•	C	AMPAIG	N FIN	ANCE	REPORT	-	PAGE 1	OF	COVER PAGE				
· · · · · · · · · · · · · · · · · · ·		st be clear and		may be 1	yped or printed		black in	1k,)	19.11.11.11.11.11.11.11.11.11.11.11.11.1				
Filer Identification			Report Filed By:		CANDIDATE		UTTEE	X	LOBBYIST				
	ittee, Candidate or Lobbyi ewart Greenlea				······································								
P.O. Box 15	5, 417 Bartram	Boad					_						
city: Willow Gio	ve			S	itate: PA		Zip Code: 19090 - 0155						
TYPE OF REPORT	OTH TUESDAY	2ND FRIDA PRE-PRIMA	11154년 중 관계·2019년		DAY T PRIMARY	AMEND		YES	NO >				
	OTH TUESDAY 4.	2ND FRIDA		The second second	T ELECTION	REPORT	CARGE AREA ADDING	YES	No X				
(place X to the right of report type)	ANNUAL 7.	YEAR	2013	FILIN	G METHOD CHECK ONE	PAP	Martin and a	\times	DISKEN 12				
Name of Office Soug	ht by Candidate:			1. 1. 6.	TE OF ELECTIO	Number	Offic Code		arty Count ode Code				
Montgamery	County Contiller			MO	DAY YEAR		OTH	7 RE	EP 46				
10010									IONS FOR COD				
		MO. DAY Y	EAR	MO	DAY YEAR		FOR OF	FICE	SE ONLY				
Summary of R and Expenditur		11 26 20	13 T	o /1	31 2013								
A. Amount Brough	t Forward From Last R	eport	\$	14,39	5.86			2	a				
B. Total Monetary	Contributions and Rece	ipts (From Sch	edule I) \$	0			- :-	2014 JAN 28 0FF15					
C. Total Funds Av	ailable (Sum of Lines A	and B)	\$	14,39	5.86			JAN	1999 1999 1999 1999 1999 1999				
D. Total Expenditu	res (From Schedule III)		\$	5,158	. 98			FF 28	in a constant				
E. Ending Cash Ba	lance (Subtract Line D	from Line C)	\$	9,236	. 88				-				
F. Value of In~Kir	nd Contributions Receiv	ed (From Sched	dule II) 💲	Ó			्र - ः ्						
G. Unpaid Debts a	nd Obligations (From S	chedule IV)	\$	0			20	n .					
			AFFIDAVIT	SECTIO	N			•	-				
PART I - If this	is a Committee report,	treasurer sign	here. If th	nis is a (Candidate report	, candidate	sign he	r e .	이 가 것 은 것 네.				
I swear (or affirm) t correct and complete	hat this report, in COMMON e.	Notarial Seal		er or com	puter diskette, are	to the best	of my kni	owledge -	and belief true				
•	ribed before me this Norristo	R. McClure, Notary	y County			2		>					
24 day	Mr Com	mission Expires Sept	. 1, 2015		T. 15	·Sh	$\nu \not -$						
1/ nitth	PALCANI	0,			Signatu Eric	· · · · · ·	Submittin	ng Report					
	Signature	~	ì			Printed N	ame						
My commission ex		15 av vr.		61	Area Code	2		7700 Telephon	2 e Number				
	W.C. 0												
	is a report of a Cand						$(\omega_{ij})_{ij} = (\omega_{ij})_{ij}$						
i swear (or affirm) t (P.L. 1333, No. 320)	hat to the best of my kno as amended.	wledge and beliet	f this politica	al commit	tes has not violate	ed any provis	ions of t	he Acto	f June 3, 1937				
Sworn to and subs	cribed before me this				120	$1 \longrightarrow$							
27h day	of January_	2	<u>∘14 </u>			Signature of (Candidata		<u></u>				
Stalinging	d Mike		ļ	•		signature of c	. ^	Jr.					
Supress	Signature ALL-22	7 (1)-7			215	Printed I	lame 972-	1000					
 My commission ex 		<u>- 201 </u> AY YR.	<u> </u>		41) Area Code				ne Number				
STEPHA	NOTARIAL SEAL THE OF PERSONNUL VAN NOTARIAL SEAL THENT O NIE A. DISS, Natury Public. Twp., Montgomery County Ission Expires April 23, 2017	Sate 🖲 Bu											

