

# 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="text"/>		Report Filed By: <input type="text"/>	CANDIDATE <sup>1.</sup>	COMMITTEE <sup>2.</sup> <input checked="" type="checkbox"/>	LOBBYIST <sup>3.</sup>
Name of Filing Committee, Candidate or Lobbyist: <b>Friends of Stewart Greenleaf</b>					
Street Address: <b>P.O. Box 155, 417 Bartram Road</b>					
City: <b>Willow Grove</b>		State: <b>PA</b>	Zip Code: <b>19090 - 0155</b>		
TYPE OF REPORT  (place X to the right of report type)	8TH TUESDAY PRE-PRIMARY <sup>1.</sup>	2ND FRIDAY PRE-PRIMARY <sup>2.</sup>	30 DAY POST PRIMARY <sup>3.</sup>	AMENDMENT REPORT? YES	NO <input checked="" type="checkbox"/>
	8TH TUESDAY PRE-ELECTION <sup>4.</sup>	2ND FRIDAY PRE-ELECTION <sup>5.</sup>	30 DAY POST-ELECTION <sup>6.</sup> <input checked="" type="checkbox"/>	TERMINATION REPORT? YES	NO <input checked="" type="checkbox"/>
	ANNUAL REPORT <sup>7.</sup>	YEAR	FILING METHOD ( ) CHECK ONE <input checked="" type="checkbox"/>	PAPER <input checked="" type="checkbox"/>	DISKETTE
Name of Office Sought by Candidate: <b>Montgomery County Controller</b>			DATE OF ELECTION		District Number
			MO. DAY YEAR	Office Code	Party Code
			<b>11 5 2013</b>	<b>0TH REP</b>	<b>46</b>
			(SEE INSTRUCTIONS FOR CODES)		
Summary of Receipts and Expenditures from:		MO. DAY YEAR	To	MO. DAY YEAR	FOR OFFICE USE ONLY
		<b>10 22 2013</b>		<b>11 25 2013</b>	RECEIVED DEC-4 AM 8:34 OFFICE OF ELECTION SERVICES MONTG. CO. PA
A. Amount Brought Forward From Last Report		\$ <b>15,921.86</b>			
B. Total Monetary Contributions and Receipts (From Schedule I)		\$ <b>0</b>			
C. Total Funds Available (Sum of Lines A and B)		\$ <b>15,921.86</b>			
D. Total Expenditures (From Schedule III)		\$ <b>1526.00</b>			
E. Ending Cash Balance (Subtract Line D from Line C)		\$ <b>14395.86</b>			
F. Value of In-Kind Contributions Received (From Schedule II)		\$ <b>0</b>			
G. Unpaid Debts and Obligations (From Schedule IV)		\$ <b>1267.54</b>			

**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 or computer diskette, are to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this

3 day of DECEMBER 2013

*Kate R. Madole*  
Signature

*Eric B. Smith*  
Signature of Person Submitting Report

**COMMONWEALTH OF PENNSYLVANIA** <sup>15</sup> 15  
Notarial Seal MO. DAY YR.

**Eric B. Smith**  
Printed Name

**610-256-8586**  
Area Code Daytime Telephone Number

**PART II - 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

2nd day of December 2013

*Stewart J. Greenleaf, Jr.*  
Signature

**COMMONWEALTH OF PENNSYLVANIA** <sup>23</sup> 23 2017  
Notarial Seal MO. DAY YR.

**Stewart J. Greenleaf, Jr.**  
Printed Name

**215 977-1000**  
Area Code Daytime Telephone Number

**STEPHANIE A. DICE, Notary Public**  
Whitpain Twp., Montgomery County  
My Commission Expires April 23, 2017

SCHEDULE I  
**CONTRIBUTIONS AND RECEIPTS**

Detailed Summary Page

Name of Filing Committee or Candidate <i>Friends of Stewart Greenleaf</i>	Reporting Period From <u>10/22/13</u> To <u>11/25/13</u>
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<b>1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR</b>	
TOTAL for the Reporting Period	(1) \$ <u>0</u>

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

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

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

<b>TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD</b> <i>(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>	\$ <u>0</u>
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# 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>10/22/13</i> To <i>11/25/13</i>
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Full Name of Contributing Committee	DATE			AMOUNT
	MO.	DAY	YEAR	
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Full Name of Contributing Committee				\$
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
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# 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 <b>Friends of Stewart Greenleaf</b>	Reporting Period From <u>10/22/13</u> To <u>11/25/13</u>
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Full Name of Contributing Committee	DATE			AMOUNT
	MO.	DAY	YEAR	
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$

PAGE TOTAL  
\$ 0

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 <i>Friends of Stewart Greenleaf</i>	Reporting Period From <u>10/22/13</u> To <u>11/25/13</u>
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Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
Mailing Address				\$
City				\$
State				
Zip Code (Plus 4)				
Employer Name				\$
Occupation				
Employer Mailing Address/Principal Place of Business				

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

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

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

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

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>10/22/13</i> To <i>11/25/13</i>
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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						

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.	PAGE TOTAL \$ <u>0</u>
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# 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 <i>10/2/13</i> To <i>11/25/13</i>
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**1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR**

TOTAL for the Reporting Period	(1)	\$ <i>0</i>
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**2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)**

TOTAL for the Reporting Period	(2)	\$ <i>0</i>
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**3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)**

TOTAL for the Reporting Period	(3)	\$ <i>0</i>
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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>	\$ <i>0</i>
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SCHEDULE II  
PART F  
**IN-KIND CONTRIBUTIONS RECEIVED**

