

CAMPAIGN FINANCE STATEMENT

File this in lieu of a full report *only if aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period.*

FILER IDENTIFICATION NUMBER 40396		REPORT FILED ON BEHALF OF	CANDIDATE <input checked="" type="checkbox"/>	COMMITTEE <input type="checkbox"/>	LOBBYIST <input type="checkbox"/>	
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST BRUCE L. CASTOR, JR.						
STREET ADDRESS 679 Camp Wawa Road						
CITY Lederach		STATE PA	ZIP CODE 19450			
TYPE OF REPORT (CHECK ONE)	NAME OF OFFICE SOUGHT BY CANDIDATE Montgomery County Commissioner	DISTRICT NO.	PARTY REP	DATE OF ELECTION		
				MO.	DAY	YEAR
<input type="checkbox"/> 6TH TUESDAY PRE-PRIMARY				11	08	2011
<input type="checkbox"/> 2ND FRIDAY PRE-PRIMARY						
<input type="checkbox"/> 30 DAY POST-PRIMARY						
<input type="checkbox"/> 6TH TUESDAY PRE-ELECTION						
<input type="checkbox"/> 2ND FRIDAY PRE-ELECTION						
<input type="checkbox"/> 30 DAY POST-ELECTION						
<input checked="" type="checkbox"/> ANNUAL REPORT						

DATES OF REPORTING PERIOD		MO.	DAY	YEAR	TO	MO.	DAY	YEAR
		11	29	2011		12	31	2011

CASH BALANCE AT END OF REPORTING PERIOD:	\$	-0-
TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:	\$	-0-

AMENDMENT REPORT?	YES	NO	<input checked="" type="checkbox"/>
TERMINATION REPORT?	YES	NO	<input checked="" type="checkbox"/>

FOR OFFICE USE ONLY

RECEIVED

2012 JAN 10 A 11:00

OFFICE OF
NOTER SERVICES
MONTG. CO. PA

V

AFFIDAVIT SECTION

PART I -

If statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.
 If statement is filed on behalf of a Candidate, the Candidate must sign here.
 If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.

I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT EXCEED TWO HUNDRED AND FIFTY DOLLARS (\$250.00) AND THIS REPORT IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, CORRECT AND COMPLETE.

SWORN TO AND SUBSCRIBED BEFORE ME THIS
10th DAY OF January 2012

Bruce L. Castor, Jr.
 SIGNATURE OF PERSON SUBMITTING REPORT

BRUCE L. CASTOR, JR.
 PRINTED NAME

278-3100
 DAYTIME TELEPHONE NUMBER

MY COMMISSION EXPIRES _____ MO. _____

NOTARIAL SEAL

JOANN KONOPKA
 Notary Public (610)

W. CONSHOHOCKEN BORO, MONTGOMERY CNTY
 My Commission Expires Jul 8, 2012

PART II -

If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must 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 OF CANDIDATE

 PRINTED NAME

 SIGNATURE

MY COMMISSION EXPIRES _____ MO. _____ DAY _____ YR. _____

 AREA CODE

 DAYTIME TELEPHONE NUMBER