

Commonwealth of Pennsylvania - Campaign Finance Report (Note: This report must be clear and legible. It should be typed)

Filer Identification						Report Filed By Candida			ate Committee						Lobi	yist					
Number			(Mark X)																		
Name of Filing Committee, Candidate or Lobbyist				SHAPIRO/ARKOOSH																	
Street Address					21 E	AIRY	STREET	r													
City NORRISTOWN								St	ate	PA			Zip C	ode	194	01					
Type of Report (Place	x under i	eport typ	e)																	
				-	4- 6th Tuesday Pre- Election			_	5- 2 nd Friday Pre- Election		1	0 Dav	y Post	7- Ar	7- Annual		Special 2 ^{na} Friday Pre-Election			Special 30 Day Post-Election	
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Date Of Election			44 (07 /		Yea	г			204			endn	nent	一		i	mina	ion			
(MM/DD/YYYY)			11/07/2	2017					201	<i>'</i>	Rep	ort				Rep	ort				
Summary of Rec	ceipts	and	From Da	ate		T	o Date	2							For	Office	Use	Only			
Expenditures			01/0:	1/2017			12,	/31,	/2017												
A. Amount Brou	ight F	orward F	rom Last	Report	: :	\$	1	1,31	.0.66									1011-101-101-101-101-1-1-1-1-1-1-1-1-1-			
B. Total Moneta	•	ntributio	ns and Re	eceipts	 ;	\$					1										
(From Schedule C. Total Funds A		hle				\$	········				I								201	-	
(Sum of Lines A				-		1	1	1,31	.0.66			±§ = ∴									
D. Total Expend		s			!	\$		1.31	.0.66												
(From Schedule E. Ending Cash B		ce			+	\$					RECEIVED 2018 FEB -2 PM 12: 41 OFFICE OF VOTER SERVICES MONTG. CO. PA										
(Subtract Line D									0		SAME TO THE										
F. Value of In-Ki (From Schedule		ontributio	ns Receiv	red		\$		(0								PA		P# 12:		3
G. Unpaid Debts (From Schedule		Obligation	ns		,	5 0						-	u }								
					Affidavit Section ere. If this is a Candidate report, candidate sign here.																
Part 1- If this is a C I swear (or affirm)	omm	ittee repor	t, treasure	r sign he	ere. If	this i	s a Car	n dld n na	late re ner is	port, c	andida hest a	ite sig	n here. knowled	ige and	belief t	rue. co	rrect	and comple	ete.		
Sworn to and subs				ing acta			u.cs 0.					, .	.,,,,,,,,,,								
ス day of	Fe	brua	ry20 /	8																	
		MONWE	Mani		-						Signature of Person Submitting report										
	Signat		TARIAL		a i LV	<u> AINIA</u>	\forall			_		V 1 6	/* \ 	Print	ed Nan	ne		. <u>. </u>			
My Commission ex	denki	Susan B	Blair, Note	ary Pu	blic v Co	unt					265 572 7790										
My Commission extension Boro Montgome My Convolssion Expires Office				s Ott.	Area Code Daytime Telephone Number																
Part II- If this is a re	eport	of a Candi	date's Aut	norized	Comn	itte	e, cand	lidat	te shall	l sign h	ere.										
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																					
2 day of February 20/8								- CONSTA													
_ Susan Blow											Signature of Canadata										
0.0	Signa	ONWEAL	TH OF P	ENNS'	YLVANIA					Printed Name											
My Commission e	vnirac	NOT	ARIAL SI	EAL	1 2					215 <u>886 7576</u>											
ر ا	enkin	Sugan Bl	ო Monto	iomerv	Cou	nty	1				Area C	ode			Day	rtime T	elepho	one Numbe	er		
My Commission Expires Oct. 16. MEMBER, PENNSYLVANIA ASSOCIATION OF N					6, 21	ARIE	<u> </u>														

SCHEDULE III Statement of Expenditures

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To Whom Paid						Date [MM/DD/YYYY] \$
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House # 261	Street Address	YORK RO	AD			Description of Expenditure
City JENKINTOWN		State		Zip Code	19046-3706	BANK FEES
To Whom Paid			 			Date [MM/DD/YYYY] \$
Aller Sacret, and Aller Sacret	GOOGLE, INC.					02/02/2017
House # 1600	Street Address	PITHEATR	E PAKRWAY			Description of Expenditure
City MOUNTAIN V	EW	State	CA	Zip Code	94043-1351	EMAIL ACCOUNTS
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ingel Behavel Banes and a second of the seco	PAYCHEX OF NEW YOR	K LLC				02/17/2017
House# 1550	Street Address PON	ID ROAD,	SUITE 302			Description of Expenditure
Clty		State	PA	Zip Code	18104-2259	PAYROLL PROCESSING FEES
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and the second of the second o	PAYCHEX OF NEW YOR					03/17/2017 35
House # 1550	Street Address	ND ROAD,	SUITE 302			Description of Expenditure
ALLENTOWN	<u> </u>	State	PA	Zip Code	18104-2259	PAYROLL PROCESSING FEES
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House # 1550	Street Address PON	D ROAD,	SUITE 302			Description of Expenditure
City ALLENTOWN		State	PA	Zip Code	18104-2259	PAYROLL PROCESSING FEES
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10 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -	PAYCHEX OF NEW YOR	K LLC				06/16/2017
House # 1550	Street Address PO		SUITE 302			Description of Expenditure
City ALLENTOWN		State	РА	Zip Code	18104-2259	PAYROLL PROCESSING FEES
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The Age of the Age o	PATCHES OF NEW YORK	\ LLC				07/14/2017
House # 1550	Street Address	ND ROAD,	SUITE 302			Description of Expenditure
City						1. C. C. T. C.

Statement of Expenditures

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