

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: [] 1. [] 2. **X** 3. []

Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF BRUCE CASTOR, INC.

Street Address: P.O. Box 800

City: West Conshohocken **State:** PA **Zip Code:** 19428 - 0800

TYPE OF REPORT <small>(place X to the right of report type)</small>	1.	2.	3.	X
	4.	5.	XX	X
	7.	YEAR		X

Name of Office Sought by Candidate: Montgomery County Commissioner

DATE OF ELECTION: 11 08 2011

District Number: [] **Office Code:** [] **Party Code REP:** [] **County Code:** 46

(SEE INSTRUCTIONS FOR CODES)

Summary of Receipts and Expenditures from:

MO: 10 DAY: 25 YEAR: 2011	To	MO: 11 DAY: 28 YEAR: 2011
A. Amount Brought Forward From Last Report	\$	2,789.37
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	3,100.00
C. Total Funds Available (Sum of Lines A and B)	\$	5,889.37
D. Total Expenditures (From Schedule III)	\$	1,250.00
E. Ending Cash Balance (Subtract Line D from Line C)	\$	4,639.37
F. Value of In-Kind Contributions Received (From Schedule II)	\$	0.00
G. Unpaid Debts and Obligations (From Schedule IV)	\$	69,500.00

RECEIVED
 2011 DEC - 6 A 11:03
 OFFICE OF
 VOTER SERVICES
 MONTG. CO. PA

AFFIDAVIT SECTION

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

Sworn to and subscribed before me this 5th day of December 20 11

[Signature]
Signature
ROSS WEISS, ESQUIRE, TREASURER
Printed Name

[Signature]
Signature of Person Submitting Report

My commission expires []
Signature
JOANN KONOPKA
Notary Public
W CONSHOHOCKEN BORO, MONTGOMERY CNTY
PA Commission Expires 1-18-2013

(610) 941-2361
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 5th day of December 20 11

[Signature]
Signature
BRUCE L. CASTOR, JR.
Printed Name

[Signature]
Signature of Candidate

My commission expires []
Signature
JOANN KONOPKA
Notary Public
W CONSHOHOCKEN BORO, MONTGOMERY CNTY
PA Commission Expires 1-18-2013

(215) 977-1000
Area Code Daytime Telephone Number

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

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 :	CANDIDATE	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST								
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)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	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. X	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>			
	ANNUAL REPORT	7.	Year 2011	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	County Code	
						MO	DAY	YEAR	-2		REP	46	
						11	8	2011	(SEE INSTRUCTIONS FOR CODES)				
Summary of Receipts and Expenditures from:						MO	DAY	YEAR	FOR OFFICE USE ONLY				
						10	25	2011	TO	MO	DAY	YEAR	
									11	28	2011		
A. Amount Brought Forward From Last Report								\$	2789.37				
B. Total Monetary Contributions And Receipts (From Schedule I)								\$	3100.00				
C. Total Funds Available (Sum Of Lines A and B)								\$	5889.37				
D. Total Expenditures (From Schedule III)								\$	1250.00				
E. Ending Cash Balance (Subtract Line D From Line C)								\$	4639.37				
F. Value Of In-Kind Contributions Received (From Schedule II)								\$	0.00				
G. Unpaid Debts And Obligations (From Schedule IV)								\$	69500.00				

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 _____

My Commission Expires _____ MO _____ DAY _____ YR _____

Signature of Person Submitting Report _____

Printed Name _____

Email _____

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 _____

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

Name of Filing Committee or Candidate Friends of Bruce Castor, Inc.	Reporting Period From: <u>10/25/2011</u> To: <u>11/28/2011</u>
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)	\$ 100.00
TOTAL for the Reporting Period (2)	\$ 100.00
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)	\$ 3000.00
TOTAL for the Reporting Period (3)	\$ 3000.00
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.)	\$ 3100.00

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	MO	DAY	YEAR
Mailing Address			\$ 0.00
City	State	Zip Code (Plus 4)	

PAGE TOTAL
\$ 0.00

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

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 Friends of Bruce Castor, Inc.	Reporting Period From: <u>10/25/2011</u> To: <u>11/28/2011</u>
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	
Jonathan J. Perrone						
Mailing Address 3204 W. Mount Kirk Avenue						\$ 100.00
City Norristown	State PA	Zip Code (Plus 4) 19403	11	4	2011	

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

PAGE TOTAL
\$ 100.00

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:

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

PAGE TOTAL
\$ 0.00

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

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 Friends of Bruce Castor, Inc.	Reporting Period		
	From:	10/25/2011	To: 11/28/2011

Full Name of Contributor	DATE			AMOUNT
	MO	DAY	YEAR	
Robert S. Taylor	11	1	2011	\$ 1000.00
Mailing Address PO Box 220				
City Solebury State PA Zip Code (Plus 4) 18963				
Employer Name Cameron Corp	Occupation CEO			
Employer Mailing Address/Principal Place of Business PO Box 220	City Solebury	State PA	Zip Code (Plus 4) 18963	

Full Name of Contributor	DATE			AMOUNT
	MO	DAY	YEAR	
Michael Clancy	11	4	2011	\$ 2000.00
Mailing Address 789 Village Avenue				
City Collegeville State PA Zip Code (Plus 4) 19426				
Employer Name Unemployed	Occupation Unemployed			
Employer Mailing Address/Principal Place of Business 789 Village Avenue	City Collegeville	State PA	Zip Code (Plus 4) 19426	

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

PAGE TOTAL
\$ 3000.00

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.

Name of Filing Committee or Candidate	Reporting Period From: _____ To: _____
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Full Name	DATE			AMOUNT
	MO	DAY	YEAR	
Mailing Address				\$ 0.00
City	State	Zip Code (Plus 4)		
Receipt Description				

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

PAGE TOTAL
\$ 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

Name of Filing Committee or Candidate Friends of Bruce Castor, Inc.		Reporting Period From: <u>10/25/2011</u> To: <u>11/28/2011</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	
						\$ 0.00
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 \$ 0.00

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

Name of Filing Committee or Candidate	Reporting Period From: _____ To: _____
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
Mailing Address							\$ 0.00
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 Friends of Bruce Castor, Inc.	Reporting Period	
	From <u>10/25/2011</u>	To: <u>11/28/2011</u>

To Whom Paid	DATE			AMOUNT
	MO	DAY	YEAR	
Brown-Castor '11	11	2	2011	\$ 1250.00
Mailing Address PO Box 800				
City West Conshohocken	State PA	Zip Code (Plus 4) 19428	Description of Expenditure Contribution	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.				PAGE TOTAL \$ 1250.00

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 Friends of Bruce Castor, Inc.				Reporting Period From: <u>10/25/2011</u> To: <u>11/28/2011</u>			
						Outstanding Balance of Debt	
						DATE	
Name of Creditor Bruce L. Castor, Sr.				MO	DAY	YEAR	\$ 33000.00
Mailing Address 4640 Logan Court				10	25	2011	
City Schwenksville	State PA	Zip Code (Plus 4) 19473		Description of Debt Loan to Campaign Committee (April 2004)			
						Outstanding Balance of Debt	
						DATE	
Name of Creditor Diane S. Castor				MO	DAY	YEAR	\$ 36500.00
Mailing Address 4640 Logan Court				10	25	2011	
City Schwenksville	State PA	Zip Code (Plus 4) 19473		Description of Debt Loan to Campaign Committee - April 2004			
						PAGE TOTAL	
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.						\$ 69500.00	