ 1500.00
Mailing Address <i>400 Maryland Drive PO Box 7544</i>	MO.	DAY	YEAR	\$
City <i>Ft. Washington</i>	MO.	DAY	YEAR	\$
State <i>PA</i>	MO.	DAY	YEAR	\$
Zip Code (Plus 4) <i>19034 -</i>	MO.	DAY	YEAR	\$
Full Name of Contributing Committee <i>Greenlee Partners State PAC</i>	11	3	11	\$ 500.00
Mailing Address <i>P.O. BOX 11972</i>	MO.	DAY	YEAR	\$
City <i>Harrisburg</i>	MO.	DAY	YEAR	\$
State <i>PA</i>	MO.	DAY	YEAR	\$
Zip Code (Plus 4) <i>17108 - 1972</i>	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	MO.	DAY	YEAR	\$
Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	MO.	DAY	YEAR	\$
Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	MO.	DAY	YEAR	\$
Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	MO.	DAY	YEAR	\$
Zip Code (Plus 4)	MO.	DAY	YEAR	\$

PAGE TOTAL
\$ *4500.00*

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

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 <i>Friends of Josh Shapiro</i>	Reporting Period From <i>10/25/11</i> To <i>11/28/11</i>
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				DATE			AMOUNT
Full Name of Contributor <i>Eric Kretschman</i>				MO.	DAY	YEAR	\$ <i>5000.00</i>
Mailing Address <i>1428 Scrope Rd.</i>				<i>10</i>	<i>26</i>	<i>11</i>	\$
City <i>Rydal</i>	State <i>PA</i>	Zip Code (Plus 4) <i>19046</i>					\$
Employer Name <i>Olympus Capital Group</i>				Occupation <i>Managing Director</i>			
Employer Mailing Address/Principal Place of Business <i>485 Madison Avenue, 18th Floor, New York NY 10022-5861</i>							
Full Name of Contributor <i>Robert S. Taylor</i>				MO.	DAY	YEAR	\$ <i>1000.00</i>
Mailing Address <i>PO Box 220</i>							\$
City <i>Solebury</i>	State <i>PA</i>	Zip Code (Plus 4) <i>18963</i>					\$
Employer Name <i>The Cameron Companies</i>				Occupation <i>Chairman and CEO</i>			
Employer Mailing Address/Principal Place of Business <i>5049 Swamp Road, Fountaineville, PA 18923</i>							
Full Name of Contributor <i>Milton Schneider</i>				MO.	DAY	YEAR	\$ <i>1000.00</i>
Mailing Address <i>345 Fishers Rd.</i>							\$
City <i>Bryn Mawr</i>	State <i>PA</i>	Zip Code (Plus 4) <i>19010</i>					\$
Employer Name <i>Glennville Group</i>				Occupation <i>Developer</i>			
Employer Mailing Address/Principal Place of Business <i>580 W. Germantown Pike, Plymouth Meeting PA 19462</i>							
Full Name of Contributor <i>Louis Caputo</i>				MO.	DAY	YEAR	\$ <i>1000.00</i>
Mailing Address <i>127 Lake Colony Drive</i>							\$
City <i>Venetia</i>	State <i>PA</i>	Zip Code (Plus 4) <i>15367</i>					\$
Employer Name <i>Caputo + Caputo PC</i>				Occupation <i>Attorney</i>			
Employer Mailing Address/Principal Place of Business <i>213 Smithfield St., 303 Pitt Bldg, Pittsburgh, PA 15222</i>							
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business							

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

PAGE TOTAL
\$ *8000.00*

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 <i>Friends of Josh Shapiro</i>	Reporting Period From <i>10/25/11</i> To <i>11/28/11</i>
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Full Name <i>TD Bank</i>						
Mailing Address <i>PO Box 1377</i>						
City <i>Lewistown</i>	State <i>MD</i>	Zip Code (Plus 4) <i>04243</i>	MO. <i>10</i>	DAY <i>31</i>	YEAR <i>11</i>	Amount \$ 88.28

Receipt Description
interest

Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount \$

Receipt Description

Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount \$

Receipt Description

Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount \$

Receipt Description

Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount \$

Receipt Description

Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount \$

Receipt Description

PAGE TOTAL
\$ 88.28

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

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 <i>Friends of Josh Shapiro</i>	Reporting Period From <i>10/25/11</i> To <i>11/28/11</i>
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1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR		
TOTAL for the Reporting Period	(1)	\$ <i>- 0 -</i>

2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)		
TOTAL for the Reporting Period	(2)	\$ <i>- 0 -</i>

3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)		
TOTAL for the Reporting Period	(3)	\$ <i>- 0 -</i>

TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD <i>(Add and enter amount totals from Boxes 1, 2, and 3; also enter on Page 1, Report Cover Page, Item F.)</i>	\$ <i>- 0 -</i>
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**SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED**

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate <i>Friends of Josh Shapiro</i>	Reporting Period From <i>10/25/11</i> To <i>11/28/11</i>
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				DATE			AMOUNT
				MO.	DAY	YEAR	\$
Full Name of Contributor							\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Description of Contribution:							
Full Name of Contributor							\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Description of Contribution:							
Full Name of Contributor							\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Description of Contribution:							
Full Name of Contributor							\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Description of Contribution:							
Full Name of Contributor							\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Description of Contribution:							
Full Name of Contributor							\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Description of Contribution:							

Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.