PAGE 2 OF 12

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
Friends of Stewart Greenleaf	From 11/26/13 To 12/31/13

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)	
Contributions Received from Political Committees (Part A)	\$ ()
All Other Contributions (Part B)	\$ ()
TOTAL for the Reporting Period (2)	\$ (7)

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

OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHE			

TOTAL for the Reporting Period

(4) \$ ()

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.)	

104 <u>5</u> 4 <u>12</u>

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				Reporting	Period	I
Friends of Stewart Greenleaf				From <u>l</u>	1/26/1	<u>3 то 12/31/13</u>
		, , , , , , , , , , , , , , , , , , , ,		DATE		AMOUNT
Full Name of Contributing Committee			<u></u>	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4) _	- MO	DAY	YEAR	\$
Full Name of Contributing Committee			MO.	DAY	YEAR	
Mailing Address		· · · · · · · · · · · · · · · · · · ·	MO.	DAY	YEAR	\$\$
City	State	Zip Code (Plus 4)	MOL	DAY	YEAR	· · · · · · · · · · · · · · · · · · ·
Full Name of Contributing Committee			MO,	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
-		······	inity,			\$
City	State	Zip Code (Plus 4) 	<u> MO.</u>	DAY	YEAR	\$
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4) —	MO.	DAY	YEAR	\$
Full Name of Contributing Committee			MO	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	<u> </u>		MO	DAY	YEAR	\$
Mailing Address			MO,	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee			MO.	DAY	YEAR	
Mailing Address			MO.	DAY	YEAR	\$
						\$
City	State	Zip Code (Plus 4) —	<u>MO,</u>	DAY	YEAR	\$
Full Name of Contributing Committee	-		MO	DAY	YEAR	\$
Mailing Address			MO	DAY	YEAR	\$
City	State	Zip Code (Plus 4) —	MO.	DAY	YEAR	\$
Enter Grand Total of Part A on Schee	dule I,	, Detailed Summar	y Page	, Sectio	on 2.	PAGE TOTAL \$ ()

В		
-		

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PART **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 Cand		porting F				
FriendsofStewartC		From <u>l</u>	[126/13	то <u>12/31/13</u>		
				DATE		AMOUNT
Full Name of Contributor			MO.	DAY	NEAR 🔤	\$
Mailing Address			MO.	DAY	YEAR	
-						\$
City	State	Zip Code (Plus 4)	MOL 1	DAY	YEAR	\$
Full Name of Contributor			MO.	DAY	YEAR	
						\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
						\$
Full Name of Contributor			MO.	DAY	YEAR	\$
Mailing Address	<u></u>		MO.	DAY	YEAR	\$
						· · · · · · · · · · · · · · · · · · ·
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributor	<u> </u>		MÓ.	DAY	YEAR	
						\$
Mailing Address			MO	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
		_				\$
Full Name of Contributor			MQ.	DAY	YEAR	\$
Mailing Address		<u></u>	MO.	DAY	YEAR	
						\$
City	State	Zip Code (Plus 4) 	MO.	DAY	YEAR	\$
Full Name of Contributor			MQ	DAY	YEAR	
						\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MÓ.	DAY	YEAR	
						\$
Full Name of Contributor			мо,	DAY	YEAR	\$
Mailing Address		<u> </u>	MO.	DAY	YEAR	\$
		Zip Code (Plus 4)	-		Verie	ļ -
City	State	Lip Code (Flus 4)	MO.	DAY	YEAR	\$
Full Name of Contributor			MO	DAY	YEAR	\$
			-		VEXE	↓
Mailing Address			MO	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	¢
		-		<u> </u>		\$
		_	_	~	_	PAGE TOTAL
Enter Grand Total of Part	B on Schedule I,	Detailed Summar	ry Page,	Sectio	on 2.	\$ ()

