



Commonwealth of Pennsylvania - Campaign Finance Report

15

(Note: This report should be clear and legible. It should be typed)

File Identification Number	2003023	Report Filed By (Mark X)	<input type="checkbox"/>	Candidate	<input type="checkbox"/>	Committee	<input checked="" type="checkbox"/>	Lobbyist	<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	19428-0800		

Type of Report (Place x to the right of report type)

6 th Tuesday Pre-Primary	6 th Tuesday Pre-Election	2 nd Friday Pre-Primary	2 nd Friday Pre-Election	30 Day post Primary	30 Day Post Election	Annual	Special 2 nd Friday Pre-Election	Special 30 Day Post-Election		
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Date Of Election (MM/DD/YYYY)	11/4/2014			Year	2014		Amendment Report	<input type="checkbox"/>	Termination Report	<input type="checkbox"/>

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only 2014 MAY -8 AM 10:06 OFFICE OF VOTER SERVICES MONTG. CO. PA
	4/1/2014	5/5/2014	
A. Amount Brought Forward From Last Report	\$	1,502.33	
B. Total Monetary Contributions and Receipts (From Schedule II)	\$	5,000.00	
C. Total Funds Available (Sum of Lines A and B)	\$	6,502.33	
D. Total Expenditures (From Schedule III)	\$	2,351.00	
E. Ending Cash Balance (Subtract Line D from Line C)	\$	4,151.33	
F. Value of In-Kind Contributions Received (From Schedule II)	\$	0.00	
G. Unpaid Debts and Obligations (From Schedule IV)	\$	31,000.00	

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, is to the best of my knowledge and belief true, correct and complete. Sworn to and subscribed before me this

7th day of May 20 14Signature of Person Submitting report
Joann KonopkaSignature of Person Submitting report
Ross Weiss

Printed Name

My Commission expires
Mo. Day YR.
Joann Konopka, Notary Public
West Conshohocken Boro, Montgomery County
My commission expires July 07, 2016510 941-2361
Area Code Daytime Telephone Number

Part II- If this is a report of a Candidates 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

7th day of May 20 14Signature
Joann KonopkaMy Commission expires
Mo. Day YR.Signature of Candidate
Bruce L. Castor, Jr.

Printed Name

215 977-1000
Area Code Daytime Telephone NumberCOMMONWEALTH OF PENNSYLVANIA
NOTARIAL SEAL
Joann Konopka, Notary Public
West Conshohocken Boro, Montgomery County
My commission expires July 07, 2016



Campaign Finance Report

136664

(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 :		CANDIDATE	COMMITTEE	<input checked="" type="checkbox"/>	LOBBYIST	
Name of Filing Committee, Candidate or Lobbyist: CASTOR, BRUCE FRIENDS OF, INC								
Street Address: P O BOX 800								
City: WEST CONSHOHOCKEN				State: PA		Zip Code: 19428-0800		
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.X	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes No <input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes No <input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	Year 2014	FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/> DISKETTE		
Name of Office Sought by Candidate:				DATE OF ELECTION		District Number	Office Code	Party Code
				MO DAY YEAR		-1		REP
				11 4 2014		46		
						(SEE INSTRUCTIONS FOR CODES)		
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR
		4	1	2014	TO	5	5	2014
A. Amount Brought Forward From Last Report				\$ 1,502.33				
B. Total Monetary Contributions And Receipts (From Schedule I)				\$ 5,000.00				
C. Total Funds Available (Sum Of Lines A and B)				\$ 6,502.33				
D. Total Expenditures (From Schedule III)				\$ 2,351.00				
E. Ending Cash Balance (Subtract Line D From Line C)				\$ 4,151.33				
F. Value Of In-Kind Contributions Received (From Schedule II)				\$ 0.00				
G. Unpaid Debts And Obligations (From Schedule IV)				\$ 31,000.00				

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 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 of Person Submitting Report

Printed Name

Email

My Commission Expires

MO DAY YR

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 of Candidate

Printed Name

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate CASTOR, BRUCE FRIENDS OF, INC	Reporting Period From: <u>4/1/2014</u> To: <u>5/5/2014</u>
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1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 0.00

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

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 0.00
All Other Contributions (Part D)	\$ 5,000.00
TOTAL for the Reporting Period (3)	\$ 5,000.00

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

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.)	\$ 5,000.00
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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.

PAGE TOTAL

\$ 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.

