CAMPAIGN FINANCE REPORT

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black lot I

	port ed By:	1. Carried in bide o	2. a. a. a. a.
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF	BRUCE CASTOR,	INC	
Street Address:	DROOL CASTOR,	ING.	
P.O. Box 80			##
West Conshohocken	State:	Zip C	
TYPE OF 1. Company of the company of	2.		28 - 0800
REPORT STATE OF THE STATE OF TH	en and an analysis		X
(place X to	5.	graduated the second of the se	
the right of YEAR,	e dicher vie		Market in the second of the se
			X
Name of Office Sought by Candidate:	DATE 6	F ELECTION DISING	
Montgomery County Commissioner		4. Ev - 4. A. A. A. A.	REP 46
	11 08	2011	SEE INSTRUCTIONS FOR CODES
MOT STATE AND THE	Mod Syn		kojeno kalo koje kojevanja
Summary of Receipts		E STEEN EN HEES	
		2011	
A. Amount Brought Forward From Last Report	\$ 4,639.3		~~ \
B. Total Monetary Contributions and Receipts (From Schedule	n s 3,528.8	38	
C. Total Funds Available (Sum of Lines A and B)	8,168.2	.5	မ်က္ကိုင္တိုင္တိုင္တ
D. Total Expenditures (From Schedule III)	\$ 0.0	The state of the s	
E. Ending Cash Balance (Subtract Line D from Line C)	\$		VED VED
F. Value of In-Kind Contributions Received (From Schedule II)	8.168.2		
G. Umpaid Debts and Obligations (From Schedule IV)			Õ
c. Or hald Debits and Congations (From Schedule IV)	\$ 69,500.0	0 <i>V</i>	the state of the s
AFFIDA	AVIT SECTION		
errom between the construction of the construc	rfeigns om ethnitig	CELEBRATE PROPERTY.	
I swear for affirm) that this report, including the attached schedules, or correct and complete.	n-paper or computer dis	kette me to: the best b	f my knowledge and belief true,
Sworm to and subscribed before me this	V		
day of Museum 20 12	_1/\		
MOTARIAL SEAL	OSS WE	Signature of Person S	
Signature Notary Public	- } (033 WE	Printed Na	TREASURER
My commission expires W CONSHONOCKEN BORO, MONTGO	MEN CHTY (610)		-2361
MO. Thy Commission Expires Jul 8,	Area Co	de D	sytime Telephone Number
and the second of periods of a granted by Antion 221. Follows		VIII SHILI VIZIT TEXT	
swear (or affirm) that to the best of my knowledge and belief this po			ns of the Act of Rine 1937
P.L. 1333, No. 320) as amended. Sworm to and subscribed before me this		, /	
lotto Claria	1	7.1	7 //
dev of 20/2		Signature of Car	ndideta/ / ·
July though	BRUCE L.	· ·	7
Signetifie NOTARIAL SEAL My commission expires JOANN KONOPKA	(215)	Printed Nar	m^ -1000
D. DAMotary Public	Area Coo		sytime Telephone Number
My Commission Expires Jul 8, 2012	CMIY		

Campaign Finance Report
(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

								· p .		ac or big	CK IIIK.			
Filer Identificat Number :	i on 200	3023			poi ed	rt By:	CAND	DATE	COM	MITTEE	V	Lòs	BYIST	
Name of Filing (Committee, Candi	date or L	obbyist:	Frie	ends	of Br	uce Cast	or, Inc.				and the same of		<u> </u>
Street Address:	PO Box 800	·			·	•	·						·	
City:	West Consho	hocken					State:	PA		Zip Co	de: 19	428	800	
TYPE OF REPORT	GARTEN ESIDAY AR PRESENTANARYA	1.	2ND FRIDA PRE PRIMA	BY: **	2.	30 D/ POST	PRIMARY		3.	AMENDA PERSON		Yes	No	· 1
(place X to the right of	OTHERDESDAY	4.	2ND FRIDA PRG-ELECT		5.	30 DA POST	electro		6.	TERMINA REPORT	NOTE	Yes	No	· ~
report type)	ANNUAL REPORT	7. X	Year 2011				G METHO			PAPER	5 F. J.		DISK	TTE
Name of Office S	Sought by Candida	ete:				198-0211-005	DATE O	A CONTRACTOR OF THE PARTY OF TH	TION	District Number	Office Code	Par	ty Code	
							Mo 🎏	DAY	YEAR	-2	Code	REF	•	Code 46
							11		8 2011	 	(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of t Expenditures	Receipts and from:	MÖ	PAY	YEAR 2011	т	o	MQ 🤙	DAY	YEAR	FO	R OFFIC	E USE	ONLY	五十八
A. Amount Bros	ught Forward From			2011	_	T \$	12	3	1					
	ary Contributions			Schedule	: I)	+ *			4639.37 3528.88					
C. Total Funds	Available (Sum O	f Lines A	and B)			\$			8168.25					
D. Total Expend	ditures (From Sch	edule II	()			\$			0.00	ł				
E. Ending Cash	Balance (Subtrac	t Line D	From Line (C)		\$			8168.25					
F. Value Of In-l	Kind Contributions	s Receive	ed (From Sc	hedule II)	\$			0.00					
G. Unpaid Debt	s And Obligations	(From S	chedule IV)		\$			69500.00					
				AFFIDA	VI	T SEC	TION							
	A committee per	orthica	surer sign l	iere If th	s Is	a Can	ildate re	port, ca	ndidate siç	n here:			4 5 61	
I swear (or affirm) correct and comple	that this report, inci te.	luding the	attached sch	edules filed	l on	paper o	r by electr	onic med	lium, are to t	he best of	my know	ledge a	nd beli	af , true
Sworn to and subsc	cribed before me this day of	8	20				•		Signature	of Person	Submitti	ng Rep	ort	
	Signatu	ге				=	-			Print	ed Name			
My Commission Ex	pires						-			Email				
	МО	DA	Υ	YR				Area	Code	Daytime	Telepho	ne Nur	nber	
ស្ស៊ី 🤄 ស្រីប្រែប្រែ	report of a cano	lidate's a	uthorized (Committe	è, C	andida	te shall s	ign her	e		4	200	i i	5.4 0 15
I swear (or affirm) t No 320) as amended	that to the best of m d.	ıy knowle	dge and belie	f this politi	ical	commit	tee has no	t violate	d any provisi	ons of the	act of Jur	ne 3,19	37 (P.L.	. 1333,
iworn to and subscri	ibed before me this day of		20						Si	gnature of	Candidat	e		
	-			- # -		•	,			Printed	Name			
4y Commission Expi	Signature		1				-		····	Email				
	МО	DA	Y	YR				Area Co	ode	Day	rtime Tel	ephone	Numbe	
														1

