

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: <input type="checkbox"/>	Report Filed By: <input type="checkbox"/>	CANDIDATE <input checked="" type="checkbox"/>	COMMITTEE <input type="checkbox"/>	LOBBYIST <input type="checkbox"/>
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Name of Filing Committee, Candidate or Lobbyist:
Stewart J. Greenleaf, Jr.

Street Address:
417 Bartram Road

City: Willow Grove State: PA Zip Code: 19090 - 3120

TYPE OF REPORT (place X to the right of report type)	1ST TUESDAY PRE-PRIMARY	2ND FRIDAY PRE-PRIMARY	30 DAY POST PRIMARY	AMENDMENT REPORT?	YES	NO
	1ST TUESDAY PRE-ELECTION	2ND FRIDAY PRE-ELECTION	30 DAY POST ELECTION	TERMINATION REPORT?	YES	NO
	ANNUAL REPORT	YEAR	FILING METHOD () CHECK ONE	PAPER	<input checked="" type="checkbox"/>	DISKETTE

Name of Office Sought by Candidate: <u>Montgomery County Controller</u>	DATE OF ELECTION	District Number	Office Code	Party Code	County Code
	MO. DAY YEAR <u>11 02 2010</u>		<u>OTH REP</u>	<u>46</u>	

Summary of Receipts and Expenditures from:	MO. DAY YEAR <u>09 14 2010</u>	To	MO. DAY YEAR <u>10 18 2010</u>	FOR OFFICE USE ONLY
A. Amount Brought Forward From Last Report	\$ - 187.39			RECEIVED OCT 22 P 1:30 NOTARIAL PUBLIC MONTGOMERY COUNTY PA
B. Total Monetary Contributions and Receipts (From Schedule I)	\$ 350.00			
C. Total Funds Available (Sum of Lines A and B)	\$ 162.61			
D. Total Expenditures (From Schedule III)	\$ 379.10			
E. Ending Cash Balance (Subtract Line D from Line C)	\$ -216.49			
F. Value of In-Kind Contributions Received (From Schedule II)	\$ 0			
G. Unpaid Debts and Obligations (From Schedule IV)	\$ 0			

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 22nd day of October 2010

Stephanie A. Disc } Signature of Person Submitting Report
Stewart J. Greenleaf, Jr. } Printed Name

My commission expires _____ }
 MO. DAY YR. } Area Code 215 Daytime Telephone Number 977-1000



PART II - If this is a special committee report, 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 } Signature of Candidate
 _____ } Printed Name

My commission expires _____ }
 MO. DAY YR. } Area Code _____ Daytime Telephone Number _____

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate <u>Stewart J. Greenleaf, Jr.</u>	Reporting Period From <u>09/14/2010</u> To <u>10/18/2010</u>
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR		
	TOTAL for the Reporting Period (1)	\$ <u>0</u>

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)	\$ <u>0</u>

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)		
Contributions Received from Political Committees (Part C)		\$ <u>350.00</u>
All Other Contributions (Part D)		\$
	TOTAL for the Reporting Period (3)	\$ <u>350.00</u>

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

TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD <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>	\$ <u>350.00</u>
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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 <u>Stewart J. Greenleaf Jr.</u>	Reporting Period From <u>09/14/2010</u> To <u>10/19/2010</u>
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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)				

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

PAGE TOTAL \$ <u>0</u>

**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 <u>Stewart J. Greenleaf, Jr.</u>	Reporting Period From <u>09/14/2010</u> To <u>10/18/2010</u>
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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)			-	\$
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				\$
Zip Code (Plus 4)			-	\$
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				\$
Zip Code (Plus 4)			-	\$
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				\$
Zip Code (Plus 4)			-	\$
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				\$
Zip Code (Plus 4)			-	\$
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				\$
Zip Code (Plus 4)			-	\$
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				\$
Zip Code (Plus 4)			-	\$
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				\$
Zip Code (Plus 4)			-	\$
Full Name of Contributor	MO.	DAY	YEAR	\$
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 \$ <u>0</u>
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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 Stewart J. Greenleaf, Jr.	Reporting Period From 09/14/2010 To 10/18/2010
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				DATE			AMOUNT
				MO.	DAY	YEAR	
Full Name of Contributing Committee Friends of Stewart Greenleaf				10	14	2010	\$350.00
Mailing Address 417 Bartram Road, P.O. Box 155				MO.	DAY	YEAR	\$
City Willow Grove		State PA	Zip Code (Plus 4) 19090 -0155	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				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				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				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	\$

PAGE TOTAL
\$350.00

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>Stewart J. Greenleaf, Jr.</i>	Reporting Period From <i>09/14/2010</i> To <i>10/18/2010</i>
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				DATE			AMOUNT
Full Name of Contributor				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Employer Name				Occupation			
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	\$
Employer Name				Occupation			
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	\$
Employer Name				Occupation			
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	\$
Employer Name				Occupation			
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	\$
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 \$ <u>0</u>

**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>Stewart J. Greenleaf Jr.</i>	Reporting Period From <i>09/14/2010</i> To <i>10/18/2010</i>
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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

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.	PAGE TOTAL \$ <u>0</u>
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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>Stewart J. Greenleaf, Jr.</i>	Reporting Period From <i>09/14/2010</i> To <i>10/18/2010</i>
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1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ <i>0</i>

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

3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)	
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 <u>Stewart J. Greenleaf Jr.</u>	Reporting Period From <u>09/14/2010</u> To <u>10/18/2010</u>
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Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
Mailing Address				\$
City				\$
State				\$
Zip Code (Plus 4)				\$

Description of Contribution:

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

Description of Contribution:

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

Description of Contribution:

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

Description of Contribution:

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

Description of Contribution:

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

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>Stewart J. Greenleaf, Jr.</i>	Reporting Period From <i>09/14/2010</i> To <i>10/18/2010</i>
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				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

\$ 0

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Stewart J. Greenleaf, Jr.	Reporting Period From 09/14/2010 To 10/18/2010
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To Whom Paid	MO.	DAY	YEAR	Amount
Westover Golf Club	09	24	2010	\$ 29.10
Mailing Address 401 South Schuylkill Avenue	Description of Expenditure Meeting with municipal leader			
City Jeffersonville	State PA	Zip Code (Plus 4) 19403 -3598		
Republican Committee of Lower Merion and Narberth	10	07	2010	\$ 350.00
Mailing Address 3 1/2 West Lancaster Avenue	Description of Expenditure Ticket			
City Ardmore	State PA	Zip Code (Plus 4) 19003 -		
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City				
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City				
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City				
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City				
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City				
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City				

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

PAGE TOTAL \$ 379.10

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>Stewart J. Greenleaf, Jr.</i>	Reporting Period From <i>09/14/2010</i> To <i>10/18/2010</i>
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Name of Creditor				Outstanding Balance of Debt \$		
Mailing Address	DATE DEBT INCURRED	MO.	DAY	YEAR		
City	State	Zip Code (Plus 4)				
Description of Debt						

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

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

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

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

Name of Creditor				Outstanding Balance of Debt \$		
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 \$ <u>0</u>
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