### Commonwealth of Pennsylvania

### CAMPAIGN FINANCE REPORT

PAGE 1 OF 12 (COVER PAGE)

(NOTE: This report must be clear and legible, it may be typed or printed in blue

Filer Identification	n		Report			8 558 575 <b>1</b>		UNITED TO	1 2.			3.
Name of Filing Comm	nittee, Candidate or L	obbyist:	Filed By:		CAND	DATE	COM	MITTEE	X	LOB	BYIST	<i>J.</i>
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P.O. Box 1	55,417 Ba		d		-	·						
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C. Total Funds Avai	lable (Sum of Line	s A and B)	\$ 1	5,92	1.86		7		(	ထ္	Trans.	
D. Total Expenditure	es (From Schedule	10)		516	_					ၕၟ	Producedor Producedor	
E. Ending Cash Bala	nce (Subtract Line	D from Line C)			5.86					_		
F. Value of In-Kind	Contributions Rec	ceived (From Sch										
G. Unpaid Debts and	d Obligations (From	Schedule IV)	\$ []	167.	54							
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My Commission Expires April 23, 2017

Bureau of Commissions, Elections and Legislation

210 North Office Building Harrisburg, PA 17120-0029 (717) 787-5280

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

### Detailed Summary Page

Name of Filing Committee or Candidate

Frends of Stewart (Freenleaf From 10/12/13 To 11/15/13

1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER	CONT	RIBUTOR
TOTAL for the Reporting Period		\$ 0

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

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

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

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.)	<b>\$</b> O	
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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 Candida	te		-	Reporting	Period	
Friends of Stewart Gree	en leaf					/13 To 11/25/17
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# 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.)

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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

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ter Grand Total of Part C or				_	1	\$ D

# ALL OTHER CONTRIBUTIONS

PAGE 6 OF 12

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.)

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### OTHER RECEIPTS

PAGE \_\_\_\_\_\_OF\_\_\_IL\_\_\_\_

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	L C / C		Repor	ting Period	_
Friends of Steu	vart Greenleat		Fror	n 10/22/	13 To 11/25/13
uit Name					
Mailing Address					
City					
,	State	Zip Code (Plus 4)	MO. DA	Y YEAR	Amount
eceipt Description					\$
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Name	State	Zip Code (Plus 4)	MO. DAY		Amount
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I Name Illing Address		Zíp Code (Plus 4)		YEAR	Amount \$
ceipt Description  I Name Illing Address  y Seipt Description	State	Zip Code (Plus 4)	MO. DAY	YEAR	Amount

#### SCHEDULE II

PAGE 6 OF IL

# 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 Stewart Greenleaf	Reporting Pe		To 11/25/13
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF S	50.00 OR	LESS PE	R CONTRIBUTOR
TOTAL for the Reporting Period		]	
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$25	60.00 (FRON	A PART	<b>F)</b>
TOTAL for the Reporting Period	(2)	<b>\$</b> 0	
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FRO	M PART G		
TOTAL for the Reporting Period	(3)	<b>\$</b> O	
TOTAL VALUE OF			
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

