

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: 2003023	Report Filed By: <input checked="" type="checkbox"/> CANDIDATE ^{1.} <input checked="" type="checkbox"/> COMMITTEE ^{2.} <input type="checkbox"/> LOBBYIST ^{3.}
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Name of Filing Committee, Candidate or Lobbyist: **FRIENDS OF BRUCE CASTOR, INC.**

Street Address: **P.O. Box 800**

City: **West Conshohocken** State: **PA** Zip Code: **19428 - 0800**

TYPE OF REPORT (place X to the right of report type)	1. 15th TUESDAY PRE-PRIMARY	2. 2ND FRIDAY PRE-PRIMARY	3. 30 DAY POST-PRIMARY	AMENDMENT REPORT	YES	NO	X
	4. 15th TUESDAY PRE-ELECTION	5. 2ND FRIDAY PRE-ELECTION	6. 30 DAY POST-ELECTION	TERMINATION REPORT	YES	NO	X
	7. ANNUAL REPORT	XX	YEAR 2009	FILING METHOD CHECK ONE	PAPER	X	DISKETTE

Name of Office Sought by Candidate:	DATE OF ELECTION	District Number	Office Code	Party Code REP	County Code
	MO. DAY YEAR				

(SEE INSTRUCTIONS FOR CODES)

Summary of Receipts and Expenditures from:	MO.	DAY	YEAR	To	MO.	DAY	YEAR
		11	24	2009		12	31
A. Amount Brought Forward From Last Report				\$	672.85		
B. Total Monetary Contributions and Receipts (From Schedule I)				\$	0.00		
C. Total Funds Available (Sum of Lines A and B)				\$	672.85		
D. Total Expenditures (From Schedule III)				\$	42.27		
E. Ending Cash Balance (Subtract Line D from Line C)				\$	630.58		
F. Value of In-Kind Contributions Received (From Schedule II)				\$	0.00		
G. Unpaid Debts and Obligations (From Schedule IV)				\$	73,000.00		

FOR OFFICE USE ONLY

RECEIVED

JAN 19 A 9:49

OFFICE OF
ELECTION 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 computer diskette, are to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this 15 day of January, 2010

Beverly Green
Signature

My commission expires 6 22 2011
MO. DAY YR.

NOTARIAL SEAL
BEVERLY GREEN, Notary Public
West Conshohocken Boro., Montgomery Co
My Commission Expires June 22, 2011

Ross Weiss
Signature of Person Submitting Report

ROSS WEISS, ESQUIRE, TREASURER
Printed Name

(610) 941-2361
Area Code Daytime Telephone Number

PART II

PART II If this is a report of 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 (P.L. 1-333, No. 320) as amended.

Sworn to and subscribed before me this 15 day of January, 2010

Beverly Green
Signature

My commission expires 6 22 2011
MO. DAY YR.

Bruce L. Castor, Jr.
Signature of Candidate

BRUCE L. CASTOR, JR.
Printed Name

(215) 977-1000
Area Code Daytime Telephone Number

NOTARIAL SEAL
BEVERLY GREEN, Notary Public
West Conshohocken Boro., Montgomery Co
My Commission Expires June 22, 2011

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

Duffin, Noreen

From: Weiss, Ross
Sent: Friday, January 15, 2010 11:43 AM
To: Duffin, Noreen
Subject: FW: RECEIPT OF CAMPAIGN FINANCE REPORT

Ross Weiss | Cozen O'Connor
Office Managing Partner
200 Four Falls Corporate Center, Suite 400, P.O. Box 800 | West Conshohocken, PA 19428-0800
| P: 610.941.2361 | F: 877.295.6883
rweiss@cozen.com | www.cozen.com

-----Original Message-----

From: bcel@state.pa.us [mailto:bcel@state.pa.us]
Sent: Friday, January 15, 2010 11:42 AM
To: Weiss, Ross
Subject: RECEIPT OF CAMPAIGN FINANCE REPORT

TO: Ross Weiss, Esquire
FILER: Friends of Bruce Castor, Inc.
FILER ID NUMBER: 2003023

The Department of State has received the Campaign Finance Report you submitted on behalf of the filer listed. Please remember to submit the required notarized affidavit(s) to the Department via regular mail. The affidavits appear on the cover page of the report, which you may print from the program.

