

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: <input type="checkbox"/>		Report Filed By: <input type="checkbox"/>		CANDIDATE ^{1.}		COMMITTEE ^{2.} <input checked="" type="checkbox"/>		LOBBYIST ^{3.}	
Name of Filing Committee, Candidate or Lobbyist: <i>Friends of Stewart Greenleaf</i>									
Street Address: <i>417 Bartram Road, P.O. Box 155</i>									
City: <i>Willow Grove</i>				State: <i>PA</i>		Zip Code: <i>19090-0155</i>			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY ^{1.}	<input type="checkbox"/>	2ND FRIDAY PRE-PRIMARY ^{2.}	<input type="checkbox"/>	30 DAY POST PRIMARY ^{3.}	<input type="checkbox"/>	AMENDMENT REPORT?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
	8TH TUESDAY PRE-ELECTION ^{4.}	<input type="checkbox"/>	2ND FRIDAY PRE-ELECTION ^{5.}	<input type="checkbox"/>	30 DAY POST ELECTION ^{6.}	<input type="checkbox"/>	TERMINATION REPORT?	YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
	ANNUAL REPORT ^{7.}	<input checked="" type="checkbox"/>	YEAR	<i>2012</i>		FILING METHOD <input type="checkbox"/>	<input checked="" type="checkbox"/> PAPER	<input type="checkbox"/> DISKETTE	<input type="checkbox"/>
Name of Office Sought by Candidate: <i>Montgomery County Controller</i>					DATE OF ELECTION			District Number	Office Code
					MO.	DAY	YEAR		
								<i>OTH</i>	<i>REP</i>
									<i>46</i>
(SEE INSTRUCTIONS FOR CODES)									
Summary of Receipts and Expenditures from:			MO.	DAY	YEAR	To	MO.	DAY	YEAR
			<i>1</i>	<i>1</i>	<i>2012</i>		<i>12</i>	<i>31</i>	<i>2012</i>
A. Amount Brought Forward From Last Report		\$13927.95							
B. Total Monetary Contributions and Receipts (From Schedule I)		\$2000.00							
C. Total Funds Available (Sum of Lines A and B)		\$15,927.95							
D. Total Expenditures (From Schedule III)		\$14,226.01							
E. Ending Cash Balance (Subtract Line D from Line C)		\$1701.94							
F. Value of In-Kind Contributions Received (From Schedule II)		\$0							
G. Unpaid Debts and Obligations (From Schedule IV)		\$0							

FOR OFFICE USE ONLY

RECEIVED

JAN 30 A 10:59

OFFICE OF NOTICES

MONTGOMERY COUNTY

AFFIDAVIT SECTION

PART I - If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, My Commission Expires July 20, 2015, on paper or computer diskette, are to the best of my knowledge and belief true, correct and complete. MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

Sworn to and subscribed before me this 22nd day of January 2013

Christina J. Nolden
Signature

My commission expires 7 - 20 - 2015
MO. DAY YR.

Eric B. Smith
Signature of Person Submitting Report

Eric B. Smith
Printed Name

Area Code 610 - Daytime Telephone Number 256-0586

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 10th day of January 2013

Stephanie A. Dorse
Signature

My commission expires 4 - 23 - 13
MO. DAY YR.

Stewart J. Greenleaf, Jr.
Signature of Candidate

Stewart J. Greenleaf, Jr.
Printed Name

Area Code 215 - Daytime Telephone Number 977-1000

NOTARIAL SEAL
STEPHANIE A. DORSE
Notary Public
My Commission Expires Apr 23, 2013

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

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate <i>Friends of Stewart Greenleaf</i>	Reporting Period From <i>1/1/12</i> To <i>12/31/12</i>
--	---

1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period	(1) \$ <i>0</i>

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)	
Contributions Received from Political Committees (Part A)	\$ <i>0</i>
All Other Contributions (Part B)	\$ <i>0</i>
TOTAL for the Reporting Period	(2) \$ <i>0</i>