PAGE TOTAL
\$ 0

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

Name of Filing Committee or Candidate <i>Friends of Josh Shapiro</i>	Reporting Period From <i>10/25/11</i> To <i>11/28/11</i>
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				DATE			AMOUNT
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.

PAGE TOTAL
\$ -0-

**SCHEDULE III
STATEMENT OF EXPENDITURES**

Name of Filing Committee or Candidate <i>Friends of Josh Shapiro</i>	Reporting Period From <i>10/25/11</i> To <i>11/28/11</i>
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To Whom Paid	MO.	DAY	YEAR	Amount
<i>Shapiro / Richards</i>	<i>10</i>	<i>25</i>	<i>11</i>	<i>\$ 250,000.00</i>
Mailing Address <i>P.O. Box 241</i>	Description of Expenditure <i>Contribution</i>			
City <i>Abington</i>	State <i>PA</i>	Zip Code (Plus 4) <i>19001</i>		
<i>Shapiro / Richards</i>	<i>10</i>	<i>31</i>	<i>11</i>	<i>\$ 150,000.00</i>
Mailing Address <i>PO Box 241</i>	Description of Expenditure <i>Contribution</i>			
City <i>Abington</i>	State <i>PA</i>	Zip Code (Plus 4) <i>19001 -</i>		
<i>TD Bank</i>	<i>10</i>	<i>26</i>	<i>11</i>	<i>\$ 15.00</i>
Mailing Address <i>PO Box 1377</i>	Description of Expenditure <i>bank fee</i>			
City <i>Lewistown</i>	State <i>ME</i>	Zip Code (Plus 4) <i>04243 -1377</i>		
<i>TD Bank</i>	<i>11</i>	<i>4</i>	<i>11</i>	<i>\$ 5350.00</i>
Mailing Address <i>PO Box 1377</i>	Description of Expenditure <i>gift cards for election day volunteer food</i>			
City <i>Lewistown</i>	State <i>ME</i>	Zip Code (Plus 4) <i>04243 1377</i>		
<i>CCD Debit Fees</i>	<i>10</i>	<i>28</i>	<i>11</i>	<i>\$ 24.97</i>
Mailing Address <i>PO Box 407066</i>	Description of Expenditure <i>on-line giving fees</i>			
City <i>Ft Lauderdale</i>	State <i>FL</i>	Zip Code (Plus 4) <i>33340</i>		
<i>CCD Debit Fees</i>	<i>10</i>	<i>28</i>	<i>11</i>	<i>\$.19</i>
Mailing Address <i>PO Box 407066</i>	Description of Expenditure <i>on-line giving fees</i>			
City <i>Ft. Lauderdale</i>	State <i>FL</i>	Zip Code (Plus 4) <i>33340-</i>		
<i>AT&T</i>	<i>11</i>	<i>14</i>	<i>11</i>	<i>\$ 143.70</i>
Mailing Address <i>PO Box 6463</i>	Description of Expenditure <i>phone</i>			
City <i>Carol Stream</i>	State <i>IL</i>	Zip Code (Plus 4) <i>60197-6463</i>		
To Whom Paid	MO.	DAY	YEAR	Amount
				<i>\$</i>
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		
		-		

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

PAGE TOTAL
\$ 405,533.56

SCHEDULE IV 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 <i>Friends of Josh Shapiro</i>	Reporting Period From <i>10/25/11</i> To <i>11/28/11</i>
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Name of Creditor				Outstanding Balance of Debt \$	
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR	
City	State	Zip Code (Plus 4)			

Description of Debt

Name of Creditor				Outstanding Balance of Debt \$	
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR	
City	State	Zip Code (Plus 4)			

Description of Debt

Name of Creditor				Outstanding Balance of Debt \$	
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR	
City	State	Zip Code (Plus 4)			

Description of Debt

Name of Creditor				Outstanding Balance of Debt \$	
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR	
City	State	Zip Code (Plus 4)			

Description of Debt

Name of Creditor				Outstanding Balance of Debt \$	
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR	
City	State	Zip Code (Plus 4)			

Description of Debt

Name of Creditor				Outstanding Balance of Debt \$	
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR	
City	State	Zip Code (Plus 4)			

Description of Debt

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.

PAGE TOTAL \$ <i>0</i>