Name of Filing Committee or Candidate	Reporting Period	
	From:	To:

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

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

PAGE TOTAL
\$ 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.)

Name of Filing Committee or Candidate CASTOR, BRUCE FRIENDS OF, INC	Reporting Period From: <u>4/1/2014</u> To: <u>5/5/2014</u>
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			DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
Steven Lerman				
Mailing Address 1408 Lanes End			4	21
City Villanova	State PA	Zip Code (Plus 4) 19085		
Employer Name Maclen Capital			Occupation Mortgage Broker	
Employer Mailing Address/Principal Place of Business 700 S. Henderson Road		City King of Prussia	State PA	Zip Code (Plus 4) 19406

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

PAGE TOTAL
\$ 5,000.00

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		Reporting Period	
CASTOR, BRUCE FRIENDS OF, INC		From: <u>4/1/2014</u> To: <u>5/5/2014</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period (1)		\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period (2)		\$	0.00
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Period (3)		\$	0.00
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.)		\$	0.00

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

Name of Filing Committee or Candidate	Reporting Period
	From: To:

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

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

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)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate CASTOR, BRUCE FRIENDS OF, INC	Reporting Period From <u>4/1/2014</u> To: <u>5/5/2014</u>
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				DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR		
Chase Card Services					
Mailing Address PO Box 15153	5	2	2014	\$	146.00
City Wilmington	State DE	Zip Code (Plus 4) 19886	Description of Expenditure Campaign Credit Card - Postage		
To Whom Paid	MO	DAY	YEAR		
Lower Gwynedd Republican Committee					
Mailing Address 539 Tennis Ave	4	22	2014	\$	50.00
City Ambler	State PA	Zip Code (Plus 4) 19002	Description of Expenditure Contribution		
To Whom Paid	MO	DAY	YEAR		
Hatboro Republican Organization					
Mailing Address PO Box 254	4	22	2014	\$	30.00
City Hatboro	State PA	Zip Code (Plus 4) 19040	Description of Expenditure Contribution		
To Whom Paid	MO	DAY	YEAR		
Bruce L. Castor, Sr.					
Mailing Address 4640 Logan Court	4	22	2014	\$	1,000.00
City Schwenksville	State PA	Zip Code (Plus 4) 19473	Description of Expenditure Loan Payment		
To Whom Paid	MO	DAY	YEAR		
MCRC					
Mailing Address 314 E. Johnson Highway	4	22	2014	\$	1,000.00
City Norristown	State PA	Zip Code (Plus 4) 19401	Description of Expenditure Contribution		

To Whom Paid MCRC			MO	DAY	YEAR	
Mailing Address 314 E. Johnson Highway			4	3	2014	
City Norristown	State PA	Zip Code (Plus 4) 19401	Description of Expenditure Contribution			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 2,351.00

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

Name of Filing Committee or Candidate CASTOR, BRUCE FRIENDS OF, INC				Reporting Period From: <u>4/1/2014</u> To: <u>5/5/2014</u>			
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DATE				Outstanding Balance of Debt
Name of Creditor Bruce L. Castor, Sr.				\$ 12,750.00
MO	DAY	YEAR		
Mailing Address 4640 Logan Court				
5	5	2014		
City Schwenksville	State PA	Zip Code (Plus 4) 19473	Description of Debt Loan to campaign committee in April 2004	

DATE				Outstanding Balance of Debt
Name of Creditor Diane S. Castor				\$ 18,250.00
MO	DAY	YEAR		
Mailing Address 4640 Logan Court				
5	5	2014		
City Schwenksville	State PA	Zip Code (Plus 4) 19473	Description of Debt Loan to campaign committee in April 2004	

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.	PAGE TOTAL \$ 31,000.00
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May 7, 2014

VIA UPS NEXT DAY AIR

Ross Weiss

Direct Phone 610-941-2361
Direct Fax 877-295-6883
rweiss@cozen.com

Department of State
Bureau of Commissions,
Elections and Legislation
210 North Office Building
Harrisburg, PA 17120

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

Dear Sir/Madam:

Enclosed please find the signed and notarized Campaign Finance Report for the Campaign Committee.

Very truly yours,

COZEN O'CONNOR

By  Ross Weiss

RW/ngd
Enclosure

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

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RECEIVED
2014 MAY -8 AM 10:06
OFFICE OF
VOTER SERVICES
MONTG. CO. PA