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate <b>Friends of Stewart Greenleaf</b>	Reporting Period From <u>10/22/13</u> To <u>11/25/13</u>
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Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Description of Contribution:				

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

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

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

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

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
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 <b>\$ 0</b>
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**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>10/23/13</u> To <u>11/25/13</u>
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Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Employer of Contributor	Occupation			
Employer Mailing Address/Principal Place of Business	Description of Contribution			
Full Name of Contributor				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Employer of Contributor	Occupation			
Employer Mailing Address/Principal Place of Business	Description of Contribution			
Full Name of Contributor				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Employer of Contributor	Occupation			
Employer Mailing Address/Principal Place of Business	Description of Contribution			
Full Name of Contributor				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
Employer of Contributor	Occupation			
Employer Mailing Address/Principal Place of Business	Description of Contribution			
Full Name of Contributor				\$
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$
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 <b>\$ 0</b>
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# STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate <b>Friends of Stewart Greenleaf</b>	Reporting Period From <u>10/22/13</u> To <u>11/25/13</u>
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To Whom Paid <b>Heckler for DA</b>	MO. <u>10</u>	DAY <u>22</u>	YEAR <u>13</u>	Amount <b>\$ 150.00</b>
Mailing Address <b>2373 Turk Road</b>				
Description of Expenditure <b>Contribution</b>				
City <b>Doylestown</b>	State <b>PA</b>	Zip Code (Plus 4) <b>18901 -2919</b>		

To Whom Paid <b>East Norriton Republican Committee</b>	MO. <u>10</u>	DAY <u>22</u>	YEAR <u>2013</u>	Amount <b>\$ 35.00</b>
Mailing Address <b>3120 North Wales Road</b>				
Description of Expenditure <b>Ticket for Fall Fundraiser</b>				
City <b>East Norriton</b>	State <b>PA</b>	Zip Code (Plus 4) <b>19403 -</b>		

To Whom Paid <b>Lower Moreland Republican Committee</b>	MO. <u>10</u>	DAY <u>22</u>	YEAR <u>13</u>	Amount <b>\$ 35.00</b>
Mailing Address <b>3401 Hillcroft Blvd</b>				
Description of Expenditure <b>Ticket for event</b>				
City <b>Huntingdon Valley</b>	State <b>PA</b>	Zip Code (Plus 4) <b>19006 -4025</b>		

To Whom Paid <b>Wells Fargo</b>	MO. <u>10</u>	DAY <u>16</u>	YEAR <u>13</u>	Amount <b>\$ 500</b>
Mailing Address <b>43 East Main Street</b>				
Description of Expenditure <b>Service charge</b>				
City <b>Norristown</b>	State <b>PA</b>	Zip Code (Plus 4) <b>19404 -</b>		

To Whom Paid <b>UAO Enterprises</b>	MO. <u>10</u>	DAY <u>28</u>	YEAR <u>13</u>	Amount <b>\$ 1000.00</b>
Mailing Address <b>1524 Delancey Street, 4th Floor</b>				
Description of Expenditure <b>Website work</b>				
City <b>Philadelphia</b>	State <b>PA</b>	Zip Code (Plus 4) <b>19102 -</b>		

To Whom Paid <b>Republican Party of Pennsylvania</b>	MO. <u>11</u>	DAY <u>14</u>	YEAR <u>13</u>	Amount <b>\$ 250.00</b>
Mailing Address <b>112 State Street</b>				
Description of Expenditure <b>Ticket for luncheon</b>				
City <b>Harrisburg</b>	State <b>PA</b>	Zip Code (Plus 4) <b>17101 -</b>		

To Whom Paid <b>Heather Greenleaf</b>	MO. <u>11</u>	DAY <u>14</u>	YEAR <u>13</u>	Amount <b>\$ 46.00</b>
Mailing Address <b>417 Bartram Road</b>				
Description of Expenditure <b>Reimbursement for Stamps</b>				
City <b>Willow Grove</b>	State <b>PA</b>	Zip Code (Plus 4) <b>19090 -</b>		

To Whom Paid <b>Wells Fargo</b>	MO. <u>11</u>	DAY <u>15</u>	YEAR <u>13</u>	Amount <b>\$ 5.00</b>
Mailing Address <b>43 E. Main Street</b>				
Description of Expenditure <b>Service Charge</b>				
City <b>Norristown</b>	State <b>PA</b>	Zip Code (Plus 4) <b>19404 -</b>		

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.	<b>PAGE TOTAL</b> <b>\$ 1526.00</b>
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**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>10/22/13</u> To <u>11/25/13</u>
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Name of Creditor <i>Complete Packaging</i>				Outstanding Balance of Debt <b>\$526.46</b>		
Mailing Address <i>1380 Welsh Road</i>	DATE DEBT INCURRED	MO. <i>11</i>	DAY <i>6</i>	YEAR <i>13</i>		
City <i>Montgomeryville,</i>	State <i>PA</i>	Zip Code (Plus 4) <i>18936-</i>				
Description of Debt <i>Candy Packaging</i>						

Name of Creditor <i>Royal Enterprises</i>				Outstanding Balance of Debt <b>\$741.08</b>		
Mailing Address <i>717 Fellowship Road, Unit C</i>	DATE DEBT INCURRED	MO. <i>11</i>	DAY <i>8</i>	YEAR <i>13</i>		
City <i>Mt. Laurel</i>	State <i>NJ</i>	Zip Code (Plus 4) <i>08054-</i>				
Description of Debt <i>Candy For Parties</i>						

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

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

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

Name of Creditor				Outstanding Balance of Debt <b>\$</b>		
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**  
**\$1267.54**