Name of Filing Committee or Candidate					Reporting Period			
Friends of Stewart Greenleaf				From 10/11//3 To 11/15/13				
			DATE		AMOUNT			
Full Name of Contributor			MO.	DAY				
Mailing Address		·		<u> </u>		\$		
•			MO.	DAY	YEAR	\$		
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR			
					1	\$		
Description of Contribution:			· · · · · · · · · · · · · · · · · · ·	·		<u> </u>		
Full Name of Contributor								
Ton Name of Contributor			MO.	DAY	YEAR			
Mailing Address						\$		
			MO.	DAY	YEAR	\$		
City	State	Zip Code (Plus 4)	MO.	DAY	V=15			
		_	- MO	DAT	YEAR	<b>†</b> \$		
Description of Contribution:				·	<u> </u>			
Full Name of Contributor			MO.	DAY	YEAR			
Mailing Address		<u> </u>	<u> </u>			\$		
7,00,033			MO.	DAY	YEAR	\$		
City	State	Zip Code (Plus 4)			<u></u>	3		
	3.0.0	- Lip Code (Fius 4)	MO.	DAY	YEAR	\$		
Description of Contribution:	<u></u>							
Full Name of Contributor			MO.	DAY	YEAR			
Mailing Address						\$		
Mailing Address			MO.	DAY	YEAR	\$		
City	I Control					<b></b>		
,	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$		
Description of Contribution:								
Full Name of Contributor			MO.	DAY	YEAR			
					i cary	\$		
Mailing Address			Mo.	DAY	YEAR	_		
City						\$		
•	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$		
Description of Contribution:			<u>.l</u> _l			7		
full Name of Contributor			MO.	DAY	YEAR			
7.12			77.00		1250	\$		
Mailing Address			MO.	DAY	YEAR	<b>*</b>		
City						\$		
Sity	State	Zip Code (Plus 4)	Mo.	DAY	YEAR	\$		
Description of Contribution:		<del>-</del>	<u></u>		<u>_</u>	<b></b>		
nter Grand Total of Part F	ions Det	ailed	ı	PAGE TOTAL				
Summary Page, Section 2.				\$ 0				
					1			

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate				Reporting Period				
Friends of Stewart Green leaf			From	10/13/	B To II/sclB			
Full Name of Contributor			I MO.	DATE	YEAR	AMOUNT		
Malling Address					I FAN	\$		
			MO.	DAY	YEAR	\$		
City	State	Zip Code (Plus 4)	Mo.	DAY	YEAR			
mployer of Contributor					<u> </u>	\$		
_			Occupat	1011				
Employer Mailing Address/Principal Place	of Business		Descript	ion of Co	ntribution			
Full Name of Contributor			MO.	DAY	YEAR			
Mailing Address			1,100		TEAR	<b>\$</b>		
• • • • • • • • • • • • • • • • • • • •			MO.	DAY	YEAR	- s		
City	State	Zip Code (Plus 4)	MO	DAY	YEAR			
Employer of Contributor		_	Occupati	0.0		\$		
			Joseph					
Employer Mailing Address/Principal Place	of Business		Description of Contribution					
Full Name of Contributor			Mo.	DAY	YEAR	: The state of the		
Mailing Address				J.,,	1 1 1 1	\$		
Married Vagress			: MO."	DAY	YEAR	\$		
City	State	Zip Code (Plus 4)	Mo.	DAY	YEAR			
Employer of Contributor						\$		
				on				
mployer Mailing Address/Principal Place	of Business	· · · · · · · · · · · · · · · · · · ·	Descripti	on of Con	tribution			
ull Name of Contributor			1 120					
			MO	DAY	YEAR	\$		
Mailing Address			MO	DAY	YEAR	<b>s</b>		
Sity	State	Zip Code (Plus 4)	MO.	DAY	YEAR	1		
mployer of Contributor		-				\$		
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mployer Mailing Address/Principal Place of Business				Description of Contribution				
ull Name of Contributor								
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ity	State	Zip Code (Plus 4)	MÖ.	DAY	YEAR			
nployer of Contributor						\$		
			Occupatio	***				
mployer Mailing Address/Princips! Place of Business			Description of Contribution					
						DACE TOTAL		
nter Grand Total of Part G o ummary Page, Section 3.	on Schedule II,	In-Kind Contribu	tions De	tailed		PAGE TOTAL		
EB-502 (7-99)						\$ 0		

