

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"/>	
Name of Filing Committee, Candidate or Lobbyist: Stewart J. Greenleaf, Jr.									
Street Address: 417 Bartram Road									
City: Willow Grove				State: PA		Zip Code: 19090 -			
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	AMENDMENT REPORT		YES	NO	X	
	4. 5TH TUESDAY PRE-ELECTION	5. 2ND FRIDAY PRE-ELECTION	6. 30 DAY POST-ELECTION	TERMINATION REPORT		YES	NO	X	
	7. ANNUAL REPORT	YEAR 2011	FILING METHOD () CHECK ONE		PAPER	X	DISKETTE		

Name of Office Sought by Candidate: Montgomery County Controller			DATE OF ELECTION			District Number	Office Code	Party Code	County Code
MO.	DAY	YEAR	MO.	DAY	YEAR		OTH	REP	46
			11	8	2011				
(SEE INSTRUCTIONS FOR CODES)									

Summary of Receipts and Expenditures from:		MO.	DAY	YEAR	To	MO.	DAY	YEAR	FOR OFFICE USE ONLY	
		11	29	2011	To	12	31	2011	2012 JAN 31 P 1:32 RECEIVED	
A. Amount Brought Forward From Last Report	\$ 0									
B. Total Monetary Contributions and Receipts (From Schedule I)	\$ 1110.30									
C. Total Funds Available (Sum of Lines A and B)	\$ 1110.30									
D. Total Expenditures (From Schedule III)	\$ 1110.30									
E. Ending Cash Balance (Subtract Line D from Line C)	\$ 0									
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 30th day of January 2012

Stephanie A Duse Signature

My commission expires 4-23-2013 MO. DAY YR.

Signature of Person Submitting Report
Stewart J. Greenleaf, Jr.
Printed Name

215 Area Code 977-1000 Daytime Telephone Number

PART II If this is a Candidate report, 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

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate <u>Stewart J. Greenleaf, Jr.</u>	Reporting Period From <u>11/29/11</u> To <u>12/31/11</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)	\$ <u>0</u>
All Other Contributions (Part B)	\$ <u>0</u>
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>110.30</u>
All Other Contributions (Part D)	\$ <u>0</u>
TOTAL for the Reporting Period	(3) \$ <u>110.30</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>110.30</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 <i>Stewart J. Greenleaf, Jr.</i>	Reporting Period From <i>11/12/11</i> To <i>12/31/11</i>
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	DATE			AMOUNT
	MO.	DAY	YEAR	
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.	PAGE TOTAL \$ <u>0</u>
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**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>Stewart J. Greenleaf, Jr.</i>	Reporting Period From <u>11/28/11</u> To <u>12/31/11</u>
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				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>Stewart J. Greenleaf, Jr.</i>	Reporting Period From <u>11/29/11</u> To <u>12/31/11</u>
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				DATE			AMOUNT
Full Name of Contributing Committee				MO.	DAY	YEAR	
<i>Friends of Stewart Greenleaf</i>				<i>12</i>	<i>27</i>	<i>2011</i>	\$ <i>1110.30</i>
Mailing Address				MO.	DAY	YEAR	
<i>P.O. Box 155</i>							\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	
<i>Willow Grove</i>	<i>PA</i>	<i>0090 -0155</i>					\$
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
\$ *1110.30*

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 <u>11/29/11</u> To <u>12/31/11</u>
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				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>Stewart J. Greenleaf, Jr.</i>	Reporting Period From <u>11/29/11</u> To <u>12/31/11</u>
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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
\$ 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>Stewart J. Greenleaf, Jr.</i>	Reporting Period From <u>11/29/11</u> To <u>12/31/11</u>
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1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period	(1) \$ <u>0</u>

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

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

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.)	\$ <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 <u>Stewart J. Greenleaf, Jr.</u>	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 <u>Stewart J. Greenleaf, Jr.</u>	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 of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			
Full Name of Contributor							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
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
\$ <u>0</u>

**SCHEDULE III
STATEMENT OF EXPENDITURES**

Name of Filing Committee or Candidate <i>Stewart J. Greenleaf, Jr.</i>	Reporting Period From <u>11/29/11</u> To <u>12/31/11</u>
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	MO.	DAY	YEAR	Amount
To Whom Paid <i>Roger Smith Hotel</i>	<i>12</i>	<i>11</i>	<i>2011</i>	<i>\$ 110.30</i>
Mailing Address <i>501 Lexington Avenue</i>	Description of Expenditure <i>lodging for PA Society</i>			
City <i>New York</i>	State <i>NY</i>	Zip Code (Plus 4) <i>10017 -</i>		
To Whom Paid				<i>\$</i>
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		
To Whom Paid				<i>\$</i>
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		
To Whom Paid				<i>\$</i>
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		
To Whom Paid				<i>\$</i>
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		
To Whom Paid				<i>\$</i>
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		
To Whom Paid				<i>\$</i>
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		
To Whom Paid				<i>\$</i>
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 <i>\$ 110.30</i>

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 <u>11/29/11</u> To <u>12/31/11</u>
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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
\$ 0