

# 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: Friends of Stewart Greenleaf		Report Filed By: Friends of Stewart Greenleaf	CANDIDATE 1.	COMMITTEE 2. <input checked="" type="checkbox"/>	LOBBYIST 3.
Name of Filing Committee, Candidate or Lobbyist: Friends of Stewart Greenleaf					
Street Address: 417 Bartram Road, P.O. Box 155					
City: Willow Grove		State: PA	Zip Code: 19090-0155		
TYPE OF REPORT (place X to the right of report type)	1. 5TH TUESDAY PRE-PRIMARY	2. 2ND FRIDAY PRE-PRIMARY	3. 30 DAY POST-PRIMARY	ABANDONMENT REPORT?	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
	4. 5TH TUESDAY PRE-ELECTION	5. 2ND FRIDAY PRE-ELECTION	6. 30 DAY POST-ELECTION	TERMINATION REPORT?	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
	7. ANNUAL REPORT <input checked="" type="checkbox"/>	YEAR: 2011	FILING METHOD (CHECK ONE)	FAPER <input checked="" type="checkbox"/>	DISKETTE <input type="checkbox"/>

Name of Office Sought by Candidate:   
 Montgomery County Controller

DATE OF ELECTION			District Number	Office Code	Party Code	County Code
MO.	DAY	YEAR		0TH	REP	46
11	9	2011		(SEE INSTRUCTIONS FOR CODES)		

Summary of Receipts and Expenditures from:

	MO.	DAY	YEAR	To	MO.	DAY	YEAR
A. Amount Brought Forward From Last Report	11	29	2011	To	12	31	2011
B. Total Monetary Contributions and Receipts (From Schedule I)	\$ 4820.75						
C. Total Funds Available (Sum of Lines A and B)	\$ 0						
D. Total Expenditures (From Schedule III)	\$ 4820.75						
E. Ending Cash Balance (Subtract Line D from Line C)	\$ 1110.30						
F. Value of In-Kind Contributions Received (From Schedule II)	\$ 3710.45						
G. Unpaid Debts and Obligations (From Schedule IV)	\$ 0						

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2012 JAN 31 P 1:31

### 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 30<sup>th</sup> day of January 2012

Stephanie A Duse } Signature of Person Submitting Report  
Colin D. Dougherty } Printed Name

My commission expires 23-2012 }  
 NOTARIAL SEAL  
 STEPHANIE A DISE  
 Notary Public  
 Area Code 215 Daytime Telephone Number 977-1000

PART II - If this is a Candidate report, 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 30<sup>th</sup> day of January 2012

Stephanie A Duse } Signature of Candidate  
Stewart J. Greenleaf, Jr. } Printed Name

My commission expires 23-12 }  
 NOTARIAL SEAL  
 STEPHANIE A DISE  
 Notary Public  
 Area Code 215 Daytime Telephone Number 977-1000

NOTARIAL SEAL  
 STEPHANIE A DISE  
 Notary Public  
 WHITPAIN TWP. MONTGOMERY CNTY  
 My Commission Expires 23-2012  
 210 North Office Building

• Bureau of Commissions, Elections and Legislation  
 • Harrisburg, PA 17120-0029 • (717) 787-5280

# CONTRIBUTIONS AND RECEIPTS

## Detailed Summary Page

Name of Filing Committee or Candidate <i>Friends of Stewart Greenleaf</i>	Reporting Period From <i>11/29/11</i> To <i>12/31/11</i>
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ <i>0</i>

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)	
Contributions Received from Political Committees (Part A)	\$ <i>0</i>
All Other Contributions (Part B)	\$ <i>0</i>
TOTAL for the Reporting Period (2)	\$ <i>0</i>

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$ <i>0</i>
All Other Contributions (Part D)	\$ <i>0</i>
TOTAL for the Reporting Period (3)	\$ <i>0</i>

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

<b>TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD</b> (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>0</i>
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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 <i>Friends of Stewart Greenleaf</i>	Reporting Period From <u>11/29/11</u> To <u>12/31/11</u>
--	---

				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)					\$
		-					\$

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 <i>Friends of Stewart Greenleaf</i>	Reporting Period From <u>11/29/11</u> To <u>12/31/11</u>
--	---

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

PAGE TOTAL

\$ 0

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

## 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 <i>Friends of Stewart Greenleaf</i>	Reporting Period From <u>11/29/11</u> To <u>12/31/11</u>
--	---

				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)					\$
		-					

PAGE TOTAL  
**\$ 0**

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>Friends of Stewart Greenleaf</i>	Reporting Period From <u>11/29/11</u> To <u>12/31/11</u>
--	---

				DATE			AMOUNT
				MO.	DAY	YEAR	
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business							
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business							
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business							
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business							
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
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  
\$ 0

**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>Friends of Stewart Greenleaf</i>	Reporting Period From <u>11/29/11</u> To <u>12/31/11</u>
--	---

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 \$
		-				

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

PAGE TOTAL  
\$ 0

# 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>Friends of Stewart Greenleaf</i>	Reporting Period From <u>11/29/11</u> To <u>12/31/11</u>
--	---

<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>		
TOTAL for the Reporting Period	(1)	\$ <u>0</u>

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

<b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>		
TOTAL for the Reporting Period	(3)	\$ <u>0</u>

<b>TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD</b> (Add and enter amount totals from Boxes 1, 2, and 3; also enter on Page 1, Report Cover Page, Item F.)	\$ <u>0</u>
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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 <i>Friends of Stewart Greenleaf</i>	Reporting Period From <u>11/29/11</u> To <u>12/31/11</u>
--	---

				DATE			AMOUNT
				MO.	DAY	YEAR	
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Description of Contribution:							
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Description of Contribution:							
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Description of Contribution:							
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Description of Contribution:							
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Description of Contribution:							
Full Name of Contributor							\$
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>Friends of Stewart Greenleaf</i>	Reporting Period From <u>1/1/11</u> To <u>12/31/11</u>
--	---

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Employer of Contributor				\$
Employer Mailing Address/Principal Place of Business				\$
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Employer of Contributor				\$
Employer Mailing Address/Principal Place of Business				\$
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Employer of Contributor				\$
Employer Mailing Address/Principal Place of Business				\$
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Employer of Contributor				\$
Employer Mailing Address/Principal Place of Business				\$
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
Employer of Contributor				\$
Employer Mailing Address/Principal Place of Business				\$

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 <b>Friends of Stewart Greenleaf</b>	Reporting Period From <u>11/28/11</u> To <u>12/31/11</u>
--	---

	MO.	DAY	YEAR	Amount
To Whom Paid <b>Stewart Greenleaf, Jr.</b>	12	27	2011	\$ 1110.30
Mailing Address <b>417 Bartram Bd.</b>	Description of Expenditure <b>Reimbursement for PA Society</b>			
City <b>Willow Grove</b>	State <b>PA</b>	Zip Code (Plus 4) <b>19090 -</b>		<b>lodging.</b>
To Whom Paid				\$
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		
To Whom Paid				\$
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		
To Whom Paid				\$
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		
To Whom Paid				\$
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		
To Whom Paid				\$
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		
To Whom Paid				\$
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		
To Whom Paid				\$
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		

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

PAGE TOTAL  
**\$ 1110.30**

## 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>Friends of Stewart Greenleaf</i>	Reporting Period From <u>11/29/11</u> To <u>12/31/11</u>
--	---

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						
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  
\$ 0