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PART C

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

1 AUL 3 U. 1L

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	Ī	Reporting				
Friends of Stewart Greenleaf					1/26/17	<u>З то 14/31/13</u>
				DATE		AMOUNT
Full Name of Contributing Committee			<u>мо.</u>	DAY	YEAR	\$
Mailing Address			MO:	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	. KAO	DAY	YEAR	•
	0.0.0		<u> MO.</u>		TCAN	\$
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Mailing Address		· · · · · · · · · · · · · · · · · · ·	MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
		······································				•
Full Name of Contributing Committee			<u>MO.</u>	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
			MO.	DAY	YEAR	
Full Name of Contributing Committee						\$
Mailing Address			MO.	DAY.	YEAR	\$
City	State	Zip Code (Plus 4) —	MO.	DAY	YEAR	\$
Full Name of Contributing Committee			MO	DAY	YEAR	\$
Mailing Address		a version de la comme sur la casa de la comme de la	MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
		-				•
Full Name of Contributing Committee			MO.:	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	. мо.	DAY	YEAR	\$
			MO.	DAY	YEAR	
Full Name of Contributing Committee						\$
Mailing Address				DAY	YEAR	\$
City	State	Zip Code (Plus 4) —	MO.	DAY	YEAR	\$
Full Name of Contributing Committee			MQ.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
		<u> </u>				\$
Enter Grand Total of Part C on Sched	luie 1.	Detailed Summary	y Page	, Sectio	n 3.	PAGE TOTAL \$ ()

•	0	<u>о</u> _	12

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				porting l		
Friends of Stewart Greenleaf	<u>)</u>					To 12/31/13
I TIENUS OF STEWART WREENeas			-	DATE		AMOUNT
Full Name of Contributor		······································	MO.		YEAR	\$
Mailing Address			MO.	DAY	YEAR	-
						\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Employer Name	1.		Occupatio	'n		
						an a
Employer Mailing Address/Principal Place of Business						
Full Name of Contributor			MO.	DAY	YEAR	\$
			MO.	DAY	YEAR	-
Mailing Address						\$
City	State	Zip Code (Plus 4)	мо.	DAY	YEAR	\$
Employer Name			Occupatio	on		
			<u> </u>			
Employer Mailing Address/Principal Place of Business						
Full Name of Contributor			MO,	DAY	YEAR	<u>~</u>
					NEAD	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Employer Marco		-	Occupati	on		
Employer Name						••••••••••••••••••••••••••••••••••••••
Employer Mailing Address/Principal Place of Business						
Full Name of Contributor			MO.	DAY	YEAR	
						\$
Mailing Address			<u>MO.</u>	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
			Occupati	on		
Employer Name				- 		
Employer Mailing Address/Principal Place of Business						
Full Name of Contributor			MO.	DAY	YEAR	
						\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO,	DAY	YEAR	\$
			Occupat			
Employer Name						
Employer Mailing Address/Principal Place of Business			<u></u>			
						PAGE TOTAL

Enter Grand Total of Part D on Schedule I, Detailed Summary Page, Section 3.

FAUE	(/	L
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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.

Jame of Filing Committee or Candidate					Reporting Period			
Friends of Stewart Greenleaf				From _	1 / 16/1	<u>13 то 12/31/13</u>		
ili Name								
ailing Address			• •					
· · · · · · · · · · · · · · · · · · ·		Zip Code (Plus 4)	1.110			Amount		
ity	State		MO	DAY	YEAR	\$		
eceipt Description	_	1.1.1.11000000000000000000000000000000	1	4				
uli Name								
n neme								
ailing Address								
ity	State	Zip Code (Plus 4)	MOL	DAY	YEAR	Amount		
						\$		
eccipt Description					•			
ult Name								
lailing Address								
ity	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount		
						\$		
ecsipt Description								
ull Name								
tailing Address	<u> </u>	<u></u>						
ity	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount \$		
eceipt Description					4	L.*		
ull Name								
failing Address		······································			N			
						Amount		
lity	State	Zip Code (Plus 4) 	MO.	DAY	YEAR	\$		
eceipt Description	<u> </u>			<u></u> I	<u> </u>			
uii Name								
uir rearne								
Mailing Address								
Dity	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount		
		- 				\$		
Receipt Description								
						PAGE TOTAL		

