

LATE CONTRIBUTIONS - 24 HOUR REPORT

Name of Filing Committee or Candidate Friends of Bruce Castor	Filer Identification Number 2009023
-------------------------------------------------------------------------	-----------------------------------------------

DATE RECEIVED

Full Name of Contributor	MO	DAY	YEAR
Robert Taylor	11	1	11
Mailing Address PO Box 220	Amount \$ 1000		
City Solebury State PA Zip Code (Plus 4) 18963			
Full Name of Contributor	MO	DAY	YEAR
Mailing Address	Amount \$		
City State Zip Code (Plus 4)			
Full Name of Contributor	MO	DAY	YEAR
Mailing Address	Amount \$		
City State Zip Code (Plus 4)			
Full Name of Contributor	MO	DAY	YEAR
Mailing Address	Amount \$		
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Mailing Address	Amount \$		
City State Zip Code (Plus 4)			
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Mailing Address	Amount \$		
City State Zip Code (Plus 4)			
Full Name of Contributor	MO	DAY	YEAR
Mailing Address	Amount \$		
City State Zip Code (Plus 4)			
Full Name of Contributor	MO	DAY	YEAR
Mailing Address	Amount \$		
City State Zip Code (Plus 4)			

Name of Person Submitting Report: Ross Weiss

Contact Phone Number: (610) 941-2361

Email Address: rweiss@cozen.com

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 VOTER SERVICES
 MONTG. CO PA
 2011 NOV - 1 P 4: 55
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LATE CONTRIBUTIONS - 24 HOUR REPORT

Name of Filing Committee or Candidate <i>Friends of Bruce Coster</i>	Filer Identification Number <i>2003023</i>
-------------------------------------------------------------------------	-----------------------------------------------

		DATE RECEIVED		
Full Name of Contributor	Amount \$	MO	DAY	YEAR
<i>Robert S. Taylor</i>	<i>1000</i>	<i>11</i>	<i>4</i>	<i>11</i>
Mailing Address <i>PO Box 220</i>				
City <i>Solebury</i>	State <i>PA</i>	Zip Code (Plus 4) <i>18913</i>		
Full Name of Contributor	Amount \$	MO	DAY	YEAR
<i>Friends Michael Clancy</i>	<i>2000</i>	<i>11</i>	<i>4</i>	<i>11</i>
Mailing Address <i>789 Village Ave</i>				
City <i>Collegeville</i>	State <i>PA</i>	Zip Code (Plus 4) <i>19326</i>		
Full Name of Contributor	Amount \$	MO	DAY	YEAR
Mailing Address				
City	State	Zip Code (Plus 4)		
Full Name of Contributor	Amount \$	MO	DAY	YEAR
Mailing Address				
City	State	Zip Code (Plus 4)		
Full Name of Contributor	Amount \$	MO	DAY	YEAR
Mailing Address				
City	State	Zip Code (Plus 4)		
Full Name of Contributor	Amount \$	MO	DAY	YEAR
Mailing Address				
City	State	Zip Code (Plus 4)		
Full Name of Contributor	Amount \$	MO	DAY	YEAR
Mailing Address				
City	State	Zip Code (Plus 4)		

Name of Person Submitting Report: *Ross Weiss*
 Contact Phone Number: *(610) 941-2361*
 Email Address: *rweiss@cozen.com*

Date of Report: *11-4-11*
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A PROFESSIONAL CORPORATION

SUITE 400 200 FOUR FALLS CORPORATE CENTER P.O. BOX 800 WEST CONSHOHOCKEN, PA 19428-0800
610.941.5400 800.379.0695 610.941.0711 FAX www.cozen.com

OFFICE OF
VOTER SERVICES
MONTG. CO. PA

FACSIMILE

FROM: Ross Weiss

TIMEKEEPER NO.: 1319

SENDER'S PHONE: 610.941.2361

SENDER'S FAX: 877.295.6883

OF PAGES (INCLUDING COVER):

FILE NAME:

DATE: November 17, 2011

FILE #:

RECIPIENT(S)	PHONE	FAX
Department of State		(717) 705-0721
Montgomery County		(610) 292-4527

MESSAGE:

RE: FRIENDS OF BRUCE CASTOR, INC. FILER ID#: 2003023

Attached please find an amendment to the 24 hour report filed on 11/4/11. This report has been amended to remove the \$1,000 contribution received from Robert S. Taylor. The donation from Mr. Taylor was properly reported on the 11/3/11 24 hour report and then duplicated on the 11/4/11 report. Please let me know if you have any questions.

Noreen G. Duffin, Assistant to Ross Weiss, Esquire, (610) 832-8385

IF YOU DO NOT RECEIVE ALL PAGES, PLEASE CALL 610.941.5400 or 800.379.0695 IMMEDIATELY.

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LATE CONTRIBUTIONS - 24 HOUR REPORT

Name of Filing Committee or Candidate Friends of Bruce Castor		Filer Identification Number 2003023	
		DATE RECEIVED	
Full Name of Contributor Michael Clancy		MO	DAY
Mailing Address 789 Village Ave		11	4
City Collingdale PA			11
State PA		Amount \$ 2000	
Zip Code (Plus 4) 19426			
Full Name of Contributor		MO	DAY
Mailing Address			
City			
State		Amount \$	
Zip Code (Plus 4)			
Full Name of Contributor		MO	DAY
Mailing Address			
City			
State		Amount \$	
Zip Code (Plus 4)			
Full Name of Contributor		MO	DAY
Mailing Address			
City			
State		Amount \$	
Zip Code (Plus 4)			
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City			
State		Amount \$	
Zip Code (Plus 4)			
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City			
State		Amount \$	
Zip Code (Plus 4)			
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Mailing Address			
City			
State		Amount \$	
Zip Code (Plus 4)			

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Ross Weiss

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