

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: 2003023		Report Filed By: [Signature]		1.	2. X	3.
Name of Filing Committee, Candidate or Lobbyist: <b>FRIENDS OF BRUCE CASTOR, INC.</b>						
Street Address: <b>P.O. Box 800</b>						
City: <b>West Conshohocken</b>			State: <b>PA</b>		Zip Code: <b>19428 - 0800</b>	
TYPE OF REPORT  (place X to the right of report type)	1.	2.	3.	4.	5.	6.
						X
	X	YEAR 2011				X
Name of Office Sought by Candidate: <b>Montgomery County Commissioner</b>			DATE OF ELECTION MO. DAY YEAR <b>11 08 2011</b>		District Number	Office Code <b>REP</b>
						County Code <b>46</b>
(SEE INSTRUCTIONS FOR CODES)						
Summary of Receipts and Expenditures from:		MO. DAY YEAR <b>11 29 2011</b>	To	MO. DAY YEAR <b>12 31 2011</b>	OFFICE OF VOTER SERVICES MONTG. CO. PA 2012 JAN 10 A 11:00 RECEIVED	
A. Amount Brought Forward From Last Report				\$	4,639.37	
B. Total Monetary Contributions and Receipts (From Schedule I)				\$	3,528.88	
C. Total Funds Available (Sum of Lines A and B)				\$	8,168.25	
D. Total Expenditures (From Schedule III)				\$	0.00	
E. Ending Cash Balance (Subtract Line D from Line C)				\$	8,168.25	
F. Value of In-Kind Contributions Received (From Schedule II)				\$	0.00	
G. Unpaid Debts and Obligations (From Schedule IV)				\$	69,500.00	

**AFFIDAVIT SECTION**

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 6th day of January 20 12

Signature: [Signature]  
 NOTARIAL SEAL  
**JOANN KONOPKA**  
 Notary Public  
 WEST CONSHOHOCKEN BORO, MONTGOMERY CNTY  
 My Commission Expires Jul 8, 2012

Signature of Person Submitting Report: [Signature]  
**ROSS WEISS, ESQUIRE, TREASURER**  
 Printed Name: \_\_\_\_\_  
 Area Code: (610) Daytime Telephone Number: 941-2361

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 6th day of January 20 12

Signature: [Signature]  
 NOTARIAL SEAL  
**JOANN KONOPKA**  
 Notary Public  
 WEST CONSHOHOCKEN BORO, MONTGOMERY CNTY  
 My Commission Expires Jul 8, 2012

Signature of Candidate: [Signature]  
**BRUCE L. CASTOR, JR.**  
 Printed Name: \_\_\_\_\_  
 Area Code: (215) Daytime Telephone Number: 977-1000

Department of State • Bureau of Commissions, Elections and Legislation  
 210 North Office Building • Harrisburg, PA 17120-0029 • (717) 787-5280

# 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: 2003023		Report Filed By: <b>CANDIDATE</b>	<b>COMMITTEE</b> <input checked="" type="checkbox"/>	<b>LOBBYIST</b> <input type="checkbox"/>						
Name of Filing Committee, Candidate or Lobbyist: Friends of Bruce Castor, Inc.										
Street Address: PO Box 800										
City: West Conshohocken		State: PA	Zip Code: 19428--800							
TYPE OF REPORT  (place X to the right of report type)	1ST THURSDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>
	6TH THURSDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>
	ANNUAL REPORT	7. X	Year 2011	FILING METHOD ( ) CHECK ONE		PAPER		DISKETTE		
Name of Office Sought by Candidate:				DATE OF ELECTION			District Number	Office Code	Party Code	County Code
				MO	DAY	YEAR	-2		REP	46
				11	8	2011	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY	
		11	29	2011		12	31	2011		
A. Amount Brought Forward From Last Report					\$	4639.37				
B. Total Monetary Contributions And Receipts (From Schedule I)					\$	3528.88				
C. Total Funds Available (Sum Of Lines A and B)					\$	8168.25				
D. Total Expenditures (From Schedule III)					\$	0.00				
E. Ending Cash Balance (Subtract Line D From Line C)					\$	8168.25				
F. Value Of In-Kind Contributions Received (From Schedule II)					\$	0.00				
G. Unpaid Debts And Obligations (From Schedule IV)					\$	69500.00				

## AFFIDAVIT SECTION

**Part I:** (This is a Committee report or treasurer sign here. If this is a Candidate report, candidate sign here.)  
 I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, 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 of Person Submitting Report  
 \_\_\_\_\_  
 Printed Name  
 \_\_\_\_\_  
 Email  
 \_\_\_\_\_  
 Area Code Daytime Telephone Number

**Part II:** (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 of Candidate  
 \_\_\_\_\_  
 Printed Name  
 \_\_\_\_\_  
 Email  
 \_\_\_\_\_  
 Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
Detailed Summary Page