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$ <i>2000.00</i>
All Other Contributions (Part D)	\$ <i>0</i>
TOTAL for the Reporting Period	(3) \$ <i>2000.00</i>

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)	
TOTAL for the Reporting Period	(4) \$ <i>0</i>

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.)	\$ <i>2000.00</i>
--	--------------------------

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 <i>Friends of Stewart Greenleaf</i>	Reporting Period From <i>1/1/12</i> To <i>12/31/12</i>
--	---

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

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

PAGE TOTAL

\$ 0

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 <i>Friends of Stewart Greenleaf</i>	Reporting Period From <u>1/1/12</u> To <u>12/31/12</u>
--	---

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

PAGE TOTAL
\$ 0

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

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 over \$250.00 in the reporting period.

Name of Filing Committee or Candidate <u>Friends of Stewart Greenleaf</u>	Reporting Period From <u>1/1/12</u> To <u>12/31/12</u>
--	---

Full Name of Contributing Committee	DATE			AMOUNT
	MO.	DAY	YEAR	
<u>Citizens for Greenleaf</u>	10	26	12	\$ 2,000.00
Mailing Address <u>1555 Terwood Road</u>	MO.	DAY	YEAR	\$
City <u>Huntingdon Valley</u> State <u>PA</u> Zip Code (Plus 4) <u>19006 -</u>	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$

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

PAGE TOTAL
\$ 2,000.00

**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.)

Name of Filing Committee or Candidate <i>Friends of Stewart Greenleaf</i>	Reporting Period From <u>1/1/11</u> To <u>12/31/12</u>
--	---

				DATE			AMOUNT
Full Name of Contributor				MO.	DAY	YEAR	\$
				MO.	DAY	YEAR	\$
				MO.	DAY	YEAR	\$
				MO.	DAY	YEAR	\$
				Occupation			
				MO.	DAY	YEAR	\$
				MO.	DAY	YEAR	\$
				MO.	DAY	YEAR	\$
				Occupation			
				MO.	DAY	YEAR	\$
				MO.	DAY	YEAR	\$
				MO.	DAY	YEAR	\$
				Occupation			
				MO.	DAY	YEAR	\$
				MO.	DAY	YEAR	\$
				MO.	DAY	YEAR	\$
				Occupation			
				MO.	DAY	YEAR	\$
				MO.	DAY	YEAR	\$
				MO.	DAY	YEAR	\$
				Occupation			

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

PAGE TOTAL
\$ 0

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 <i>Friends of Stewart Greenleaf</i>	Reporting Period From <i>1/1/12</i> To <i>12/31/12</i>
--	---

Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount \$
		-				

Receipt Description

Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount \$
		-				

Receipt Description

Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount \$
		-				

Receipt Description

Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount \$
		-				

Receipt Description

Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount \$
		-				

Receipt Description

Full Name						
Mailing Address						
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount \$
		-				

Receipt Description

PAGE TOTAL

\$ 0

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

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 <i>Friends of Stewart Greenleaf</i>	Reporting Period From <u>1/1/12</u> To <u>12/31/12</u>
--	---

1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR		
TOTAL for the Reporting Period	(1)	\$ <u>0</u>

2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)		
TOTAL for the Reporting Period	(2)	\$ <u>0</u>

3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)		
TOTAL for the Reporting Period	(3)	\$ <u>0</u>

TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD <i>(Add and enter amount totals from Boxes 1, 2, and 3; also enter on Page 1, Report Cover Page, Item F.)</i>	\$ <u>0</u>
--	-------------

**SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED**

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate <i>Friends of Stewart Greenleaf</i>	Reporting Period From <u>1/1/12</u> To <u>12/31/12</u>
--	---

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

Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.

PAGE TOTAL
\$ 0

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

Name of Filing Committee or Candidate <i>Friends of Stewart Greenleaf</i>	Reporting Period From <u>1/1/12</u> To <u>12/31/12</u>
--	---

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

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.