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Detailed Summary Page	•			
Name of Filing Committee or Candidate	Reportin	g Period		
Friends of Bruce Castor, Inc.	From:	11/29	/20 <u>11</u> To :	12/31/2011
, Utiliza mikada, (constabilitation); (ecclived = x / 50:00 or (Eess Per, Contributor);		7. 4.3 5.220		
TOTAL for the Reporting	Period	(1)	\$	0.00
containui (i) ii a secal veg - A /50/01/10 (2/50/00 (From Part /, and Part B)		1.74.1.4	of the second	
Contributions Received From Political Committees (Part A)			\$	0.00
All Other Contributions (Part B)		· · · · · · · · · · · · · · · · · · ·	\$	0.00
TOTAL for the Reporting I	Period	(2)	\$	0.00
Contributions Received Over \$250,00 (From Part Cand Part D)	7. Post 1.	" "#" <u>#</u> " ; ; ;		
Contributions Received From Political Committees (Part C)			\$	3528.88
All Other Contributions (Part D)		· <u>-</u>	\$	0.00
TOTAL for the Reporting F	Period	(3)	\$	3528.88
Ougs Receipts, Refunds, Interest Farned, Returned Checks, Etc. (From Partie)	Ţ	1.5%		
TOTAL for the Reporting P	eriod	(4)	\$	0.00
			1	
Total Monetary Contributions and Receipts During this Reporting Period (Add and totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page	enter amo e, Item B.)	unt	\$	3528.88

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 Commit	tee or Candidate	Reporting Period	Reporting Period						
			From:	То;					
			DA	TE	AMOUNT				
Full Name of Contributing	Committee		MO DAY	YEAR					
Mailing Address			A Commission and the commission	\$	0.00				
City	State	Zip Code (Plus 4)							

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

PAGE TOTAL 0.00

PART B **ALL OTHER CONTRIBUTIONS**

\$50.01 TO \$250.00

Use this Part to itemize all other contributions with an aggregate value from

			кероги	ng Period		
			From:		To:	
				DATE		AMOUNT
Full Name of Contributor			M	DAY was a second	EAR	
Mailing Address				the State of the Control of the Cont	\$	0.00
City	State	Zip Code (Plus 4)				
						PAGE TOTAL

Contributions Received From Political Committees

OVER \$250.00

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Candid	me or Filing Committee or Candidate					Reporting Period						
Friends of Bruce Castor, Inc.			From:	11/2	9/2011	То:	12	2/31/2011				
				DA	TE		A	MOUNT				
Full Name of Contributing Committee Brown-Castor '11	ee			МО	DAY	YEAR	5					
Mailing Address PO Box 800					O.W.		\$	3528.88				
City West Conshohocken	State PA	Zip Code 19428	(Plus 4)	12	22	2011						
Enter Grand Total of Part C on S	chedule I, Detail	ed Summary Pa	ge, Sectio	n 3.			\$	PAGE TOTAL 3528.88				

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 Committe	ame of Filing Committee or Candidate							
			From:		_	To	:	
<u> </u>				D	ATE		AMO	UNT
Fuli Name of Contributor				мо	DAY :	YEAR		
Mailing Address			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Section 2 to the section of the sect	As Assessed	\$	0.00
City	State	Zip Code (Plus 4	•)			[]		
Employer Name			00	cupat	ion	<u> </u>	<u> </u>	
Employer Mailing Address Business	Principal Place of	City			State		Zip Code (Plus 4)
Enter Grand Total of Pa	ert C on Schedule I, Detail	ed Summary Page, S	ection 3	3.			PAGI	TOTAL
						\$		0.00

