

# 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:	Report Filed By:	CANDIDATE <sup>1.</sup>	COMMITTEE <sup>2.</sup> <input checked="" type="checkbox"/>	LOBBYIST <sup>3.</sup>
Name of Filing Committee, Candidate or Lobbyist: <i>Friends of Stewart Greenleaf</i>				
Street Address: <i>417 Bartram Road, P.O. Box 155</i>				
City: <i>Willow Grove</i>		State: <i>PA</i>	Zip Code: <i>19090 - 0155</i>	
TYPE OF REPORT  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY <sup>1.</sup>	2ND FRIDAY PRE-PRIMARY <sup>2.</sup>	30 DAY POST PRIMARY <sup>3.</sup>	AMENDMENT REPORT? YES <input type="checkbox"/> 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 <input type="checkbox"/> 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 <input type="checkbox"/>

Name of Office Sought by Candidate: <i>Montgomery County Controller</i>	DATE OF ELECTION MO. DAY YEAR <i>11 02 2010</i>	District Number	Office Code <i>OTH REP</i>	Party Code <i>REP</i>	County Code <i>46</i>
(SEE INSTRUCTIONS FOR CODES)					

Summary of Receipts and Expenditures from:	MO. DAY YEAR	To	MO. DAY YEAR
	<i>10 19 2010</i>		<i>11 22 2010</i>
A. Amount Brought Forward From Last Report	\$ <i>2349.60</i>		
B. Total Monetary Contributions and Receipts (From Schedule I)	\$ <i>0</i>		
C. Total Funds Available (Sum of Lines A and B)	\$ <i>2349.60</i>		
D. Total Expenditures (From Schedule III)	\$ <i>460.00</i>		
E. Ending Cash Balance (Subtract Line D from Line C)	\$ <i>1889.60</i>		
F. Value of In-Kind Contributions Received (From Schedule II)	\$ <i>0</i>		
G. Unpaid Debts and Obligations (From Schedule IV)	\$ <i>433.99</i>		

**FOR OFFICE USE ONLY**

RECEIVED  
2010 DEC - 2 P  
OFFICE OF  
VOTER SERVICES  
MONTG. CO. PA

### 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  
*2nd* day of *December* 20 *10*

*Stephanie A. Dize*  
Signature

My commission expires *04-23-2013*  
MO. DAY YR.

*Colin D. Dougherty*  
Signature of Person Submitting Report

*Colin D. Dougherty*  
Printed Name

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

**PART II - If this is 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.

*Stephanie A. Dize*  
Signature

My commission expires *04-23-2013*  
MO. DAY YR.

*Stewart J. Greenleaf, Jr.*  
Signature of Candidate

*Stewart J. Greenleaf, Jr.*  
Printed Name

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

NOTARIAL SEAL  
STEPHANIE A. DIZE  
Notary Public  
WHIPPAN TWP., MONTGOMERY CNTY  
My Commission Expires Apr 23, 2013

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

**CONTRIBUTIONS AND RECEIPTS**

Detailed Summary Page

Name of Filing Committee or Candidate <i>Friends of Stewart Greenleaf</i>	Reporting Period From <u>10/19/2010</u> To <u>11/22/2010</u>
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<b>1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR</b>		
	(1)	\$ 0

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

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

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

<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>	\$ 0
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**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 <i>Friends of Stewart Greenleaf</i>	Reporting Period From <i>10/19/2010</i> To <i>11/22/2010</i>
--	---

				DATE			AMOUNT
				MO.	DAY	YEAR	
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)					\$
		-					
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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**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 <i>Friends of Stewart Greenleaf</i>	Reporting Period From <i>10/19/2010</i> To <i>11/22/2010</i>
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Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				\$
Zip Code (Plus 4)				\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				\$
Zip Code (Plus 4)				\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				\$
Zip Code (Plus 4)				\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				\$
Zip Code (Plus 4)				\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				\$
Zip Code (Plus 4)				\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				\$
Zip Code (Plus 4)				\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				\$
Zip Code (Plus 4)				\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				\$
Zip Code (Plus 4)				\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				\$
Zip Code (Plus 4)				\$

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

PAGE TOTAL <b>\$ 0</b>
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**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 over \$250.00 in the reporting period.

