#### Commonwealth of Pennsylvania

CAMPAIGN FINANCE REPORT

PAGE 1 OF IGOVER PAGE)

(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	<i>X</i>	COMMI	TEE	1.GBF	
Name of Filing Committee, Candidate or Lobbyist:	<del></del> -							
Stewart J. Greenleat, Jr.								
417 Battam Brad			State:		Zip Code	a:		
city: Willow Grove			PA		190.	90	_	HRONS AWARE
TYPE OF THE TYPE IT	ND FRIDAY 2. RE-PRIMARY	1 7	DAY ST. PRIMARY	3.	AMENDM REPORT?	ENT	<b>(56</b>	m   X
PRI E ECTION	NO FRIDAY 5.	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	DAY DET ELECTION	6.	TERMINA REPORTA		£	MD Y
(place X to the right of report type)  7.	YEAR		ng method I check one		e <i>ya</i> j		× PP	
Name of Office Sought by Candidate:		20%	DATE OF ELEC	The street of the street of	District Number	Office Code	Party Code	County Code
Marche Cond Controll	a <del></del>	::\$i		EAR		OTH	REA	246
Montgomery County Controll	e•	ļ	1 5 1	113				FOR CODES
		a a	AG. DAY Y	EAA	3.03 Z	OH: OFF	CE LUSE (	
Summary of Receipts and Expenditures from:	1 L013		10 21 20				<b>.</b> √	.) 
A. Amount Brought Forward From Last Report		\$ D				enga a		
B. Total Monetary Contributions and Receipts (Fi	rom Schedule I)	\$ 2 3 8	8. 7 <i>9</i>			r		
C. Total Funds Available (Sum of Lines A and B	)	\$ 238						
D. Total Expenditures (From Schedule III)		\$ 738	8.7 <i>9</i>					
E. Ending Cash Balance (Subtract Line D from L	ine C)	* <i>O</i>						?
F. Value of In-Kind Contributions Received (Fro	om Schedule II)	\$ 0					, K.	
G. Unpaid Debts and Obligations (From Schedule	· IV)	s ()						
		IT SECT			ene open	u prancy drawn		
PARTIES Ship is a sommittee papert, trassi								belief true,
correct and complete.				1	4			
Sworn to and subscribed before me this	ALTH OF PERMISY	AMAP!				1_		
NO NO	TARIAI SEAL				of Person			
Sephanie Physician Tu	A. DISE, Notary P		Ste	was	TJ. GA Printed N	eenle	nt, Jr.	
My Gornmice	on Expires April 23,		210		Trinsess (4	97	7-1000	5
My commission expires Mo. DAY	YR.	J —	Area Code			Daytima T	elephone N	lumber
		fila (P.C. sagas) e	1 (hook at late a late at late		1. 21 Sec. 201	on the	E Viene	Appendicular to
through same point of a Candidate's sweer (or affirm) that to the best of my knowledge	and belief this pol	intitt <b>ee,</b> itical com	caroncare small mittee has not vi	iolated	are. sny provisi	ons of the	B Act of Ju	une 3, 1937
(P.L. 1333, No. 320) as amended.								
Sworn to and subscribed before me this		1						
day of	20	_		Sign	nature of C	Candidate		
Signature		\big  -		····	Printed N	lame		
My commission expires		_						
MO. DAY	YR.	)	Area Code			Daytime 7	Telephone f	Vumber

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

#### SCHEDULE I

PAGE 2 OF \_\_\_\_\_

### CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

	Reporting Period
Name of Filing Committee or Candidate	
	From 1/1/13 To 10/41/13
Stewart J. Greenleuf, Jr.	
) Cooki i g. ori oniconi	

UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50,00 OR LESS PER CONT	RIBUTÓR
	\$ 9.90

CONSTRUCTIONS SIGNO FEB \$250.00 (FROM PART A AND PART B)		
Contributions Received from Political Committees (Part A)		\$ <i>O</i>
All Other Contributions (Part B)		<b>\$</b> 0
TOTAL for the Reporting Period	(2)	<b>\$</b> 0

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

THE CENTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS.	ETG	FROM PARLED
TOTAL for the Reporting Period		\$ 2 3 78.89

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 Page 1, Report Cover Page, Item B.)	\$ 2388.79

