

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: <b>2003023</b>	Report Filed By: <b>X</b>	1.	2.	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>19328 - 0800</b>	
TYPE OF REPORT	1.	2.	3.	X
	4.	5.	6.	
Place X to the right of report type:	7.	8.	9.	X
Name of Office Sought by Candidate:		DATE OF ELECTION	10.	11.
		<b>11 6 2012</b>		
			12.	13.

Summary of Receipts and Expenditures from:	11 27 2012	To	12 31 2012
A. Amount Brought Forward From Last Report	\$	6721.13	
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	00000	
C. Total Funds Available (Sum of Lines A and B)	\$	6721.13	
D. Total Expenditures (From Schedule II)	\$	0.00	
E. Ending Cash Balance (Subtract Line D from Line C)	\$	6721.13	
F. Value of In-Kind Contributions Received (From Schedule III)	\$	0.00	
G. Unpaid Debts and Obligations (From Schedule IV)	\$	65000.00	

**RECEIVED**  
 2013 JAN - 9 A 11:48  
 OFFICE OF  
 ELECTION SERVICES  
 MONTGOMERY COUNTY, PA

**AFFIDAVIT SECTION**

I swear for affirm that this report, including the attached schedules, on paper or computer diskette, etc. to the best of my knowledge and belief is true, correct and complete.

Sworn to and subscribed before me this 8 day of January 2013

*Beverly Green*  
 Signature

My commission expires 6 22 2015  
 MO. DAY YR.

Signature of Person Submitting Report  
**ROSS WEISS, ESQUIRE, TREASURER**

Printed Name  
**(610) 941-2361**

Area Code  
 District Telephone Number

NOTARIAL SEAL  
 BEVERLY GREEN, Notary Public  
 West Conshohocken Boro., Montgomery Co.  
 My Commission Expires June 22, 2015

I swear for 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. 1937, No. 420 as amended.

Sworn to and subscribed before me this 8 day of January 2013

*Beverly Green*  
 Signature

My commission expires 6 22 2015  
 MO. DAY YR.

Signature of Candidate  
*Bruce L. Castor, Jr.*

Printed Name  
**BRUCE L. CASTOR, JR.**

Area Code  
**(215) 977-1000**

District Telephone Number

NOTARIAL SEAL  
 BEVERLY GREEN, Notary Public  
 West Conshohocken Boro., Montgomery Co.  
 My Commission Expires June 22, 2015

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

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 : <input checked="" type="checkbox"/> <input type="checkbox"/> <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)	1.	2.	3.	Yes	No	<input checked="" type="checkbox"/>	
	4.	5.	6.	Yes	No	<input checked="" type="checkbox"/>	
	7. X	Year 2012		<input checked="" type="checkbox"/>	DISKETTE		
Name of Office Sought by Candidate:		DATE OF ELECTION		District Number	Office Code	Party Code	County Code
		11 6 2012		-2		REP	46
				(SEE INSTRUCTIONS FOR CODES)			
Summary of Recelpts and Expenditures from:		TO					
		11 27 2012		12 31 2012			
A. Amount Brought Forward From Last Report		\$		6721.13			
B. Total Monetary Contributions And Receipts (From Schedule I)		\$		0.00			
C. Total Funds Available (Sum Of Lines A and B)		\$		6721.13			
D. Total Expenditures (From Schedule III)		\$		0.00			
E. Ending Cash Balance (Subtract Line D From Line C)		\$		6721.13			
F. Value Of In-Kind Contributions Received (From Schedule II)		\$		0.00			
G. Unpaid Debts And Obligations (From Schedule IV)		\$		65000.00			

**AFFIDAVIT SECTION**

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

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>	<b>Reporting Period</b>
Friends of Bruce Castor, Inc.	From: <u>11/27/2012</u> To: <u>12/31/2012</u>

<b>TOTAL for the Reporting Period (1)</b>	<b>\$ 0.00</b>
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<b>Contributions Received From Political Committees (Part A)</b>	<b>\$ 0.00</b>
<b>All Other Contributions (Part B)</b>	<b>\$ 0.00</b>
<b>TOTAL for the Reporting Period (2)</b>	<b>\$ 0.00</b>

