

COMMONWEALTH OF PENNSYLVANIA
CAMPAIGN FINANCE STATEMENT

File this in lieu of a full report *only if* aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period.

FILER IDENTIFICATION NUMBER	REPORT FILED ON BEHALF OF	CANDIDATE <input checked="" type="checkbox"/>	COMMITTEE <input type="checkbox"/>	LOBBYIST <input type="checkbox"/>													
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <i>Stewart Greenleaf, Jr.</i>																	
STREET ADDRESS <i>417 Bartram Road</i>																	
CITY <i>Willow Grove</i>		STATE <i>PA</i>	ZIP CODE <i>19090</i>														
TYPE OF REPORT (CHECK ONE) 6TH TUESDAY PRE-PRIMARY <input type="checkbox"/> 2ND FRIDAY PRE-PRIMARY <input type="checkbox"/> 30 DAY POST-PRIMARY <input type="checkbox"/> 6TH TUESDAY PRE-ELECTION <input type="checkbox"/> 2ND FRIDAY PRE-ELECTION <input type="checkbox"/> 30 DAY POST-ELECTION <input checked="" type="checkbox"/> ANNUAL REPORT <input type="checkbox"/>	NAME OF OFFICE SOUGHT BY CANDIDATE <i>Incumbent Controller</i>		DISTRICT NO.	PARTY <i>REP</i>	DATE OF ELECTION												
	DATES OF REPORTING PERIOD <table border="1" style="display: inline-table; margin-right: 10px;"> <tr><td>MO.</td><td>DAY</td><td>YEAR</td></tr> <tr><td>10</td><td>20</td><td>15</td></tr> </table> TO <table border="1" style="display: inline-table;"> <tr><td>MO.</td><td>DAY</td><td>YEAR</td></tr> <tr><td>11</td><td>23</td><td>15</td></tr> </table>		MO.	DAY	YEAR	10	20	15	MO.	DAY	YEAR	11	23	15	FOR OFFICE USE ONLY		
	MO.	DAY	YEAR														
	10	20	15														
	MO.	DAY	YEAR														
	11	23	15														
	CASH BALANCE AT END OF REPORTING PERIOD: \$ <i>-0-</i>																
TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <i>-0-</i>																	
AMENDMENT REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>																	
TERMINATION REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>																	

AFFIDAVIT SECTION

PART I -

If statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.
 If statement is filed on behalf of a Candidate, the Candidate must sign here.
 If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.

I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT EXCEED TWO HUNDRED AND FIFTY DOLLARS (\$250.00) AND THIS REPORT IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.

SWORN TO AND SUBSCRIBED BEFORE ME THIS <i>23rd</i> DAY OF <i>November</i> 20 <i>15</i> <i>Kathleen Anne Croll</i> SIGNATURE MY COMMISSION EXPIRES <i>09</i> <i>29</i> <i>2018</i> MO. DAY YR.	<i>[Signature]</i> SIGNATURE OF PERSON SUBMITTING REPORT <i>Stewart Greenleaf, Jr.</i> PRINTED NAME <i>215</i> <i>977-1000</i> AREA CODE DAYTIME TELEPHONE NUMBER
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COMMONWEALTH OF PENNSYLVANIA
 NOTARIAL SEAL
 KATHLEEN ANNE CROLL, Notary Public
 Whitapart Twp., Montgomery County
 My Commission Expires Sept. 29, 2018

PART II -

If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must 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 _____ AREA CODE DAYTIME TELEPHONE NUMBER
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