

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 40396		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 Bruce L. Castor, Jr.																																											
STREET ADDRESS 679 Camp Wawa Road																																											
CITY Lauderach		STATE PA	ZIP CODE 19450																																								
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE District Attorney	DISTRICT NO.	PARTY Rep	DATE OF ELECTION																																							
				MO. 11	DAY 3	YEAR 2015																																					
6TH TUESDAY PRE-PRIMARY <input type="checkbox"/>	<table border="1"> <tr> <td>DATES OF REPORTING PERIOD</td> <td>MO. 1</td> <td>DAY 1</td> <td>YEAR 15</td> <td>TO</td> <td>MO. 5</td> <td>DAY 4</td> <td>YEAR 15</td> </tr> <tr> <td colspan="2">CASH BALANCE AT END OF REPORTING PERIOD:</td> <td colspan="6">\$ 0.00</td> </tr> <tr> <td colspan="2">TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:</td> <td colspan="6">\$ 0.00</td> </tr> <tr> <td>AMENDMENT REPORT?</td> <td>YES</td> <td>NO</td> <td>X</td> <td colspan="4"></td> </tr> <tr> <td>TERMINATION REPORT?</td> <td>YES</td> <td>NO</td> <td>X</td> <td colspan="4"></td> </tr> </table>	DATES OF REPORTING PERIOD	MO. 1	DAY 1	YEAR 15	TO	MO. 5	DAY 4	YEAR 15	CASH BALANCE AT END OF REPORTING PERIOD:		\$ 0.00						TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:		\$ 0.00						AMENDMENT REPORT?	YES	NO	X					TERMINATION REPORT?	YES	NO	X					FOR OFFICE USE ONLY	
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2ND FRIDAY PRE-PRIMARY <input checked="" type="checkbox"/>				2015 MAY 11 AM 9:21																																							
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 type="checkbox"/>																																											
ANNUAL REPORT <input type="checkbox"/>																																											

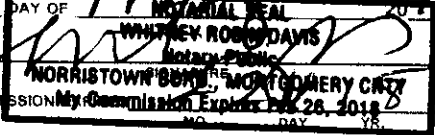
**AFFIDAVIT SECTION**

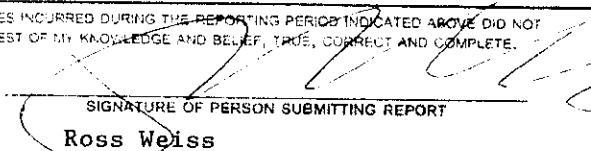
**PART I -**

If statement is filed on behalf of a Political Committee or Candidates 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 11 DAY OF NOVEMBER 2015



SIGNATURE OF PERSON SUBMITTING REPORT  
  
 Ross Weiss

PRINTED NAME  
 610 941-2361

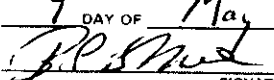
AREA CODE DAYTIME TELEPHONE NUMBER

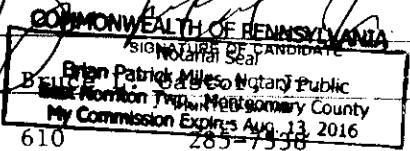
**PART II -**

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 9 DAY OF May 2015

  
 SIGNATURE  
 Brian Patrick Miles, Notary Public



610 285-7558

AREA CODE DAYTIME TELEPHONE NUMBER