Commonwealth of Pennsylvania - Campaign Finance Report

<table>
<thead>
<tr>
<th>Filer Identification Number: 2003274</th>
<th>Report Filed By: Candidate □ Committee □ Lobbyist □</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Filing Committee, Candidate or Lobbyist: Friends of Josh Shapiro</td>
<td></td>
</tr>
<tr>
<td>Street Address: 528 Pine Tree Road</td>
<td></td>
</tr>
<tr>
<td>City: Jenkintown</td>
<td>State: PA</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Type of Report (Place x under report type)</th>
<th>1-6th Tuesday Pre-Primary</th>
<th>2-2nd Friday Pre-Primary</th>
<th>3-30 Day Post Primary</th>
<th>4-8th Tuesday Pre-Election</th>
<th>5-2nd Friday Pre-Election</th>
<th>6-30 Day Post Election</th>
<th>7- Annual</th>
<th>Special 2nd Friday Pre-Election</th>
<th>Special 30 Day Post-Election</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>

Date of Election (MM/DD/YYYY) 04/26/2016 Year 2016 Amendment Report □ Termination Report □

Summary of Receipts and Expenditures

<table>
<thead>
<tr>
<th>From Date</th>
<th>To Date</th>
<th>FOR OFFICE USE ONLY</th>
</tr>
</thead>
<tbody>
<tr>
<td>03/08/2016</td>
<td>04/11/2016</td>
<td>RECEIVED</td>
</tr>
</tbody>
</table>

A. Amount Brought Forward From Last Report $15,232.68
B. Total Monetary Contributions and Receipts (From Schedule I) $1,850.00
C. Total Funds Available (Sum of Lines A and B) $17,082.68
D. Total Expenditures (From Schedule III) $322.00
E. Ending Cash Balance (Subtract Line D from Line C) $16,760.68
F. Value of In-Kind Contributions Received (From Schedule II) $0.00
G. Unpaid Debts and Obligations (From Schedule IV) $0.00

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 day of 20

________________________
Signature

My commission expires

________________________
MO. DAY YR. 

________________________
Signature

________________________
Printed Name

________________________
Area Code

________________________
Daytime Telephone Number

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 day of 20

________________________
Signature

My commission expires

________________________
MO. DAY YR. 

________________________
Signature

________________________
Printed Name

________________________
Area Code

________________________
Daytime Telephone Number
## SCHEDULE I
Contributions and Receipts

### Detailed Summary Page

**Filer Identification Number:** 2003274

### 1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - $50.00 OR LESS PER CONTRIBUTOR

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>TOTAL for the Reporting Period (1)</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

### 2. CONTRIBUTIONS $50.01 TO $250.00 (FROM PART A AND B)

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contributions Received from Political Committees (Part A)</td>
<td>$0.00</td>
</tr>
<tr>
<td>All Other Contributions (Part B)</td>
<td>$350.00</td>
</tr>
<tr>
<td>TOTAL for the Reporting Period (2)</td>
<td>$350.00</td>
</tr>
</tbody>
</table>

### 3. CONTRIBUTIONS OVER $250.00 (FROM PART C AND D)

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contributions Received from Political Committees (Part C)</td>
<td>$0.00</td>
</tr>
<tr>
<td>All Other Contributions (Part D)</td>
<td>$1,500.00</td>
</tr>
<tr>
<td>TOTAL for the Reporting Period (3)</td>
<td>$1,500.00</td>
</tr>
</tbody>
</table>

### 4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>TOTAL for the Reporting Period (4)</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

### 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.)

<table>
<thead>
<tr>
<th>Description</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD</td>
<td>$1,850.00</td>
</tr>
</tbody>
</table>
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.)

