

Commonwealth of Pennsylvania - Campaign Finance Report

ler Identification	20	003023	Repo	ort Filed B rk X)	be clear and Candida			Committee	X	Lobbyist	
umber ame of Filing Com	nittee. Car	didate or	<u> </u>		ade of lan						
ame or Filing Com-			Casto	r, Bruce Frie	ends of, Inc.			.,			
treet Address			PO Bo	x 800							
Tana	1		<u> </u>	 _	State	PA		Zip Code	19428-0800		
ity	West Cons	hohocken									_
ype of Report (Plac	e x under r	eport type)								C-ocial 20	Dov
- 6 th Tuesday 2-	2 nd Friday	3- 30 Day Post	4- 6 ^{tl}	Tuesday	5- 2 nd Friday	1	ay Post	7- Annual	Special 2 nd Frid Pre-Election	ay Special 30 Post-Elect	-
	Primary	Primary	Pre-	Election	Pre- Election	Election	n		Pre-clection	r Ost-Elect	
			1 7				1	xx			
							lan and		Termination		
Date Of Election		11/00/00	Yea	Г	2015	Amend			Report	xx	
MM/DD/YYYY)		11/03/20	42		2015						
iummary of Receip	ts and	From Date		To Date	e	1		For	Office Use Only		
Expenditures		11/2//20	15	12/21	1/2015	1					
A. Amount Brough	Commence of	11/24/20		٠ -		1					
A. Amount Brough	, rorward t	IOIII Fast vehoi		27,	347.83					P = 1	
B. Total Monetary	Contributio	ons and Receipt	s	\$						1 42 *	
(From Schedule I)					50.00	_[(:
C. Total Funds Ava				\$ 27.	397.83	1				<u>: -</u>	
(Sum of Lines A an D. Total Expenditu			-+	\$ 27,	, _ , ,	1			et ex		
D. Total Expenditu (From Schedule III)				27,	397.83	_				- va	
E. Ending Cash Bala	ance		$\neg \uparrow$	\$							
(Subtract Line D fro	om Line C)				0.00	4				(')	
F. Value of In-Kind	Contributi	ons Received		\$	0.00					, c.5	
(From Schedule II) G. Unpaid Debts a	nd Ohligati	ons		\$	0.00	1				- . :	
(From Schedule IV			1		0.00						
<u></u>					Affidavit						<u> </u>
Part 1- If this is a Con	nmittee repo	ort, treasurer sign	here. I	f this is a Ca	andidate report	, candidate	sign here	edge and helief	true correct and co	omplete.	
Part 1- If this is a Con I swear (or affirm) th			tached	schedules	on paper, is to t	ne best of f	IIV. SANOWII	Luge girlu bellet			_,
Sworn to and subscri	1				>			//	///		
day of		ff 20/C		` 		$\overline{}$	Signatur	e of Person Sul	bmitting report		
pilate	l, 41.	ceen		-	• (Ross Weice				(
Si	gnazure	,		_ , [***************************************			Printed Na	ame		
e de la companya de l	/2	12 .2	11,5	• •		610		94	11-2361		
My Commission expi	res <u>(//</u> MO.	DAY Y	'R.			Area Cod	le		Daytime Telephone	Number	
						n hore					
Part II- If this is a rep I swear (or affirm) th	ort of a Can	didate's Authorize	ed Con	helief this r	ndidate shall sig	ee has not	violated a	any provisions	of the Act of June 3,	1837 (P.L. 1333, I	NO:32
I swear (or affirm) tr amended.	iat to the be	or or this knowieds	se una	P				/			
	1	ma this				10	_	1	U, T		
Sworn to and subscr	iped before	me this					A .	fuct	W 7	1.	
day of /	Mya	my 20/6		. 1		#-	Τ,	Signature of Ca	ndidate		
Ax Sole 1	e Hi	ien		}		Bruce L	astor, Jr.				
Si	gnature	<u> </u>	_	Į.		0		Printed Nar			
.	. /	20 10	16			610		28	5-7338		
My Commission exp	ires <u> </u>	DAY YR.				Area Co	de		oaytime Telephone I	Number	
	M.C.										