#### 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.

e of Filing Committee or Candidate Stervast Green leaf Jr.				تجسيها	ATE		TO 10/11/13
JICIDA TOWN			MC.			YEAR	
Name of Contributing Committee			1410.				\$
			MQ.	二	DAY	YEAR	\$
ling Address		Zip Code (Plus 4)	MO		DAY	YEAR	
,	State	Zip Code (Flus 4)	1 110				\$
			МО		DAY	YEAR	•
Name of Contributing Committee					DAY	YEAR	\$
iling Address		······································	MO	<del></del>	DAT	16221	\$
	State	Zip Code (Plus 4)	MC		DAY	YEAR	•
У		<del>-</del>					\$
II Name of Contributing Committee			MC	5.	DAY	YEAR	\$
Name of Contributing Committee			M	<del>.  </del>	DAY	YEAR	6
ailing Address							\$
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ty					- CA V -	YEAR	
III Name of Contributing Committee			<u> </u>	Ю.	DAY	IEAA	\$
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ailing Address							
ity	State	Zip Code (Plus 4)	N	1O.	DAY	YEAR	<b>┧</b> \$
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ull Name of Contributing Committee			"	10.			\$
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nathing Addition					DAY	YEAR	
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				MO.	DAY	YEAR	<b>s</b>
Full Name of Contributing Committee							<b></b>
Mailing Address				MO.	DAY	YEAR	\$
	State	Zip Code (Plus 4)		MO	DAY	YEAR	
City	3.3.3	_	ĺ				\$
Full Name of Contributing Committee				MO.	DAY	YEAR	<b>s</b>
Full Name of Controlling Committee				MO.	DAY	YEAR	
Mailing Address				INO.	1		\$
City	State	Zip Code (Plus 4	,	MO.	DAY	YEAR	\$
					- 520	YEAR	
Full Name of Contributing Committee				MO.	T DAY	TEAS	<b>\$</b>
Mailing Address	<u> </u>			MO.	DAY	YEAR	\$
Matting Monass	_						
City	Stat	e Zip Code (Plus 4	1)	MO.	DAY	YEAR	\$
					جد کیا ہے		PAGE TOTAL

# 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.)

ne of Filing Committee or Candidate			Fre	rting Per	1113	To 10/4/13
towart Greenleuti Jr.				ATE		AMOUNT
					/EAR	\$
Name of Contributor				DAY	VEAR	
iling Address			MO.	PA.		\$
	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
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	<del></del>		. мо.	DAY	YEAR	\$
ailing Address				DAY	YEAR	
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ull Name of Contributor					V=40	
failing Address			MO.	DAY	YEAR	\$
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ull Name of Contributor			MO.	DAY	YEAR	\$
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City	1 31814	_				\$
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- Traine S, Gomes S			MO.	DAY	YEAR	
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		<del>.</del>		On akt	2	
Enter Grand Total of Part B o	n Schedule	I. Detailed Summ	nary Page,	, Sectio	on Z.	<b> \$</b>

#### 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.

ne of Filing Committee or Candidate		·	Kel	porting P	1/13	To 10/11/13
tewartarcentest Jr.						AMOUNT
			100 T	DATE	YEAR	
I Name of Contributing Committee			MO.		72,33	\$
iling Address			MO.	DAY	YEAR	\$
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			MO.	DAY	YEAR	\$
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Ill Name of Contributing Committee			MO.	DAY	YEAR	\$
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ailing Address				<u> </u>		\$
ity	State	Zip Code (Plus 4)	мо.	DAY	YEAR	\$
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ull Name of Contributing Committee	"		IN U.	1		\$
Mailing Address			MO.	DAY	YEAR	\$
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Eity	State	Zip Code (Plus 4)	MO.	DAY	15.00	<b>  \$</b>
			MO.	DAY	YEAR	\$
uil Name of Contributing Committee						*
Mailing Address			· MO.	DAY	YEAR	\$
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City						3
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
			MO.	DAY	YEAR	
Mailing Address						\$
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Full Name of Contributing Committee			MO.	- DAI	1	\$
Mailing Address			MO.	DAY	YEAR	\$
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Full Name of Contributing Committee			_	B.C.	YEÁR	
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(City		_				
						PAGE TOTAL
Enter Grand Total of Part C on			_	<u> </u>		\$ <i>()</i>