If you find it necessary to amend the report, you must create a new report for the cycle and mark it as "amended."

If you have any questions about your report submission, you may contact the Department by way of a reply to this e-mail.

Campaign Finance Division
Pennsylvania Department of State
Bureau of Commissions, Elections and Legislation
210 North Office Building Harrisburg PA 17120
717-787-5280

RECEIVED
2010 JAN 19 A 9:49
OFFICE OF
VOTER SERVICES
HARRISBURG, CO. PA.

Commonwealth Of Pennsylvania
Campaign Finance Report

Filer Identification Number: 2003023		Report Filed By: Committee	
Name of the Filing Committee, Candidate or Lobbyist: Friends of Bruce Castor, Inc.			
Street Address: P.O. Box 800			
City : West Conshohocken	State: PA	Zip Code: 19428	
Type of Report: Annual Report			
Amendment Report? No		Termination Report? No	
Date of Election:			
District Code:		Party Code: Republican	
Office Code:		County Code: Montgomery	
Summary of Receipts and Expenditures			For Office Use Only
From: 11/24/2009 To: 12/31/2009			RECEIVED 2010 JAN 19 A 9:49 OFFICE OF VOTER SERVICES
A. Amount Brought Forward From Last Report		\$672.85	
B. Total Monetary Contributions And Receipts (From Schedule I)		\$0.00	
C. Total Funds Available (Sum Of Lines A And B)		\$672.85	
D. Total Expenditures (From Schedule III)		\$42.27	
E. Ending Cash Balance (Subtract Line D From Line C)		\$630.58	
F. Value Of In-Kind Contributions Received (From Schedule II)		\$0.00	
G. Unpaid Debts And Obligations (From Schedule IV)		\$73,000.00	

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 filed on paper or by electronic medium, are to the best of my knowledge and belief, true, correct and complete.

Sworn to and subscribed before me this _____ day of _____ 20 _____

Signature

My Commission Expires _____
MO. DAY YR.

Signature of Person Submitting Report

Printed Name

Area Code Daytime Telephone Number

Part II: If this is a report of 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 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this _____ day of _____ 20 _____

Signature

My Commission Expires _____
MO. DAY YR.

Signature of Candidate

Printed Name

Area Code Daytime Telephone Number

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

Commonwealth Of Pennsylvania
Campaign Finance Report

Schedule I
Contributions and Receipts
Detailed Summary Page

Name of Filing Candidate or Committee Friends of Bruce Castor, Inc.	Reporting Period: From: 11/24/2009 To: 12/31/2009
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1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
Total For the Reporting Period: (1)	\$0.00

2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)	
Contributions Received From Political Committees (Part A)	\$0.00
All Other Contributions (Part B)	\$0.00
Total For the Reporting Period: (2)	\$0.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$0.00
All Other Contributions (Part D)	\$0.00
Total For the Reporting Period: (3)	\$0.00

4. Other Receipts, Refunds, Interest Earned , Returned Checks, Etc . (From Part E)	
Total For the Reporting Period: (4)	\$0.00

Total Monetary Contributions and Receipts During this Reporting Period	
Total of Boxes 1,2,3 and 4	\$0.00

Campaign Finance Report

Part B

All Other Contributions

\$ 50.01 to \$250.00

Name of Filing Candidate or Committee	Reporting Period: From: _____ To: _____
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Full Name and Mailing Address of Contributor	Date(s)	Amount(s)

Page Total

Campaign Finance Report

Part C

Contributions Received From Political Committees

Over \$250.00

Name of Filing Candidate or Committee	Reporting Period: From: _____ To: _____
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Full Name and Mailing Address of Contributor	Date(s)	Amount(s)

Page Total

Commonwealth Of Pennsylvania
Campaign Finance Report

Part D

All Other Contributions

Over \$250.00

Name of Filing Candidate or Committee	Reporting Period: From: _____ To: _____
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Full Name and Mailing Address of Contributor	Date(s)	Amount(s)
Employer Name and Mailing Address	Occupation	