Name of Filing Committee or Candidate <i>Friends of Stewart Greenleaf</i>	Reporting Period From <i>10/19/2010</i> To <i>11/22/2010</i>
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				DATE			AMOUNT
				MO.	DAY	YEAR	\$
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)					
		-					
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)					
		-					

PAGE TOTAL \$ <u>0</u>
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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 <i>10/19/2010</i> To <i>11/22/2010</i>
--	---

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
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	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
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	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
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	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
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	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
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>10/19/2010</i> To <i>11/22/2010</i>
--	---

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

Full Name

Mailing Address

City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
		-				\$

Receipt Description

**PAGE TOTAL**  
\$ 0

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

# 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>10/19/2010</i> To <i>11/22/2010</i>
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<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>	
TOTAL for the Reporting Period (1)	\$ <i>0</i>

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

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

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, Report Cover Page, Item F.)	\$ <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 <i>Friends of Stewart Greenleaf</i>	Reporting Period From <i>10/19/2010</i> To <i>11/22/2010</i>
--	---

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

Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.

PAGE TOTAL  
\$ 0

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>10/19/2010</u> To <u>11/24/2010</u>
--	---

				DATE	AMOUNT		
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
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 \$ <u>0</u>
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**SCHEDULE III  
STATEMENT OF EXPENDITURES**

Name of Filing Committee or Candidate <b>Friends of Stewart Greenleaf</b>	Reporting Period From <u>10/19/2010</u> To <u>11/24/2010</u>
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To Whom Paid <b>Abington Township Republican Organization</b>	MO. <b>10</b>	DAY <b>19</b>	YEAR <b>2010</b>	Amount <b>\$150.00</b>
Mailing Address				
Description of Expenditure <b>Ticket</b>				
City	State	Zip Code (Plus 4)		
		-		

To Whom Paid <b>Stewart Greenleaf, Jr.</b>	MO. <b>10</b>	DAY <b>22</b>	YEAR <b>2010</b>	Amount <b>\$300.00</b>
Mailing Address <b>417 Bartram Road</b>				
Description of Expenditure <b>Reimbursement for out-of-pocket expense</b>				
City <b>Willow Grove</b>	State <b>PA</b>	Zip Code (Plus 4) <b>19090 -3120</b>		

To Whom Paid <b>Ambler Savings Bank</b>	MO. <b>10</b>	DAY <b>29</b>	YEAR <b>2010</b>	Amount <b>\$10.00</b>
Mailing Address <b>155 E. Butler Avenue</b>				
Description of Expenditure <b>Service charge</b>				
City <b>Ambler</b>	State <b>PA</b>	Zip Code (Plus 4) <b>19002 -</b>		

To Whom Paid	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address				
Description of Expenditure				
City	State	Zip Code (Plus 4)		
		-		

To Whom Paid	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address				
Description of Expenditure				
City	State	Zip Code (Plus 4)		
		-		

To Whom Paid	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address				
Description of Expenditure				
City	State	Zip Code (Plus 4)		
		-		

To Whom Paid	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address				
Description of Expenditure				
City	State	Zip Code (Plus 4)		
		-		

To Whom Paid	MO.	DAY	YEAR	Amount <b>\$</b>
Mailing Address				
Description of Expenditure				
City	State	Zip Code (Plus 4)		
		-		

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

<b>PAGE TOTAL</b>
<b>\$460.00</b>

## 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 <b>Friends of Stewart Greenleaf</b>	Reporting Period From <b>10/19/2010</b> To <b>11/24/2010</b>
--	---

Name of Creditor <b>Heather S. Greenleaf</b>					Outstanding Balance of Debt <b>\$ 162.18</b>	
Mailing Address <b>417 Bartram Road</b>	DATE DEBT INCURRED	MO.	DAY	YEAR		
City <b>Willow Grove</b>		<b>07</b>	<b>16</b>	<b>2010</b>		
Description of Debt <b>Reimbursement for letter head</b>		State <b>PA</b>	Zip Code (Plus 4) <b>19090-3120</b>			

Name of Creditor <b>Stewart J. Greenleaf, Jr.</b>					Outstanding Balance of Debt <b>\$ 60.00</b>	
Mailing Address <b>417 Bartram Road</b>	DATE DEBT INCURRED	MO.	DAY	YEAR		
City <b>Willow Grove</b>		<b>07</b>	<b>05</b>	<b>2010</b>		
Description of Debt <b>Reimbursement for Post office box, 1 year rental</b>		State <b>PA</b>	Zip Code (Plus 4) <b>19090-3120</b>			