COMMONWEALTH OF PENNSYLVANIA NOTARIAL SEAL

Beverly Green, Notary Public West Conshohecken Boro, Montgomery County My commission expires time 22, 2019 COMMONWEALTH OF PENNSYL VANIA NOTARIAL SEAL Beverly Green, Namey Public West Conslaborken 3aro, Mentionnery County My commission avoing function 22 2019

DIANE S. CASTOR 4640 Logan Court Schwenksville, PA 19473

December **2**/, 2015

i

Ross Weiss, Treasurer Friends of Bruce Castor, Inc. PO Box 800 West Conshohocken, PA 19428

RE: DEBT FORGIVENESS

Dear Mr. Weiss:

This letter is formal notice to you that I am forgiving the \$9,444.11 balance of the loan I made to Friends of Bruce Castor, Inc. in April, 2004.

Sincerely,

cc:

Diane S. Castor

Bruce L. Castor, Jr.



Campaign Finance Report

191093

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

Filer Identification	on	200302	3			eport		CAN	DID	ATE	СОМ	MITTEE	✓	LOBBYIST			
Name of Filing C	ommittee, C	andidate	e or Lobi	byist:	C/	ASTOR	₹, BRL	JCE FF	RIENI	DS OF,	INC						
Street Address:	P O BO										<u>.</u>						
City:	WEST C	ONSHO	HOCKEN	I .				State	: F	PA		Zip Co		19428-0800			
TYPE OF REPORT	6TH TUESDA PRE-PRIMAR			ND FRIDAY RIMARY	PRE-	2.	30 DA PRIMA		PC	ST- 3					MENT ?	Yes No	$oxed{M}$
(place X to	6TH TUESDA			ND FRIDAY LECTION	PRE-	5.	30 DA		PC	ST- 6	T- 6. TER		IATION F	Yes No			
the right of report type)	ANNUAL RI	PORT 7	. х	'ear 2015				NG ME				PAPER	DISKETTE				
Name of Office S	Sought by Ca	andidate	:					DAT	E OF	ELEC	TION	District Numbe			County Code		
Marine of Office (, , , , , , , , , , , , , , , , , , ,							МО		DAY	YEAR	38		REP	46		
									11		201	5	(SEE	INSTRUCTIONS FOR	CODES)		
Summary of	Receipts a	and	MO	DAY	YEAR		-	мо		DAY	YEAR	F	OR OF	FICE USE ONLY			
Expenditure	s from:		11	24	20	15 T	ГО		12	3	1 201	5					
A. Amount Bro	ought Forwa	rd From	Last Re	port			\$				27,347.8	_					
B. Total Monei	tary Contrib	utions A	nd Recel	ipts (From	Sched	lule I)	_ 4	<u> </u>		<u>.</u>	50.0	0					
C. Total Funds	Available (Sum Of L	ines A a	and B)			4	<u> </u>			27,397.8	3					
D. Total Exper	nditures (Fro	om Schee	dule III))				\$			27,397.8 	3					
E. Ending Cas								5			0.0	\neg					
F. Value Of In						e II)	+	<u> </u>			0.0	_					
G. Unpaid Det	ots And Oblig	gations (From So	hedule IV	')	<u></u>	!	\$			0.0	0					
						IDAV		_	_						· · · · · ·		
PART I - If this I swear (or affire correct and comp Sworn to and sub	n) that this re plete.	port, inclu	rt, treas	urer sign attached sc	here. I	if this i	is a Ca n pape	n dida r or by	i te re electi	ronic me	dium, are t	the bes	t of my k	cnowledge and be	lief , true		
						<u> </u>	_				- <u>-</u>	P	rinted N	ame	<u> </u>		
My Commission	Expires	Signatur	e									E	mail				
	_	10	DA	Y	ΥR					Are	a Code	Day	time Te	lephone Number			
Part II- If this												winians of	the act	of June 3 1937 (P	o.i., 1333.		
No 320) as amen	ded.		y knowle	dge and bei	ief this	politica	ai com	mittee	nas fi	OT AIGIS	ed any pro	A ISIONS OF	ine act	of June 3,1937 (P			
Sworn to and sub	scribed before day of	me this		20								Signatu	re of Car	ndidate			
						•						Pr	inted Na	me			
My Commission E		gnature										E	mail				
	_	МО	D/	AY	YR					Area	Code		Daytin	ne Telephone Nun	nber		