### PAGE 6 OF 14

### 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.)

Cittee or Candidate				Repo	orting P	eriou	1.2
ne of Filing Committee or Candidate			1	Fr	om 🌃	(/13	To 10/2/13
Stewart Greenlest Jr.					ATE		AMOUNT
			MO.	_	DAY	YEAR	\$
Name of Contributor				_	DAY	YEAR	
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	State	Zip Code (Plus 4)	мо		DAY	YEAR	
<u>Y</u>							\$
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ployer Mailing Address/Principal Place of 8	N218632						
			MC	).	DAY	YEAR	\$
I Name of Contributor			MC		DAY	YEAR	
ailing Address			WIL				\$
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ity		<u> </u>		[			\$
mployer Name			Occu	ipatio	n		
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Employer Name				, -			
Employer Mailing Address/Principal Place	of Business		<u> </u>				<del></del>
with a second of the second of							PAGE TOTAL
						tion 3.	EPAGE IOIAL

DSEB-502 (7-99)

# 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.

= at Ciling Committee of Candidate			1,,,,,	orting Per	1.2	TO 10/11/13	
e of Filing Committee or Candidate  Stewart Weenlew Js.			Fr	om _///	(13_		
S FEWAIT WEEKIEWNI.							
	·						
rends of Stewart Greenket							
ling Address							
.0.Box 155	State	Zip Code (Plus 4)	мо.	DAY	I 3	\$1818.89	
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eipt Description							
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14 Mary Latine	PM	19090 - 0155	9	19	13	\$60.00	
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willow Glove  accipt Description  Best monsement for purale expensual parents  will Name		190 10 -0155	1.7	8			
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#### SCHEDULE II

PAGE 8 OF 14

# 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	Reporting Peri	od //3	то <u>10/и//3</u>
Stewast ascenteal, Is.	From <u>vivi</u>		
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF	\$50.00 OR L	ESS PE	R CONTRIBUTOR
TOTAL for the Reporting Peri			
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$	250.00 (FRON	A PART	
TOTAL for the Reporting Per		\$ 0	
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (F	ROM PART C	3)	
TOTAL for the Reporting Per		1 .	
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.)		\$ 0	)

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

ne of Filing Committee or Candida	te		Hep	orting P	1, 1, 2	TO 16/4/13
Stewast Greenleuf, Jr.					(113	то 16/4/13
			*	DATE	VEAR.	AMOUNT
I Name of Contributor			MO	DAY	TEAR	\$
iling Address			мо.	DAY	YEAR	\$
	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
y Y	State	***				
scription of Contribution:						
Il Name of Contributor			МО.	DAY	YEAR	\$
			MO.	-DAY	YEAR	
ailing Address			MU.		7,2440	\$
ty	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
escription of Contribution:			<u> </u>		l	
easilisticit di administrati			Mo.	DAY	YEAR	
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alling Address		<u>,</u>	MO.	DAY	YEAR	\$
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Description of Contribution.				I BASE	YEAR	
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	State	Zip Code (Plus 4)	MO.	DAY	YEAR	<b>s</b>
City		_		<u> </u>		
Description of Contribution:						
						PAGE TOTAL
Enter Grand Total of Part					4	

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

e of Filing Committee or Candidate				From <u>L</u>	1113	To 10/21/13	
tewartarenlatisi.				DATE		AMOUNT	
			MO.		YEAR	\$	
Name of Contributor						<b>4</b>	
iling Address			MO.	DAY	YEAR	\$	
y	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$	
ployer of Contributor			Occupation	on			
ployer Mailing Address/Principal Place of Bus	ness		Descripti	on of Cor	itribution		
II Name of Contributor			MQ.	DAY	YEAR	\$	
siling Address			мо.	DAY	YEAR	\$	
ty	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$	
nplayer of Contributor			Occupati	ion			
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Employer of Contributor					Contribueir	20	
Employer Mailing Address/Principal Place of I	Business		Descr	iption of	Contributio		
						PAGE TOTAL	