PAGE TOTAL

\$0

SCHEDULE III
STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Friends of Stewart Greenleaf	Reporting Period From 1/1/12 To 12/31/12
--	---

To Whom Paid	MO.	DAY	YEAR	Amount
Shapiro/Richards	1	3	12	\$ 500.00
Mailing Address 261 Old York Road, Suite 900	Description of Expenditure Contribution for costs of swearing in			
City Jenkintown	State PA	Zip Code (Plus 4) 19046 -		
Stewart Greenleaf, Jr.	1	23	12	\$ 256.16
Mailing Address 417 Bartram Road	Description of Expenditure Reimbursement for domain names			
City Willow Grove, 1	State PA	Zip Code (Plus 4) 19090 -		
Heather Greenleaf	1	23	12	\$ 164.85
Mailing Address 417 Bartram Road	Description of Expenditure Reimbursement for web site			
City Willow Grove	State PA	Zip Code (Plus 4) 19090 -		
Stewart Greenleaf, Jr.	1	23	12	\$ 150.00
Mailing Address 417 Bartram Road	Description of Expenditure Reimbursement for Lincoln Day			
City Willow Grove	State PA	Zip Code (Plus 4) 19090 -		
North Wales Rep. Committee	1	23	12	\$ 40.00
Mailing Address 128 S. Main Street	Description of Expenditure Beef and Beer ticket			
City North Wales	State PA	Zip Code (Plus 4) -		
Cheltenham Township Rep. Organization	1	23	12	\$ 140.00
Mailing Address 4 North Avenue	Description of Expenditure Annual lunch ticket and ad			
City Wyncote	State PA	Zip Code (Plus 4) 19095 -		
Pennsylvania Future Fund	1	26	12	\$ 500.00
Mailing Address 123 Schuylkill Street	Description of Expenditure Ticket			
City Harrisburg	State PA	Zip Code (Plus 4) 17110 -		
Area One GOP	2	22	12	\$ 45.00
Mailing Address 318 Jefferson Street	Description of Expenditure Ticket			
City Red Hill	State PA	Zip Code (Plus 4) 18076 -		

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

PAGE TOTAL \$1796.01

**SCHEDULE III
STATEMENT OF EXPENDITURES**

Name of Filing Committee or Candidate <i>Friends of Stewart Greenleaf</i>	Reporting Period From <i>1/1/12</i> To <i>12/31/12</i>
--	---

To Whom Paid	MO.	DAY	YEAR	Amount
<i>Abington Twp. Rep. Organization</i>	<i>2</i>	<i>27</i>	<i>12</i>	<i>\$ 90.00</i>
Mailing Address <i>1213 Ferry Hill Road</i>	Description of Expenditure <i>Ticket and ad.</i>			
City <i>Byrdal</i>	State <i>PA</i>	Zip Code (Plus 4) <i>19066 -</i>		
To Whom Paid <i>East Norriton Rep. Committee</i>	<i>2</i>	<i>27</i>	<i>12</i>	<i>\$ 25.00</i>
Mailing Address <i>4301 Gypsy Lane</i>	Description of Expenditure <i>Ticket</i>			
City <i>Collegedale</i>	State <i>PA</i>	Zip Code (Plus 4) <i>19426 -</i>		
To Whom Paid <i>Area 5 Rep. Committee</i>	<i>2</i>	<i>22</i>	<i>12</i>	<i>\$ 90.00</i>
Mailing Address <i>53 Britton Drive</i>	Description of Expenditure <i>Ticket and ad</i>			
City <i>King of Prussia</i>	State <i>PA</i>	Zip Code (Plus 4) <i>-</i>		
To Whom Paid <i>The Pennsylvania Society</i>	<i>2</i>	<i>27</i>	<i>12</i>	<i>\$ 50.00</i>
Mailing Address <i>Bob Bethlehem Pike, Suite One</i>	Description of Expenditure <i>Dues.</i>			
City <i>Erdenheim</i>	State <i>PA</i>	Zip Code (Plus 4) <i>19038 -</i>		
To Whom Paid <i>Montgomery County Rep. Committee</i>	<i>3</i>	<i>13</i>	<i>12</i>	<i>\$ 600.00</i>
Mailing Address <i>314 E. Johnson Hwy, Suite 200</i>	Description of Expenditure <i>Tickets</i>			
City <i>Norristown</i>	State <i>PA</i>	Zip Code (Plus 4) <i>19401 -</i>		
To Whom Paid <i>Upper Merion Republican Committee</i>	<i>3</i>	<i>13</i>	<i>12</i>	<i>\$ 150.00</i>
Mailing Address <i>430 Fitzwattertown Road</i>	Description of Expenditure <i>Ticket and ad</i>			
City <i>Willow Grove</i>	State <i>PA</i>	Zip Code (Plus 4) <i>19090 -</i>		
To Whom Paid <i>Trappe GOP</i>	<i>3</i>	<i>13</i>	<i>12</i>	<i>\$ 45.00</i>
Mailing Address <i>130 W. Main Street, Suite 144-346</i>	Description of Expenditure <i>Ticket</i>			
City <i>Trappe</i>	State <i>PA</i>	Zip Code (Plus 4) <i>19426 -</i>		
To Whom Paid <i>Hatfield Twp. Rep. Committee</i>	<i>4</i>	<i>3</i>	<i>12</i>	<i>\$ 40.00</i>
Mailing Address <i>2791 Fischer Road</i>	Description of Expenditure <i>Ticket</i>			
City <i>Hatfield</i>	State <i>PA</i>	Zip Code (Plus 4) <i>19440 -</i>		