<b>Name of Filing Committee or Candidate</b> Friends of Bruce Castor, Inc.	<b>Reporting Period</b> From: <u>11/29/2011</u> To: <u>12/31/2011</u>
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<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 0.00

<b>2. Contributions Received - \$ 50.01 to \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 0.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 3528.88
<b>All Other Contributions (Part D)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 3528.88

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>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 Page1, Report Cover Page, Item B.)</b>	\$ 3528.88
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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			Reporting Period		
			From:		To:
			<b>DATE</b>		
			<b>AMOUNT</b>		
Full Name of Contributing Committee			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>
Mailing Address					
City	State	Zip Code (Plus 4)			\$ 0.00

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

<b>PAGE TOTAL</b>
\$ 0.00

**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	Reporting Period	
	From:	To:

			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

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

<b>PAGE TOTAL</b>
\$ 0.00

**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 from Over \$250.00 in the reporting period.

<b>Name of Filing Committee or Candidate</b> Friends of Bruce Castor, Inc.	<b>Reporting Period</b> From: <u>11/29/2011</u> To: <u>12/31/2011</u>
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	DATE			AMOUNT
Full Name of Contributing Committee	MO	DAY	YEAR	
Brown-Castor '11				
<b>Mailing Address</b> PO Box 800				\$ 3528.88
<b>City</b> West Conshohocken	12	22	2011	
<b>State</b> PA				
<b>Zip Code (Plus 4)</b> 19428				

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

<b>PAGE TOTAL</b>
\$ 3528.88

**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	Reporting Period
	From: <span style="float: right;">To:</span>

Full Name of Contributor			DATE			AMOUNT
			MO	DAY	YEAR	
Mailing Address						
City	State	Zip Code (Plus 4)				
Employer Name			Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code (Plus 4)		

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

<b>PAGE TOTAL</b>
\$ 0.00

**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	Reporting Period
	From: <span style="float: right;">To:</span>

Full Name	DATE			AMOUNT
	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		
Receipt Description				

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

<b>PAGE TOTAL</b>
\$ 0.00



**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**

Name of Filing Committee or Candidate  Friends of Bruce Castor, Inc.	Reporting Period  From: <u>11/29/2011</u> To: <u>12/31/2011</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>		
TOTAL for the Reporting Period (1)	\$	0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>		
TOTAL for the Reporting Period (2)	\$	0.00
<b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>		
TOTAL for the Reporting Period (3)	\$	0.00
<b>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, Reports Cover Page, Item F.)</b>	\$	0.00

**SCHEDULE II  
PART F  
IN-KIND CONTRIBUTIONS RECEIVED  
VALUE OF \$50.01 TO \$250.00**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
	From: _____ To: _____

			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	
Mailing Address						\$ 0.00
City	State	Zip Code (Plus 4)				
<b>Description of Contribution:</b>						
<b>Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.</b>						<b>PAGE TOTAL</b>
						\$ 0.00

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

<b>Name of Filing Committee or Candidate</b>				<b>Reporting Period</b>			
				<b>From:</b>		<b>To:</b>	
				<b>DATE</b>		<b>AMOUNT</b>	
<b>Full Name of Contributor</b>				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$ 0.00</b>
<b>Mailing Address</b>							
<b>City</b>	<b>State</b>	<b>Zip Code(Plus 4)</b>					
<b>Employer of Contributor</b>				<b>Occupation</b>			
<b>Employer Mailing Address/Principal Place of Business</b>			<b>City</b>	<b>State</b>	<b>Zip Code(Plus 4)</b>	<b>Description of Contribution</b>	
<b>Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.</b>						<b>PAGE TOTAL</b>	
						<b>0.00</b>	

**SCHEDULE III**  
**STATEMENT OF EXPENDITURES**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
	From _____ To: _____

			DATE		AMOUNT	
To Whom Paid			MO	DAY	YEAR	
<b>Mailing Address</b>						\$ 0.00
City	State	Zip Code (Plus 4)	Description of Expenditure			
<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>					<b>PAGE TOTAL</b>	\$ 0.00

**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

<b>Name of Filing Committee or Candidate</b> Friends of Bruce Castor, Inc.				<b>Reporting Period</b> From: <u>11/29/2011</u> To: <u>12/31/2011</u>			
<b>DATE</b>						<b>Outstanding Balance of Debt</b>	
<b>Name of Creditor</b> Bruce L. Castor, Sr.				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 33000.00
<b>Mailing Address</b> 4640 Logan Court				12	31	2011	
<b>City</b> Schwenksville	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19473		<b>Description of Debt</b> Loan to Campain Committee (April 2004)			
<b>DATE</b>						<b>Outstanding Balance of Debt</b>	
<b>Name of Creditor</b> Daine S. Castor				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 36500.00
<b>Mailing Address</b> 4640 Logan Court				12	31	2011	
<b>City</b> Schwenksville	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19473		<b>Description of Debt</b> Loan to Campain Committee (April 2004)			
<b>Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.</b>						<b>PAGE TOTAL</b>	
						\$ 69500.00	