### SCHEDULE III

### STATEMENT OF EXPENDITURES

		Reporting Period
ame of Filing Committee or Candidate		From 1/1/13 To 10/11/13
Stewart Greenland Sr.		
		MO, DAY YEAR Amount
Whom Poid  Chylizan Committee of Lower Merr  ailing Address	on and Akibelth	3 IS 13 \$150.00
ailing Address		Eventticket
3 W. Lancaster Avenus	State Zip Code (Plus 4)	0000
Ardmore	PA 15003-	MO DAY VEAR Amount
o Whom Paid		MO. DAY VEAR AMOUNT \$ 614.33
Bridget's Steak house		Description of Expanditure
8 W. Butler Pike		furl ruses ex genses
y ws variet tree	State Zip Code (Plus 4)	'
Ambler	[A ] 1700Z	MO. DAY YEAR Amount
o Whom Peid		3 31 (3 \$46.00
CVS Meiling Address		Stamps
2870 W. Marclandfood	State Zip Code (Plus 4	7(20)
Willowapue	PA 19096 -	
Ca Whom Paid		MO. DAY YEAR Amount \$308.46
Kir klundfrintrag		Description of Expenditure
516 KIK Rd.		Fundraiser thribations
City	State Zip Code (Plus 4	4)
Willow Gave	P.A 19090 -	MO DAY : YEAR Amount
The Peansylvanta Sucrety  Mailing Address		4 12 13 \$50.00
Mailing Address		Description of Expenditure  Oue 5
809 Bethlehenfitte, Suite on		
Erdenkim	PA 13038 -	
		MO. DAY YEAR Amount \$ 160.00
Abing ton Town Ship Republican C Mailing Address	Organization	Description of Expenditure
P.O.Pox 615		Event ticket and ad.
•	State Zip Code (Plus	4)
Abing lon	PA 19001 -	MO. DAY YEAR Amount
Mattanes Cont Republica	· lomnittee	4 5 13 \$ 150.00
Mailing Address		Description of Expenditure  Execut ficket
Munty-mer, County Republica Mailing Address Lounty Republica 314 E. Johnson Huy, Suite 20	State Zip Code (Plus	4)
Norristan	PA 10401 -	
	······································	MO: DAY SYEAR Amount \$ 160.00
Upper Mureland Republican Co	omnittee	Description of Expenditure
14 EucettAvegue		Event tizhet
	State Zip Code (Plus	
Willow Gove	PA 19090 -3	PAGE TOTAL
		er Page, Item D. \$ 1738.79

### SCHEDULE III

### STATEMENT OF EXPENDITURES

O itter or Candid	ista	Reporting Period
me of Filing Committee or Candid	1410	From 1/1/13 To 10/51/13
Stewart Greenleuf Ir.		
Whom Paid		MO. DAY YEAR Amount \$45.00
Area One GOP		Description of Expenditure
ailing Address		Event ticket
598 Main Stiect	State Zip Code (Plus 4)	
Red Hill	PA 18076 -1310	Amount
Whom Paid		3 4 13 \$45.00
rappe GOP		Description of Expenditure
30 W. Murn Street, Sur	te 144-346	Eventticket
ty	State Zip Code (Plus 4)	
Truppe		MO DAY YEAR Amount
Apper Munt Ismery Courty leiling Address	R. Dublican Club	9 15 13 \$60.00  Description of Expenditure
lating Address		Event ticket
	State   Zip Code (Plus 4)	)
ity	_	
o Whom Paid		MO. DAY YEAR Amount \$2.50.00
To Whom Poid  Creater Clensibe Patrie  Mailing Address	tie Association	7 4 (3 \$150.00  Description of Expenditure
Mailing Address		Contribution
P.O. BOX 72	State Zip Code (Plus 4	
Glantide	PA 17038 -00	Amount
To Whom Paid		7 4 13 \$50.00
Michael Kuznar Mailing Address		Description of Expenditure
1617 Potter Dr.	State   Zip Code (Plus	Parade help
CITY	State Zip Code (Plus 1)	
Pottstown	[P7: [7:0] =7:	MO. DAY YEAR Amount
To Whom Paid		7 4 13 \$50.00  Description of Expenditure
TIM WORL		Parale help
443 Mallard Bd.	State Zip Code (Plus	4)
Hathors	PA 19040 -311	19
To Whom Paid		MO. DAY YEAR AMOUNT
Meaghan Farley Mailing Address		Description of Expenditure
Mailing Address		Parale Kulp
City	State Zip Code (Plus	4)
		MO. DAY YEAR Amount
To Wham Paid		7 4 13 \$50.00
Emily Farley Mailing Address		Description of Expanditure
	State Zip Code (Plus	Pusale Help
City	_	
		PAGE TOTAL
	penditures on Page 1, Report Cove	er Page, Item D. \$ <b>60</b> 0.00

