

Commonwealth of Pennsylvania
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 ^{1.}		COMMITTEE ^{2.} <input checked="" type="checkbox"/>		LOBBYIST ^{3.}	
Name of Filing Committee, Candidate or Lobbyist: <i>Friends of Bill Whiteside</i>									
Street Address: <i>202 Somerset Court</i>									
City: <i>Lansdale</i>					State: <i>Pa</i>		Zip Code: <i>19446 -</i>		
TYPE OF REPORT (place X to the right of report type)	8TH TUESDAY PRE-PRIMARY ^{1.}		2ND FRIDAY PRE-PRIMARY ^{2.}		30 DAY POST PRIMARY ^{3.}		AMENDMENT REPORT? YES		NO <input checked="" type="checkbox"/>
	8TH TUESDAY PRE-ELECTION ^{4.}		2ND FRIDAY PRE-ELECTION ^{5.}		30 DAY POST ELECTION ^{6.} <input checked="" type="checkbox"/>		TERMINATION REPORT? YES		NO <input checked="" type="checkbox"/>
	ANNUAL REPORT ^{7.}		YEAR		FILING METHOD () CHECK ONE <input type="checkbox"/>		PAPER <input checked="" type="checkbox"/>		DISKETTE

Name of Office Sought by Candidate: <i>Montgomery County Prothonotary</i>				DATE OF ELECTION			District Number	Office Code	Party Code	County Code
				MO.	DAY	YEAR	-	OTH	REP	46
				11	03	2015				
(SEE INSTRUCTIONS FOR CODES)										

Summary of Receipts and Expenditures from:	MO.	DAY	YEAR	To	MO.	DAY	YEAR	FOR OFFICE USE ONLY	
	10	20	2015		11	23	2015		
A. Amount Brought Forward From Last Report								\$ 30,831.65	
B. Total Monetary Contributions and Receipts (From Schedule I)								\$ 2,246.50	
C. Total Funds Available (Sum of Lines A and B)								\$ 33,078.15	
D. Total Expenditures (From Schedule III)								\$ 28,575.56	
E. Ending Cash Balance (Subtract Line D from Line C)								\$ 4,502.59	
F. Value of In-Kind Contributions Received (From Schedule II)								\$ 37,750.81	
G. Unpaid Debts and Obligations (From Schedule IV)								\$ 2,000.00	

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 November, 2015

Marian L. Rebeck
 COMMONWEALTH OF PENNSYLVANIA
 NOTARIAL SEAL
 Marian L. Rebeck, Notary Public
 Whippany Twp., Montgomery County
 My Commission Expires Nov. 3, 2019
 MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

Edward Diasio
 Signature of Person Submitting Report
 Edward DIASIO
 Printed Name
 215 896-7531
 Area Code Daytime Telephone Number

PART II - If this is a report of a 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 30th day of November, 2015

William W. Whiteside III
 COMMONWEALTH OF PENNSYLVANIA
 Notary Public
 Jill A. Budney, Notary Public
 Whippany Twp., Montgomery County
 My Commission Expires June 11, 2017
 MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

William W. Whiteside III
 Signature of Candidate
 WILSON W WHITESIDE III
 Printed Name
 215 803-9187
 Area Code Daytime Telephone Number

CONTRIBUTIONS AND RECEIPTS**Detailed Summary Page**

Name of Filing Committee or Candidate <i>Friends of Bill Whiteside</i>	Reporting Period From <i>10-20-15</i> To <i>11-23-15</i>
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ 50.00

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)	
Contributions Received from Political Committees (Part A)	\$ 204.50
All Other Contributions (Part B)	\$ 1,200.00
TOTAL for the Reporting Period (2)	\$ 1,404.50

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$ 792.00
All Other Contributions (Part D)	\$ —
TOTAL for the Reporting Period (3)	\$ 792.00

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

TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.)	\$ 2,246.50
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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 Bill Whiteside</i>	Reporting Period From <i>10-20-15</i> To <i>11-23-15</i>
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				DATE			AMOUNT
				MO.	DAY	YEAR	
Full Name of Contributing Committee <i>Friends of Nancy J. Becker</i>				<i>11</i>	<i>17</i>	<i>2015</i>	\$ <i>204.50</i>
Mailing Address <i>1798 Meadow Glen Drive</i>				MO.	DAY	YEAR	\$
City <i>Lansdale</i>	State <i>Pa</i>	Zip Code (Plus 4) <i>19446 -</i>		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	\$
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	\$