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period					
CASTOR, BRUCE FRIENDS OF, INC	From:	11/24/	2 <u>015</u> To :	12/31/2015		
. Uniternized Contributions Received - \$ 50.00 or Less Per Contributor						
TOTAL for the Reporti	ng Period	(1)	\$	0.00		
. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)						
Contributions Received From Political Committees (Part A)			\$	0.00		
All Other Contributions (Part B)			\$	50.00		
TOTAL for the Reporti	ng Period	(2)	\$	50.00		
3. Contributions Received Over \$250.00 (From Part C and Part D)	· · · · · · · · · · · · · · · · · · ·					
Contributions Received From Political Committees (Part C)			\$	0.00		
All Other Contributions (Part D)			\$	0.00		
TOTAL for the Report	ing Period	(3)	\$	0.00		
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part	E)					
TOTAL for the Report	ing Period	(4)	\$	0.00		
Total Monetary Contributions and Receipts During this Reporting Period (Add totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover	and enter a Page, Item I	mount B.)	\$	50.00		

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			Re	porting F				
			Fre	om:		То	:	
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address				<u>-</u>			\$	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

\$

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		Repo	orting Pe	11/24/2):	<u>12/31/2015</u>		
					DATE			AMOUNT	
Full Name of Contributor Lynne Lechter				МО	DAY	YEAR			
Mailing Address 21507 Valle	y Forge Circle						\$	50.00	
City King of Prussia	State PA	Zip Code (Plus 4) 19406		12	17	2015	;		

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

PAGE TOTAL \$ 50.00

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 from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidat	e		Reporting	Period				
			From:			To:		
				D#	TE		Α	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	le (Plus 4)					
				<u> </u>	<u> </u>	<u> </u>		PAGE TOTAL
Enter Grand Total of Part C on Sc	hedule I, Detail	led Summary P	age, Section	on 3.			\$	0.00

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		Reporting) Per	iod			
			From:			То	:	
				DA	ATE .		АМО	UNT
Full Name of Contributor			м	0	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	1)					
Employer Name			Occ	cupat	tion			
Employer Mailing Address/Pr Business	incipal Place of	City			State		Zip Code	(Pius 4)
Enter Grand Total of Part	C on Schedule I, Detai	iled Summary Page, S	Section 3				PA6	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		Reporti	ing Peri	bd		
			From:			To:	
					ATE		AMOUNT
Full Name				МО	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code (Plu	s 4)	į			
Receipt Description					1		
							 PAGE TOTAL
nter Grand Total of Part E	on Schedule I, Detaile	d Summary Page, S	ection	4.			\$ 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 Pe	eriod	
CASTOR, BRUCE FRIENDS OF, INC	From:	11/24/2015 To:	12/31/2015
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS F	ER CONTRIBUT	OR	
TOTAL for the Reporting Po	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	ιτ F)		
TOTAL for the Reporting P	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting P	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,	(Add and enter Item F.)	\$	0.00

SCHEDULE II PART F

IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

					i
	From:			то:	
		DATE		АМО	UNT
	мо	DAY	YEAR		
				\$	0.00
Zip Code (Plus 4)					
d Contributions Data	iled Sup	mary Da	70	PAG	E TOTAL
d Contributions Deta	neu sun	illiai y Fa	- 1		0.00
	Zip Code (Plus 4)	Zip Code (Plus 4)	DATE MO DAY Zip Code (Plus 4)	DATE MO DAY YEAR Zip Code (Plus 4) d Contributions Detailed Summary Page,	DATE AMO MO DAY YEAR \$ Zip Code (Plus 4)