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SCHEDULE II

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 Period
Friends of Stewart Greenleat	From 11/16/13 To 12/31/13

 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR

 TOTAL for the Reporting Period

 (1)
 \$

 (1)
 \$

2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)

TOTAL for the Reporting Period

(2) \$ ()

IN-KIND CONTRIBUTION RECE	IVED - VALUE OVER \$250.00 (FROM	PART G		
	TOTAL for the Reporting Period	(3)	\$ ()	

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.)	U

<u>y</u>	UF.	(L.	

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 Greenles	il			From	1/26/1	3_ To 12/31/13
				DATE		
Fuli Name of Contributor			<u>MO.</u>		YEAR	\$
Mailing Address		······································	MO.	DAY	YEAR	*
						\$
City	State	Zip Code (Plus 4) —	MO.	DAY	YEAR	\$
Description of Contribution:			•			
Full Name of Contributor		·····	MO.	DAY	YEAR	· · · · · · · · · · · · · · · · · · ·
						\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4) —	MQ.	DAY	YEAR	\$
Description of Contribution:	1		1	l	I I	
			1 1 1 1 1	0.6.2		
Full Name of Contributor			MO.	DAY	YEAR	\$
Mailing Address		· · · · · ·	- MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Description of Contribution:			<u> </u>			¥
Full Name of Contributor			MQ.	DAY.	YEAR	\$
Mailing Address		All Annual and the second s	MO,	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO,	DAY	YEAR	\$
Description of Contribution:		-				Ψ
Full Name of Contributor			MO.	DAY	YEAR	\$
Mailing Address			. Mo.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		- nav-	YEAR	· · · · · · · · · · · · · · · · · · ·
	State		MO,	DAY	TEAN.	\$
Description of Contribution:						
Full Name of Contributor			MO.	DAY	YEAR	\$
Mailing Address			MO	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
		-				\$
Description of Contribution:						
Enter Grand Total of Part F on Sche	dula 1	I In-Kind Contribut		atailad		PAGE TOTAL
Summary Page, Section 2.		, mennu contribut		oranea		\$ ()

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T AUC	10	ΨF) –

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate			Re	porting f	eriod	
Friends of Stewart Greenle	af			From <u> </u>	126/13	<u>з то 12/31/13</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			Occupatio	'n		
Employer Mailing Address/Principal Place of Business		······································	Descriptio	on of Cont	ribution	<u></u>
Full Name of Contributor			MO.	DAY	YEAR	\$
				DAY	YEAR	· · · · · · · · · · · · · · · · · · ·
Mailing Address			MO.	DAY	TEAN	\$
City	State	Zip Code (Plus 4)	мо.	DAY	YEAR	\$
Employer of Contributor			Occupatio			
Employer Mailing Address/Principal Place of Business			Descriptio	on of Con	tribution	· · · · · · · · · · · · · · · · · · ·
				DAY	YEAR	
Full Name of Contributor						\$
Mailing Address			MO,	DAY	YEAR	\$
City	State	Zip Code (Plus 4) —	MOL	DAY	YEAR	\$
Employer of Contributor	<u> </u>		Occupatio	n	L	
Employer Mailing Address/Principal Place of Business			Descripti	on of Con	tribution	· · · · · · · · · · · · · · · · · · ·
Full Name of Contributor			MO.	DAY	YEAR	
						\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4) —	MO.	DAY	YEAR	\$
Employer of Contributor	1	L	Occupati	0n	L	
Employer Mailing Address/Principal Place of Business		<u></u>	Descripti	ion of Con	tribution	
Full Name of Contributor			MO.	DAY	YEAR	
Full Name of Contributor						\$
Mailing Address			MQ.	DAY	YEAR	\$
City	State	Zip Code (Plus 4) 	MQ.	DAY	YEAR	\$
Employer of Contributor	1	l	Occupati	on	<u></u>	•
Employer Mailing Address/Principal Place of Business			Descript	ion of Cor	stribution	а турий н түү н алтар түүн түүн түүн түүн алтар түүн түүн түүн түүн түүн түүн түүн түү
						PAGE TOTAL

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.