#### SCHEDULE !!!

### STATEMENT OF EXPENDITURES

ime of Filing Committee or Candid	ate		Hel	oorting P	////3	то 10/21/13
Stewart J. Greenlest	Tr.			rom 1		
					egeneralisi l	Amount
Whom Paid		ŀ	Mo. 7	DAY	13	\$ 50.00
Fin Fulley  iting Address			Descriptio	n of Exper	diture	
iiling Address <sup>6</sup>			Parade			
ty	State Zip Code	(Plus 4)				
		_				
Whom Paid			MO.	DAY	YEAR	Amount \$
			Description	n of Expe	nditure	<u> </u>
ailing Address						
ty	State   Zip Code	e (Plus 4)				
G.		-				
Whom Paid		<u></u>	MO.	DAY	YEAR	Amount
4410111 1 413						\$
ailing Address			Description	on of Expe	inaiture	
	State Zip Cod	e (Plus 4)	<u> </u>			
ity	318.6	_				
			MO.	DAY	YEAR	Amount
o Whom Paid						\$
lailing Address			Descripti	on of Expe	enditur <b>e</b>	
•			ļ			
city	State Zip Cod	le (Plus 4)	1			
			<u> </u>	- BAY	YEAR :	Amount
o Whom Paid			MO.	DAY	: TEAR.	s
de l'Inna Addrona			Descripti	on of Exp	enditure	
Mailing Address						
city	State Zip Coo	de (Plus 4)				
			<u>.</u>	<b></b>	<del>,</del>	Amount
o Whom Paid			MO.	DAY	YEAR	\$
			Descript	ion of Exp	enditure	
Malling Address						
City	State Zip Co	de (Pius 4)				
		_				
To Whom Paid			MO.	DAY	YEAR	Amount
			Descrio	ion of Ex	penditure	\$
Mailing Address			Descrip			
City	State Zip Co	de (Pius 4)				
City						
To Whom Paid			MO.	DAY	YEAR	Amount
10 Whom Faid				<u> </u>		\$
Mailing Address			Descrip	tion of Ex	penditure	
	State Zip Co	ode (Plus 4)				
City		**				<u> </u>
						PAGE TOTAL
	inditures on Page 1, Repor					\$50.00

### 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.

me of Filing Committee or Candidate		R	eporting	// //?	TO 10/41/13
Stewart Greenleaf Jr.			ELOHI I		TRE
					Outstanding Balance of Debt
me of Creditor					\$
iling Address	DATE DEBT INCURRED	MO.	DAY	YEAR	
У		State	Zip Code	(Plus 4)	
scription of Debt					
me of Creditor					Outstanding Balance of Deb
ailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR	
ty		State	Zip Code	(Plus 4)	
scription of Debt					
ame of Creditur					Outstanding Balance of Det \$
ailing Address	DATE DEBT INCURRED	MO	DAY	YEAR	
ity		State	Zip Cod	e (Plus 4)	
escription of Debt					
lame of Creditor					Outstanding Balance of De
failing Address	DATE DEBT INCURRED	MO.	DAY		
Sity		State	Zip Co	de (Plus 4) —	
Description of Debt					
Name of Creditor					Outstanding Balance of De \$
Mailing Address	OATE DEBT INCURRED	MO.	DAY		
Sity		State	Zip Co	de (Plus 4)	
Description of Debt					
Name of Creditor					Outstanding Balance of D
Mailing Address	DATE DEBT INCURRED	MO			
City		State	Zip Ci	ode (Plus 4 —	
Description of Debt					
				_	PAGE TOTAL
Enter Grand Total of Unpaid Debts or	Page 1, Report Cove	er Page,	ltem (	G.	<b>\$</b> O