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Ì	Re	porting P	eriod			
					Fro	m:		To:		
	<u> </u>						DATE		A	MOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address			<u> </u>						\$	0.00
City	State		Zip Code	(Plus 4)						
Employer of Contributor			_l			Occupa	tion	<u>. l</u>		
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descri	iption of Co	ontribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II	, In-Kind	Contribu	tions De	etail	ed	· , u	•		PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candid	ate		Reportir	ng Period				
CASTOR, BRUCE FRIENDS OF, INC			From	11/24	/2015	To:	12/31/2015	
				DATE			AMOUNT	
To Whom Paid Bruce L. Castor, Sr.			мо	DAY	YEAR			
Mailing Address 4640 Logan Cou	rt		12	23	2015	\$	9,250.00	
City Schwenksville	State PA	Zip Code (Plus 4) 19473	Description of Expenditure Repayment of Loan					
To Whom Paid Diane S. Castor			МО	DAY	YEAR	,		
Mailing Address 4640 Logan Cou	ırt		12	23	2015	\$	8,805.89	
City Schwenksville	e State Zip Code (Plus 4) PA 19473				enditure an			
To Whom Paid Bruce L. Castor, Jr.			МО	DAY	YEAR			
Mailing Address PO Box 800			12	17	2015	\$	248.13	
City West Conshohocken	State PA	Zip Code (Plus 4) 19428		ption of Ex Election N		2		
To Whom Paid Bruce L. Castor, Jr.			мо	DAY	YEAR			
Mailing Address PO Box 800			12	14	2015	\$	441.53	
City West Conshohocken	State PA	Zip Code (Plus 4) 19428	1	ption of Ex	-		to/from Phila	
To Whom Paid Sunday			МО	DAY	YEAR			
Mailing Address 613 West CHelt	enham Ave		12	14	2015	\$	300.00	
City Elkins Park	State PA	Zip Code (Plus 4) 19027	Description of Expenditure Campaign Ad					

To Whom Paid Brian Miles			мо	DAY	YEAR		
Mailing Address 1130 Longhorn Circle			11	30	2015	\$	690.03
City Blue Bell	State PA	Zip Code (Plus 4) 19422	Description of Expenditure Dinner with Bruce Castor and Campaign Staff				
To Whom Paid Comcast			мо	DAY	YEAR		
Mailing Address PO Box 3002			11	30	2015	\$	461.08
City Southeastern	State PA	Zip Code (Plus 4) 19398	Description of Expenditure Campaign Telephone/Internet Service				
To Whom Paid CLC Group LLC			мо	DAY	YEAR		
Mailing Address 630 N. 3rd Street #78			11	30	2015	\$	3,250.00
City Philadelphia	State PA	Zip Code (Plus 4) 19123	Description of Expenditure Consulting Fee				
To Whom Paid Chase Card Services			МО	DAY	YEAR		
Mailing Address PO Box 15153			11	30	2015	\$	3,751.34
City Wilmington	State DE	Zip Code (Plus 4) 19886	Description of Expenditure Campaign Credit Card				
To Whom Paid Facebook			мо	DAY	YEAR		
Mailing Address 1 Hacker Way			11	30	2015	\$	199.83
City Menio Park	State CA	Zip Code (Plus 4) 94025	Description of Expenditure Facebook Ads				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
Lines Grand Poter of Experi	anta, us on , ugo 1, No	per terrer i age, attill b	<u> </u>			\$	27,397.83



January 8, 2016

VIA FEDERA EXPRESS

Ross Weiss

Direct Phone 610-941-2361

Direct Fax 877-295-6883

rweiss@cozen.com

Department of State Bureau of Commissions, Elections and Legislation 210 North Office Building Harrisburg, PA 17120

Re: Friends of Bruce Castor, Inc.

Filer ID No. 2003023

Dear Sir/Madam:

Enclosed please find the signed and notarized Campaign Finance Report (Affidavit) for the Campaign Committee. This report was filed electronically on Friday, January 8, 2016. Please note this is a termination report and a debt forgiveness letter is included. Thank you.

Very truly yours,

COZEN O'CONNOR

By: / Ross Weiss

RW/ngd Enclosure

cc: Bureau of Elections, Montgomery County

Bruce L. Castor, Jr.