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

<b>TOTAL for the Reporting Period (4)</b>	<b>\$ 0.00</b>
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<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>	<b>\$ 0.00</b>
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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:
				DATE		AMOUNT
Full Name of Contributing Committee						
Mailing Address						\$ 0.00
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 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)**

<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>					\$ 0.00
<b>Mailing Address</b>					
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>			

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

	DATE			AMOUNT
<b>Full Name of Contributing Committee</b>				
<b>Mailing Address</b>				\$ 0.00
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>		

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

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

**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.)

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

	DATE			AMOUNT
<b>Full Name of Contributor</b>				
<b>Mailing Address</b>				\$ 0.00
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>		
<b>Employer Name</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>

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.**

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

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

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**

<b>Name of Filing Committee or Candidate</b>  Friends of Bruce Castor, Inc.	<b>Reporting Period</b>  From: <u>11/27/2012</u> To: <u>12/31/2012</u>
<b>IN-KIND CONTRIBUTIONS RECEIVED</b>	
<b>TOTAL for the Reporting Period (1)</b>	<b>\$ 0.00</b>
<b>IN-KIND CONTRIBUTIONS RECEIVED</b>	
<b>TOTAL for the Reporting Period (2)</b>	<b>\$ 0.00</b>
<b>IN-KIND CONTRIBUTIONS RECEIVED</b>	
<b>TOTAL for the Reporting Period (3)</b>	<b>\$ 0.00</b>
<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>	<b>\$ 0.00</b>

**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: <span style="float:right">To:</span>

	DATE		AMOUNT
<b>Full Name of Contributor</b>			
<b>Mailing Address</b>			\$ 0.00
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	

**Description of Contribution:**

<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> _____

				DATE	AMOUNT
<b>Full Name of Contributor</b>					
<b>Mailing Address</b>					\$ 0.00
<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> 0.00

## SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
	<b>From</b> <span style="float: right;"><b>To:</b></span>

			DATE	AMOUNT
<b>To Whom Paid</b>				
<b>Mailing Address</b>				
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>	<b>Description of Expenditure</b>	
<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>				<b>PAGE TOTAL</b>
				\$ 0.00
				\$ 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: 11/27/2012 To: 12/31/2012			
<b>DATE</b>						<b>Outstanding Balance of Debt</b>	
<b>Name of Creditor</b> Bruce L. Castor, Sr.				MO	DAY	YEAR	\$ 28500.00
<b>Mailing Address</b> 4640 Logan Court				12	31	2012	
<b>City</b> Schwenksville	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19473		<b>Description of Debt</b> Loan to Campaign Committee (April 2004)			
<b>DATE</b>						<b>Outstanding Balance of Debt</b>	
<b>Name of Creditor</b> Diane S. Castor				MO	DAY	YEAR	\$ 36500.00
<b>Mailing Address</b> 4640 Logan Court				12	31	2012	
<b>City</b> Schwenksville	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19473		<b>Description of Debt</b> Loan to Campaign Committee (April 2004)			
<b>Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.</b>						<b>PAGE TOTAL</b>	
						\$ 65000.00	



A PROFESSIONAL CORPORATION

SUITE 400 200 FOUR FALLS CORPORATE CENTER P.O. BOX 800 WEST CONSHOHOCKEN, PA 19428  
610.941.5400 800.379.0695 610.941.0711 FAX www.cozen.com

January 8, 2013

**Ross Weiss**

Direct Phone 610-941-2361

Direct Fax 877-295-6883

rweiss@cozen.com

**VIA UPS**

Department of State  
Bureau of Commissions, Elections and  
Legislation  
201 North Office Building  
Harrisburg, PA 17102

Re: Friends of Bruce Castor, Inc.  
Filer ID No.: 2003023

Dear Sir/Madam:

Enclosed please find the signed and notarized Campaign Finance Report Cover Sheet (Affidavit) for the above committee. The Campaign Finance Report was filed on-line on this date.

Very truly yours,

COZEN O'CONNOR

By:  Ross Weiss

RW/mgd  
Enclosure

cc: Bureau of Elections, Montgomery County  
Bruce L. Castor, Jr.

RECEIVED  
2013 JAN -9 A 11:48  
OFFICE OF  
VOTER SERVICES  
MONTG CO PA