PAGE TOTA

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<u> </u>			_	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting	Period	
Friends of Stewart Greenleaf			From_	11/26/1	13 To 12/31/13
To Whom Paid Royal Enterprises Mailing Address		MO			Amount
Koyal Enterprises		1)	- 3 iption of Ex	(3	\$ 741.08
Mailing Address 27 Roland Avenue City			ndy fore	•	
City	State Zip Code (Pl	is 4)	<u> wy 141</u>	<u>alley + y</u>	
Mt. Laurel	NJ 09054 -				
To Whom Paid		MO		YEAR	Amount \$ 526,46
Complete Packaying Mailing Address	<u> </u>	1)	- 3 iption of Ex	/3	\$ 9 20, 76
BBR Well BACK		Pag	hoging fo	ic Candu	
1380 Welsh Road	State Zip Code (P)	us 4)			
Montgomery ville	PA 18136 -				
	1.	MC	and the second second		Amount \$1000.00
Munthomery County Ropublican Commis	ftee	() Desci	- <u> </u>	/3 openditure	\$1000.00
314 E. Johnson Hwy, Suite 200					ontribution
	State Zip Code (P)	us 4)			
Norristown	PA 19401-			the second s	
To Whom Paid		10 MC), DAY	YEAR 13	Amount \$1098.50
Heather Greenleaf Mailing Address		Desc	iption of E>		
417 Bartran Boas		Re	in burses	mert fo	, holiday cards
City	State Zip Code (P)	us 4)			,
Willow Grove	PA 19090 -				Amount
To Whom Paid		<u>ме</u> Л	and the second	I S	\$414.00
Ace SIGN Company Mailing Address		Desc	ription of Ex	xpenditure	
402 North 4th Street		La	bels for C	andy	
Spring field	State Zip Code (P JL –	us 4)		·	
To Whom Paid		े	D. DAY	YEAR	Amount
		(1		13	\$ 5.00
Wells Fargo Meiling Address			ription of E		
43 E. Main Street	State Zip Code (P)) e	vuile Ch	arge	
	State Zip Code (P PA U404 -			v	
Norristown To Whom Paid		M	D. DAY	YEAR	Amount
<u>Stewart J. Greenleaf, Jr.</u> Mailing Address		11	- >>	13	Amount \$ 1373.94
Mailing Address			ription of E		Pour live in Samel.
417 Bartrom Road	State Zip Code (P	(Pennsylvania Society
WillowGrove	PA 19090 -	do	sts, pus	stage, ch	ristmoscard labels
To Whom Paid				Y YEAR	Amount
·			ription of E	voerditura	\$
Mailing Address		Des	A UPLION OF E	~penditura	
City	State Zip Code (F	lus 4)			
	-				
					PAGE TOTAL
Enter Grand Total of Expenditures on P	age 1, Report Co	ver Page	Item D.	•	\$ 5,158.98

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PAGE	OF	14

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		F	Reporting	Period	- · · · · ·
Friends of Stewart Greenleaf			From _	1/26/1	<u>З то 12/31/13</u>
ame of Creditor					Outstanding Balance of Debt
					\$
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR	
Sity		State	Zip Code -	(Plus 4)	
Description of Debt	·····				
lame of Creditor	Outstanding Balance of Deb				
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR	
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Enter Grand Total of Unpaid Debts on Pa	age 1, Report Cove	r Page,	ltem G.		\$ D

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