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		Repor	rting Peri	od				
			From:	:		To:			
				D	ATE			AMOUNT	
Full Name			1.1.	МО	DAY	YEAR			
Mailing Address				The second secon			\$	C	.00
City	State	Zip Code (P	lus 4)	-					
Receipt Description	<u> </u>			<u> </u>		<u> </u>			
nter Grand Total of Part E	on Schedule I, Detailed	d Summary Page. S	Section	4			P	AGE TOTAL	
·	-,		-	71			\$	0.00	

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 P	eriod	
Friends of Bruce Castor, Inc.	From:	11/29/2011 To:	12/31/2011
#UNIVERS (NEKAND CONTRIBUTIONS RECEIVED TAXAUE OF \$20.00 OR LESS !	ERICONTRIBU	OR	
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
LIN-KIND CONTRIBUTIONS RECEIVED: VALUE OF \$50.01 TO \$250.00 (FROM PAR			
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
TN-KIND CONTRIBUTION RECIEVED VALUE OVER \$250.00 (FROM PART G)	nove, see a see announce a see a	a la granda que distribución (n. 1946). A construir de la cons	- the form of the second points, C. and the second
TOTAL for the Reporting Pe	eriod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, 1	Add and enter Item F.)	\$	0.00

SCHEDULE II PART F

IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Can	lame of Filing Committee or Candidate					Reporting Period					
			From:			To:					
			-	DATE		A	MOUNT				
Full Name of Contributor			MO	DAY.	YEAR						
Mailing Address			The second secon	ALLOW THE WASHINGTON	- Aller Aller	\$	0.00				
City	State	Zip Code (Plus 4)			,						
Description of Contribution:			<u> </u>		<u> </u>						
Enter Grand Total of Part F on Section 2.	Schedule II, In-Kin	ed Contributions Deta	iled Sumi	mary Pag	e,	PA	GE TOTAL				
					\$		0.00				

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate	ame of Filing Committee or Candidate						Reporting Period							
					Fr	om:		To:						
			· · · · · · · · · · · · · · · · · · ·	-		***	DATE			AMOUNT				
Fuli Name of Contributor		***	-			Ho · s	- DAY	YEAR		· · ·				
Mailing Address							100		\$	0.00				
City	State	<u></u> -	Zip Code(Plus 4)										
Employer of Contributor			<u> </u>	-		Occupat	tion	1		<u> </u>				
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip 4)	Code(Plus	Descri	otion of	Contribution				
Enter Grand Total of Part G on Sch Summary Page, Section 3.	nedule II,	In-Kind	Contribut	ions De	tail	ed	V- 944			PAGE TOTAL 0.00				

STATEMENT OF EXPENDITURES

Name of Filing Committee	or Candidate	Reporting Period					
			From	To:			
			DATE		AMOUNT		
To Whom Paid			MO DAY YEA	R			
Mailing Address				\$	0.00		
City	State	Zip Code (Plus 4)	Description of Expendi	ture			
Enter Grand Total of Exp	enditures on Page 1. Re	Phort Cover Page Item D			PAGE TOTAL		
		port outc. rage, Item b	'·	\$	0.00		

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

Name of Filing Committee or Candidate			Reporting Period					
Friends of Bruce Castor, Inc.		From	n:	11/	29/2011	То:	12/	31/2011
					DATE			itstanding ilance of Debt
Name of Creditor Bruce L. Castor, Sr.				MO	DAY	YEAR		
Mailing Address 4640 Logan Court				12	31	2011	\$	33000.00
City Schwenksville	State	Zip Code (Plus 4)		Descrip	tion of Del	ot		
	PA	19473		Loan to Campain Committee (April 2004)				
				DATE			Outstanding Balance of Debt	
					DATE			
Name of Creditor Daine S. Castor				жо	DAY	YEAR		
, , , , , , , , , , , , , , , , , , , ,	t			MO		YEAR 2011		
Daine S. Castor Mailing Address 4640 Logan Cour	t State	Zip Code (Plus 4)	※ できます かんきょう かんきょう かんきょう かんきょう かんきょう かんきょう かんきょう かんきょう かんきょう かんしょう かんしゃ かんしゃ かんしゃ かんしゃ かんしゃ かんしゃ かんしゃ かんしゃ	12	DAY	2011	В	alance of Debt
Daine S. Castor		Zip Code (Plus 4) 19473	報報を	12 Descrip	DAY 31	2011 bt	\$	36500.00
Daine S. Castor Mailing Address 4640 Logan Cour	State		変異を表現し、少なっ	12 Descrip	DAY 31	2011 bt	\$	36500.00
Daine S. Castor Mailing Address 4640 Logan Cour	State PA	19473		12 Description to	DAY 31	2011 bt	\$	36500.00 pril 2004)