

Commonwealth of Pennsylvania - 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: 2003274		Report Filed By:	Candidate ¹ <input type="checkbox"/>	Committee ² <input checked="" type="checkbox"/>	Lobbyist ³ <input type="checkbox"/>			
Name of Filing Committee, Candidate or Lobbyist: Friends of Josh Shapiro								
Street Address: 528 Pine Tree Road								
City: Jenkintown			State: PA	Zip Code: 19046				
Type of Report (Place x under report type)								
1- 6th Tuesday Pre-Primary	2- 2nd Friday Pre-Primary	3- 30 Day Post Primary	4- 6th Tuesday Pre-Election	5- 2nd Friday Pre-Election	6- 30 Day Post Election	7- Annual	Special 2nd Friday Pre-Election	Special 30 Day Post-Election
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date of Election (MM/DD/YYYY)		11/08/2016	Year	2016	Amendment Report	<input type="checkbox"/>	Termination Report	<input checked="" type="checkbox"/>

Summary of Receipts and Expenditures	From Date	To Date
		11/29/2016
A. Amount Brought Forward From Last Report		\$1,726.08
B. Total Monetary Contributions and Receipts (From Schedule I)		\$2,855.00
C. Total Funds Available (Sum of Lines A and B)		\$4,581.08
D. Total Expenditures (From Schedule III)		\$4,581.08
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

FOR OFFICE USE ONLY

RECEIVED

2017 JAN 31 PM 2:07

OFFICE OF VOTER SERVICES MONTG. CO. PA

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.

COMMONWEALTH OF PENNSYLVANIA

Sworn to and subscribed before me this 30 day of January

Dianna Dillio Signature
 My commission expires 3 10 2020
 MO. DAY YR.

NOTARIAL SEAL
 Dianna Dillio, Notary Public
 Norristown Boro, Montgomery County
 My Commission Expires March 18, 2020
 MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

Josh Shapiro Signature of Person Submitting Report
 Printed Name moskowitz
 Area Code 215 Daytime Telephone Number 887-9223

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.

COMMONWEALTH OF PENNSYLVANIA

Sworn to and subscribed before me this 30 day of January

Dianna Dillio Signature
 My commission expires 3 10 2020
 MO. DAY YR.

NOTARIAL SEAL
 Dianna Dillio, Notary Public
 Norristown Boro, Montgomery County
 My Commission Expires March 18, 2020
 MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

Josh Shapiro Signature of Person Submitting Report
 Printed Name JOSH SHAPIRO
 Area Code 886 Daytime Telephone Number 7374

SCHEDULE I
Contributions and Receipts

Detailed Summary Page

Filer Identification Number: 2003274

1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR		
TOTAL for the Reporting Period	(1)	\$5.00

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND 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 OVER \$250.00 (FROM PART C AND 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)	\$2,850.00

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 Page 1, Report Cover Page, Item B.)		\$2,855.00
--	--	------------

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.

Filer Identification Number: 2003274						
Full Name Abington Band Boosters						
Mailing Address PO Box 245						
City Abington	State PA	Zip Code 19001-0245	MO. 12	DAY 31	YEAR 2016	Amount \$50.00
Receipt Description Uncashed check						
Full Name Keystone Reform PAC						
Mailing Address 21 E Airy St						
City Norristown	State PA	Zip Code 19401-4815	MO. 12	DAY 31	YEAR 2016	Amount \$800.00
Receipt Description Uncashed check						
Full Name Parkhouse Nursing & Rehab Center						
Mailing Address 1600 Black Rock Rd						
City Royersford	State PA	Zip Code 19468-3147	MO. 12	DAY 31	YEAR 2016	Amount \$2,000.00
Receipt Description Uncashed check						

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

PAGE TOTAL \$2,850.00

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

Filer Identification Number: 2003274

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 RECEIVED-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. Report Cover Page, Item F.)		\$0.00
--	--	--------

Statement of Expenditures

Filer Identification Number: 2003274						
To Whom Paid			MO.	DAY	YEAR	Amount
CCD Debit			12	31	2016	\$72.40
Mailing Address			Description of Expenditure			
PO Box 407066			Credit card processing			
City	State	Zip Code				
Fort Lauderdale	FL	33340-7066				
To Whom Paid			MO.	DAY	YEAR	Amount
Caren G. Moskowitz			12	21	2016	\$1,258.22
Mailing Address			Description of Expenditure			
528 Pinetree Rd			Reimbursement - technology			
City	State	Zip Code				
Jenkintown	PA	19046-2228				
To Whom Paid			MO.	DAY	YEAR	Amount
Shapiro for Pennsylvania			12	27	2016	\$1,369.87
Mailing Address			Description of Expenditure			
PO Box 1238			Contribution			
City	State	Zip Code				
Norristown	PA	19404-1238				
To Whom Paid			MO.	DAY	YEAR	Amount
Josh Shapiro			12	17	2016	\$2,244.26
Mailing Address			Description of Expenditure			
1550 Cloverly Ln			Reimbursement - travel, technology			
City	State	Zip Code				
Rydal	PA	19046-1405				
To Whom Paid			MO.	DAY	YEAR	Amount
TD Bank			12	31	2016	-\$363.67
Mailing Address			Description of Expenditure			
PO Box 1377			Miscellaneous expense adjustment			
City	State	Zip Code				
Lewiston	ME	04243-1377				

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

PAGE TOTAL

\$4,581.08