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

PAGE TOTAL
\$ 1090.00

SCHEDULE III
STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Friends of Stewart Greenleaf	Reporting Period From 1/1/12 To 12/31/12
--	---

To Whom Paid	MO.	DAY	YEAR	Amount	Description of Expenditure
Upper Merion Rep. Committee P.O. Box 60932 King of Prussia PA 19406 -	4	3	12	\$ 25.00	Ticket for Backland Beer
Montgomery County Council of Rep. Women 314 E. Johnson Hwy., Suite 200 Norristown PA 19401 -	4	3	12	\$ 190.00	Ticket for dinner
Pennsylvania Future Fund 123 Schuylkill Street Harrisburg PA 17110 -	6	7	12	\$ 1000.00	Ticket for reception
M.C.B.W.C. 314 E. Johnson Hwy., Suite 200 Norristown PA 19401 -	6	11	12	\$ 100.00	Ticket for dinner
Conshohocken Rep. Committee 200 E. Sixth Avenue Conshohocken PA 19428 -	6	11	12	\$ 35.00	Ticket to event
Friends of Bruce Castor P.O. Box 800 West Conshohocken PA 19428 -	6	11	12	\$ 2000.00	Contribution to make up for check that was not cashed during campaign
US Postal Service 611 Easton Road Willow Grove PA 19080 -	6	22	12	\$ 76.00	P.O. Box - 1 year
Wells Fargo 43 E. Main Street Norristown PA 19401 -	7	17	12	\$ 5.00	Service Charge

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

PAGE TOTAL
\$10,431.00

SCHEDULE III
STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate <i>Friends of Stewart Greenleaf</i>	Reporting Period From <i>1/1/12</i> To <i>12/31/12</i>
--	---