Filer Identification Number: 2003274

<table>
<thead>
<tr>
<th>DATE</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>3/22/2016</td>
<td>$250.00</td>
</tr>
<tr>
<td>3/22/2016</td>
<td>$100.00</td>
</tr>
</tbody>
</table>

Full Name of Contributor: Joan Smith
Mailing Address: 4012 E Campbell Rd
City: Pennsburg
State: PA
Zip Code: 18073-2505

Full Name of Contributor: Gary Miller
Mailing Address: PO Box 312 3904 Gatehouse Lane
City: Skippack
State: PA
Zip Code: 19474-0312

Enter Grand Total of Part B on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL
$350.00
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)

<table>
<thead>
<tr>
<th>Filer Identification Number: 2003274</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Full Name ofContributor</strong></td>
</tr>
<tr>
<td>Richard Molish</td>
</tr>
<tr>
<td><strong>Mailing Address</strong></td>
</tr>
<tr>
<td>1563 Oak Hollow Dr</td>
</tr>
<tr>
<td><strong>City</strong></td>
</tr>
<tr>
<td>Ambler</td>
</tr>
<tr>
<td><strong>Employer Name</strong></td>
</tr>
<tr>
<td>Self Employed</td>
</tr>
<tr>
<td><strong>Employer Mailing Address/Principal Place of Business</strong></td>
</tr>
<tr>
<td>103 Montgomery Ave Oreland, PA 19075</td>
</tr>
<tr>
<td><strong>Full Name ofContributor</strong></td>
</tr>
<tr>
<td>William Pugh</td>
</tr>
<tr>
<td><strong>Mailing Address</strong></td>
</tr>
<tr>
<td>510 Swede St</td>
</tr>
<tr>
<td><strong>City</strong></td>
</tr>
<tr>
<td>Norristown</td>
</tr>
<tr>
<td><strong>Employer Name</strong></td>
</tr>
<tr>
<td>Kane, Pugh, Knoell, Troy &amp; Kramer LLP</td>
</tr>
<tr>
<td><strong>Employer Mailing Address/Principal Place of Business</strong></td>
</tr>
<tr>
<td>510 Swede St Norristown, PA 19401</td>
</tr>
</tbody>
</table>

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

PAGE TOTAL

$1,500.00
### 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

<table>
<thead>
<tr>
<th>Filer Identification Number: 2003274</th>
</tr>
</thead>
</table>

#### 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF $50.00 OR LESS PER CONTRIBUTOR

<table>
<thead>
<tr>
<th>TOTAL for the Reporting Period</th>
<th>(1)</th>
<th>$0.00</th>
</tr>
</thead>
</table>

#### 2. IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF $50.01 TO $250.00 (FROM PART F)

<table>
<thead>
<tr>
<th>TOTAL for the Reporting Period</th>
<th>(2)</th>
<th>$0.00</th>
</tr>
</thead>
</table>

#### 3. IN-KIND CONTRIBUTION RECEIVED-VALUE OVER $250.00 (FROM PART G)

<table>
<thead>
<tr>
<th>TOTAL for the Reporting Period</th>
<th>(3)</th>
<th>$0.00</th>
</tr>
</thead>
</table>

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
<table>
<thead>
<tr>
<th>To Whom Paid</th>
<th>Mailing Address</th>
<th>Description of Expenditure</th>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
<th>MO</th>
<th>DAY</th>
<th>YEAR</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Department of the Treasury</td>
<td>Internal Revenue Service Ctr</td>
<td>Taxes</td>
<td>Ogden</td>
<td>UT</td>
<td>84201-0001</td>
<td>3</td>
<td>11</td>
<td>2016</td>
<td>$275.00</td>
</tr>
<tr>
<td>TD Bank</td>
<td>PO Box 1377</td>
<td>Bank fee</td>
<td>Lewiston</td>
<td>ME</td>
<td>04243-1377</td>
<td>3</td>
<td>31</td>
<td>2016</td>
<td>$2.00</td>
</tr>
<tr>
<td>CCD Debit</td>
<td>PO Box 407066</td>
<td>Credit card processing</td>
<td>Fort Lauderdale</td>
<td>FL</td>
<td>33340-7066</td>
<td>3</td>
<td>31</td>
<td>2016</td>
<td>$45.00</td>
</tr>
</tbody>
</table>

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

PAGE TOTAL: $322.00