Page Total

Commonwealth Of Pennsylvania
Campaign Finance Report

Schedule II
In-Kind Contributions Of 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 Candidate or Committee Friends of Bruce Castor, Inc.	Reporting Period: From: 11/24/2009 To: 12/31/2009
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1. Unitemized In-Kind Contributions Received - Value of \$ 50.00 or Less Per Contributor	
Total For the Reporting Period(1)	\$0.00

2. In-Kind Contributions Received - Value of \$ 50.01 To \$250.00 (From Part F)	
Total For the Reporting Period(2)	\$0.00

3. In-Kind Contributions Received - Value Over \$250.00 (From Part G)	
Total For the Reporting Period(3)	\$0.00

Total In-Kind Contributions and Receipts During this Reporting Period	
Total of Boxes 1,2 and 3	\$0.00

Campaign Finance Report

Part F

In-Kind Contributions Received

Value of \$50.01 to \$250.00

Name of Filing Candidate or Committee	Reporting Period: From: _____ To: _____
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Full Name and Mailing Address of Contributor		
Description of Contribution	Date(s)	Amount(s)

Page Total

Campaign Finance Report

Part G

In-Kind Contributions Received

Value Over \$250.00

Name of Filing Candidate or Committee	Reporting Period: From: _____ To: _____
--	---

Full Name and Mailing Address of Contributor		
Description of Contribution	Date(s)	Amount(s)
Employer Name and Mailing Address	Occupation	

Page Total

Commonwealth Of Pennsylvania
Campaign Finance Report

Schedule III
Statement of Expenditures

Name of Filing Candidate or Committee Friends of Bruce Castor, Inc.	Reporting Period: From: 11/24/2009 To: 12/31/2009
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Full Name and Mailing Address to Whom Paid		
FirsTrust 15 E. Ridge Pike Conshohocken PA 19428		
Description of Expenditure	Date(s)	Amount(s)
Service Charge	12/31/2009	\$20.10
Service Charge.	11/30/2009	\$22.17

Page Total	\$42.27
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Commonwealth Of Pennsylvania
Campaign Finance Report

Schedule IV

Statement of Unpaid Debts

Name of Filing Candidate or Committee Friends of Bruce Castor, Inc.	Reporting Period: From: 11/24/2009 To: 12/31/2009
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Full Name and Mailing Address of Creditor Bruce L. Castor, Sr. 445 West Prospect Avenue North Wales PA 19454		
Description of Debts	Date(s)	Amount(s)
Loan to Campaign Committee	04/07/2004	\$36,500.00
Full Name and Mailing Address of Creditor Diane S. Castor 445 West Prospect Avenue North Wales PA 19454		
Description of Debts	Date(s)	Amount(s)
Loan to Campaign Committee	04/07/2004	\$36,500.00

Page Total	\$73,000.00
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A PROFESSIONAL CORPORATION

SUITE 400 200 FOUR FALLS CORPORATE CENTER P.O. BOX 800 WEST CONSHOHOCKEN, PA 19428-0800
610.941.5400 800.379.0695 610.941.0711 FAX www.cozen.com

January 15, 2010

VIA FEDERAL EXPRESS

Ross Weiss
Direct Phone 610.941.2361
Direct Fax 877.295.6883
rweiss@cozen.com

Department of State
Bureau of Commissions, Elections and Legislation
210 North Office Building
Harrisburg, PA 17120

Re: Friends of Bruce Castor, Inc. (Filer I.D. No. 2003023)

Dear Sir/Madam:

Enclosed please find the signed and notarized Campaign Finance Report Cover Sheet (Affidavit) for the Campaign Committee, the Report for which was filed on-line on this date, as evidenced by the enclosed e-mail confirmation.

Very truly yours,

COZEN O'CONNOR

By: Ross Weiss

RWngd

Enclosure

cc: Bureau of Elections, Montgomery County
Bruce L. Castor, Jr.

RECEIVED
2010 JAN 19 A 9:49
OFFICE OF
VOTER SERVICES
MONTG. CO. PA.