To Whom Paid	MO.	DAY	YEAR	Amount	Description of Expenditure
<i>Americans of Italian Heritage Council</i>	<i>7</i>	<i>26</i>	<i>12</i>	<i>\$125.00</i>	<i>Sponsorship for golf outing</i>
Mailing Address <i>2650 Audubon Road</i>					
City <i>Audubon</i>		State <i>PA</i>		Zip Code (Plus 4) <i>19403 -</i>	
<i>Wells Fargo</i>	<i>8</i>	<i>13</i>	<i>12</i>	<i>\$5.00</i>	<i>Service Charge</i>
Mailing Address <i>43 E. Main Street</i>					
City <i>Norristown</i>		State <i>PA</i>		Zip Code (Plus 4) <i>19401 -</i>	
<i>Greater Norristown Police Athletic League</i>	<i>9</i>	<i>4</i>	<i>12</i>	<i>\$50.00</i>	<i>Ticket for festival</i>
Mailing Address <i>340 Harding Boulevard</i>					
City <i>Norristown</i>		State <i>PA</i>		Zip Code (Plus 4) <i>19401 -</i>	
<i>Upper Montgomery County Rep. Club</i>	<i>9</i>	<i>4</i>	<i>12</i>	<i>\$60.00</i>	<i>Tickets for picnic.</i>
Mailing Address <i>328 Jefferson Street</i>					
City <i>Red Hill</i>		State <i>PA</i>		Zip Code (Plus 4) <i>19076 -</i>	
<i>Montgomery County Rep. Committee</i>	<i>10</i>	<i>16</i>	<i>12</i>	<i>\$340.00</i>	<i>Tickets for dinner/reception.</i>
Mailing Address <i>314 E. Johnson Hwy, Suite 200</i>					
City <i>Norristown</i>		State <i>PA</i>		Zip Code (Plus 4) <i>19401 -</i>	
<i>Wells Fargo</i>	<i>10</i>	<i>16</i>	<i>12</i>	<i>\$44.00</i>	<i>Check purchase.</i>
Mailing Address <i>43 E. Main Street</i>					
City <i>Norristown</i>		State <i>PA</i>		Zip Code (Plus 4) <i>19401 -</i>	
<i>Rep. Party of Pennsylvania</i>	<i>12</i>	<i>3</i>	<i>12</i>	<i>\$250.00</i>	<i>Ticket for luncheon</i>
Mailing Address <i>112 State Street</i>					
City <i>Harrisburg</i>		State <i>PA</i>		Zip Code (Plus 4) <i>17101 -</i>	
<i>Upper Montgomery County Rep. Committee</i>	<i>12</i>	<i>3</i>	<i>12</i>	<i>\$30.00</i>	<i>Ticket for dinner</i>
Mailing Address <i>328 Jefferson Street</i>					
City <i>Red Hill</i>		State <i>PA</i>		Zip Code (Plus 4) <i>19076 -</i>	

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

PAGE TOTAL
\$904.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate <i>Friends of Stewart Greenleaf</i>	Reporting Period From <i>1/1/12</i> To <i>12/31/12</i>
--	---

To Whom Paid	MO.	DAY	YEAR	Amount
<i>Wells Fargo</i>				\$ 5.00
Mailing Address <i>43 E. Main Street</i>		Description of Expenditure <i>Service Charge</i>		
City <i>Norristown</i>	State <i>PA</i>	Zip Code (Plus 4) <i>19401 -</i>		
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	State	Zip Code (Plus 4)		
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	State	Zip Code (Plus 4)		
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	State	Zip Code (Plus 4)		
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	State	Zip Code (Plus 4)		
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	State	Zip Code (Plus 4)		
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	State	Zip Code (Plus 4)		
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	State	Zip Code (Plus 4)		
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	State	Zip Code (Plus 4)		

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

PAGE TOTAL <i>\$ 5.00</i>

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.

Name of Filing Committee or Candidate <i>Friends of Stewart Greenleaf</i>	Reporting Period From <u>1/1/12</u> To <u>12/31/12</u>
--	---

Name of Creditor					Outstanding Balance of Debt \$
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR	
City	State	Zip Code (Plus 4) -			
Description of Debt					

Name of Creditor					Outstanding Balance of Debt \$
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR	
City	State	Zip Code (Plus 4) -			
Description of Debt					

Name of Creditor					Outstanding Balance of Debt \$
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR	
City	State	Zip Code (Plus 4) -			
Description of Debt					

Name of Creditor					Outstanding Balance of Debt \$
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR	
City	State	Zip Code (Plus 4) -			
Description of Debt					

Name of Creditor					Outstanding Balance of Debt \$
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR	
City	State	Zip Code (Plus 4) -			
Description of Debt					

Name of Creditor					Outstanding Balance of Debt \$
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR	
City	State	Zip Code (Plus 4) -			
Description of Debt					

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.	PAGE TOTAL \$ <u>0</u>
---	---------------------------