Name of Creditor <b>Stewart J. Greenleaf, Jr.</b>					Outstanding Balance of Debt <b>\$ 44.00</b>	
Mailing Address <b>417 Bartram Road</b>	DATE DEBT INCURRED	MO.	DAY	YEAR		
City <b>Willow Grove</b>		<b>07</b>	<b>17</b>	<b>2010</b>		
Description of Debt <b>Reimbursement for postage</b>		State <b>PA</b>	Zip Code (Plus 4) <b>19090-3120</b>			

Name of Creditor <b>Stewart J. Greenleaf, Jr.</b>					Outstanding Balance of Debt <b>\$ 11.08</b>	
Mailing Address <b>417 Bartram Road</b>	DATE DEBT INCURRED	MO.	DAY	YEAR		
City <b>Willow Grove</b>		<b>07</b>	<b>26</b>	<b>2010</b>		
Description of Debt <b>Reimbursement for meeting with municipal leader</b>		State <b>PA</b>	Zip Code (Plus 4) <b>19090-3120</b>			

Name of Creditor <b>Stewart J. Greenleaf, Jr.</b>					Outstanding Balance of Debt <b>\$ 13.71</b>	
Mailing Address <b>417 Bartram Road</b>	DATE DEBT INCURRED	MO.	DAY	YEAR		
City <b>Willow Grove, PA</b>		<b>07</b>	<b>27</b>	<b>2010</b>		
Description of Debt <b>Reimbursement for meeting with area leader</b>		State <b>PA</b>	Zip Code (Plus 4) <b>19090-3120</b>			

Name of Creditor <b>Stewart J. Greenleaf, Jr.</b>					Outstanding Balance of Debt <b>\$ 29.11</b>	
Mailing Address <b>417 Bartram Road</b>	DATE DEBT INCURRED	MO.	DAY	YEAR		
City <b>Willow Grove</b>		<b>07</b>	<b>30</b>	<b>2010</b>		
Description of Debt <b>Reimbursement for meeting with municipal leader</b>		State <b>PA</b>	Zip Code (Plus 4) <b>19090-3120</b>			

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.

PAGE TOTAL  
**\$ 320.09**

## 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>10/19/2010</u> To <u>11/22/2010</u>
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Name of Creditor <i>Stewart J. Greenleaf, Jr.</i>				Outstanding Balance of Debt <i>\$ 11.17</i>	
Mailing Address <i>417 Bartram Rd.</i>	DATE DEBT INCURRED	MO. <i>08</i>	DAY <i>03</i>	YEAR <i>2010</i>	
City <i>Willow Grove</i>		State <i>PA</i>	Zip Code (Plus 4) <i>19090 3120</i>		

Description of Debt  
*Reimbursement for meeting with municipal leader*

Name of Creditor <i>Stewart J. Greenleaf, Jr.</i>				Outstanding Balance of Debt <i>\$ 18.31</i>	
Mailing Address <i>417 Bartram Road</i>	DATE DEBT INCURRED	MO. <i>08</i>	DAY <i>08</i>	YEAR <i>2010</i>	
City <i>Willow Grove</i>		State <i>PA</i>	Zip Code (Plus 4) <i>19090 3120</i>		

Description of Debt  
*Reimbursement for meeting with municipal leader*

Name of Creditor <i>Heather S. Greenleaf</i>				Outstanding Balance of Debt <i>\$ 17.32</i>	
Mailing Address <i>417 Bartram Road</i>	DATE DEBT INCURRED	MO. <i>08</i>	DAY <i>13</i>	YEAR <i>2010</i>	
City <i>Willow Grove</i>		State <i>PA</i>	Zip Code (Plus 4) <i>19090 - 3120</i>		

Description of Debt  
*Reimbursement for fundraiser food*

Name of Creditor <i>Stewart J. Greenleaf, Jr.</i>				Outstanding Balance of Debt <i>\$ 29.10</i>	
Mailing Address <i>417 Bartram Road</i>	DATE DEBT INCURRED	MO. <i>09</i>	DAY <i>14</i>	YEAR <i>2010</i>	
City <i>Willow Grove</i>		State <i>PA</i>	Zip Code (Plus 4) <i>19090 3120</i>		

Description of Debt  
*Out of pocket expense reimbursement*

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

Description of Debt

Name of Creditor				Outstanding Balance of Debt <i>\$</i>	
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  
*\$ 113.90*