#### SCHEDULE III

### STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate		-		Reporting	Period			
Friends of Stewart Greenleaf				From 10/13/13 To 11/15/13				
	01				- P-1			
Heckler for DA			MO.	DAY	YEAR	Amount		
Heckler for DA  Mailing Address			Descrip	L)_ dion of Exp	13 enditure	\$ 150.00		
2373 Turk Road	Contribution							
Poyles town	PA	Zip Code (Plus 4) 18901 -1-919						
To Whom Paid		18701 -719	MO.	DAY	YEAR	Amount		
East Norriton Republican Committee	10	11)	1013	\$ 35.00				
3120 North Wales Road				tion of Exp				
City	State	Zip Code (Plus 4)	1,212	er Fue I	all tun	udraiser		
East Norriton To Whom Paid	PA	(9403 -						
Lower Mareland Backblege Can H	Lo 0		MO.	DAY "	YEAR	Amount \$ \$ 5,00		
Meiling Address	90		Descrip	tion of Exp	enditure	\$ \$ 3,00		
Lower Moreland Republican Commits Meiling Address 3401 Hillcroft Boad City	State	Zip Code (Plus 4)	Tick	et for a	event			
Hunting don Valley To Whom Poid	PA	19006 -4025	ŀ					
			MO.	DAY	YEAR	Amount		
Wells Foryo Mailing Address			Dosorio	ić tion of Expe	13	\$ 5.00		
43 East Main Street			Ser	viccha	enaiture			
Norrabun	State	Zip Code (Plus 4)		ZISC S NO	ye			
To Whom Paid	PA	19404 -	, <u>.</u>					
WAO Enterprises			MO.	)- B	YEAR.	Amount <b>\$ (000.0</b> 0		
			Descrip	ion of Expe	nditure			
1524 Delancey Street, 4th Floor	State	Zip Code (Plus 4)	Web	site w	ork			
Philadelphia	PA	19102 -	<u></u>					
Republican Party of Page 1 mass			MO.	DAY	YEAR	Amount		
Republican Party of Pennsylvania			Descript	ion of Expe	13 Inditure	\$250.00		
112 State Street	Terre	T: 0	Tick	et for l	uncha	4		
Harrisbarg	State PA	Zip Code (Plus 4)						
To Whom Paid		1 / 10 (	MO.	DAY	YEAR	Amount		
Heather Greenleaf			lı	14	13	\$ 46.00		
417 Bastram Road				ion of Expe		n Stumps		
	State	Zip Code (Plus 4)	<u> </u>	~ CH1 561	CCMF F2	N JAOVAPL		
Willow Grave To Whom Poid	PA	19090 -		***************************************				
Wells Fury D Mailing Address			MO.	IS-	YE NA	Amount \$ 5.00		
				ion of Expe				
43 E. Main Street	State	Zip Code (Plus 4)	sen	re Cho	orge.	····		
Norristoun	PA	19404 -						
						PAGE TOTAL		
Enter Grand Total of Expenditures on Pa	ge 1, F	Report Cover Pa	age, It	em D.		\$1526.00		

Reporting Period

#### SCHEDULE IV

Name of Filing Committee or Candidate

#### STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period.

Friends of Stewart Greenleaf		From <u>10/11</u>	113 TO 11/25/13
Name of Creditor			Outstanding Balance of Debt \$526.46
1280 1.10/d R	DATE MC	6 13	
Montgomeryville,	State PA	Zip Code (Plus 4	1
Candy Packaging Name of Creditor			Control of Delta
Koyal Enterprises			Outstanding Balance of Debt \$744.08
77764 4 0 1 4 4	DATE DEBT INCURRED II	B 13	
Mt. Laurel Description of Debt	NJ	08054	
Canay for purches			
Name of Creditor			Outstanding Balance of Debt
	DATE MC DEBT INCURRED	DAY YEAR	<b>1.</b>
City	State	e Zip Code (Plus 4	7
Description of Debt			
Name of Creditor			Outstanding Balance of Debt
	DATE MO DEBT INCURRED	DAY YEAR	1
City	State	Zip Code (Pius 4	J
Description of Debt			
Name of Creditor	Outstanding Balance of Debt \$		
	DATE MC DEBT INCURRED	). DAY YEAF	
City	State	e Zip Code (Plus 4 	
Description of Debt	-		
Name of Creditor	Outstanding Balance of Debt		
	DATE MC DEBT INCURRED	DAY YEAR	
City	State	P Zip Code (Plus 4	, , , , , , , , , , , , , , , , , , ,
Description of Debt			
			PAGE TOTAL
Enter Grand Total of Unpaid Debts on Page 1, Rep	ort Cover Page,	, Item G.	\$1267.54