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

PAGE TOTAL \$ <i>204.50</i>

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 Bill Whiteside</i>	Reporting Period From <i>10-20-15</i> To <i>11-23-15</i>
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Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
<i>Charles & Dorothy Torretta</i>	<i>11</i>	<i>17</i>	<i>2015</i>	\$ <i>100.00</i>
Mailing Address <i>4 Farrier Lane</i>	MO.	DAY	YEAR	\$
City <i>Bive Bell</i>	MO.	DAY	YEAR	\$
State <i>Pa</i>				
Zip Code (Plus 4) <i>19422-</i>				
<i>Lance & Nina Rogers</i>	<i>11</i>	<i>17</i>	<i>2015</i>	\$ <i>250.00</i>
Mailing Address <i>710 Great Springs Road</i>	MO.	DAY	YEAR	\$
City <i>Bryn Mawr</i>	MO.	DAY	YEAR	\$
State <i>Pa</i>				
Zip Code (Plus 4) <i>19010 -</i>				
<i>Kenneth & Phyllis Millevoi</i>	<i>11</i>	<i>17</i>	<i>2015</i>	\$ <i>250.00</i>
Mailing Address <i>4625 Eden Street</i>	MO.	DAY	YEAR	\$
City <i>Philadelphia</i>	MO.	DAY	YEAR	\$
State <i>Pa</i>				
Zip Code (Plus 4) <i>19114 -</i>				
<i>Scott & Denise Exley</i>	<i>11</i>	<i>17</i>	<i>2015</i>	\$ <i>250.00</i>
Mailing Address <i>946 Ivy Lane</i>	MO.	DAY	YEAR	\$
City <i>Pottstown</i>	MO.	DAY	YEAR	\$
State <i>Pa</i>				
Zip Code (Plus 4) <i>19464 -</i>				
<i>Joseph Torretta</i>	<i>11</i>	<i>17</i>	<i>2015</i>	\$ <i>100.00</i>
Mailing Address <i>910 Germantown Pike</i>	MO.	DAY	YEAR	\$
City <i>Plymouth Meeting</i>	MO.	DAY	YEAR	\$
State <i>Pa</i>				
Zip Code (Plus 4) <i>19401 -</i>				
<i>Andy Santacroce</i>	<i>11</i>	<i>10</i>	<i>2015</i>	\$ <i>250.00</i>
Mailing Address <i>709 Gregory Drive</i>	MO.	DAY	YEAR	\$
City <i>Horsham</i>	MO.	DAY	YEAR	\$
State <i>Pa</i>				
Zip Code (Plus 4) <i>19044 -</i>				
	MO.	DAY	YEAR	\$
	MO.	DAY	YEAR	\$
	MO.	DAY	YEAR	\$
	MO.	DAY	YEAR	\$
	MO.	DAY	YEAR	\$
	MO.	DAY	YEAR	\$

PAGE TOTAL

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

\$ *1,200.00*

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 over \$250.00 in the reporting period.

Name of Filing Committee or Candidate <i>Friends of Bill Whiteside</i>	Reporting Period From <i>10-20-15</i> To <i>11-23-15</i>
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				DATE			AMOUNT
Full Name of Contributing Committee	MO.	DAY	YEAR				
<i>Area 1 GOP</i>	<i>11</i>	<i>17</i>	<i>2015</i>				<i>\$ 510.00</i>
Mailing Address <i>119 Zieglerville Road</i>	MO.	DAY	YEAR				
<i>119 Zieglerville Road</i>	<i>11</i>	<i>17</i>	<i>2015</i>				<i>\$ 282.00</i>
City <i>Schwenksville</i>	MO.	DAY	YEAR				
State <i>Pa</i>							
Zip Code (Plus 4) <i>19473-</i>							
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)							

PAGE TOTAL <i>\$ 792.00</i>

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

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 Bill Whiteside</i>	Reporting Period From <u>10-20-15</u> To <u>11-27-15</u>
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Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Employer Name	Occupation			
Employer Mailing Address/Principal Place of Business				

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

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

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

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
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

\$ —

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 Bill Whiteside</i>	Reporting Period From <i>10-20-15</i> To <i>11-23-15</i>
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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						

PAGE TOTAL	\$ —
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Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

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 Bill Whiteside</i>	Reporting Period From <u>10-24-15</u> To <u>11-23-15</u>
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1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTORTOTAL for the Reporting Period (1) \$ —**2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)**TOTAL for the Reporting Period (2) \$ —**3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)**TOTAL for the Reporting Period (3) \$ 37,750.81

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.)

\$ 37,750.81

**SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED**

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate <i>Friends of Bill Whiteside</i>	Reporting Period From <i>10-20-15</i> To <i>11-23-15</i>
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Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	Zip Code (Plus 4)			\$
Description of Contribution:				
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	Zip Code (Plus 4)			\$
Description of Contribution:				
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	Zip Code (Plus 4)			\$
Description of Contribution:				
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	Zip Code (Plus 4)			\$
Description of Contribution:				
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	Zip Code (Plus 4)			\$
Description of Contribution:				
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
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
\$ —

**SCHEDULE II
PART G
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OVER \$250.00**

Name of Filing Committee or Candidate <i>Friends of Bill Whiteside</i>	Reporting Period From <i>10-20-15</i> To <i>11-23-15</i>
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				DATE			AMOUNT
Full Name of Contributor	MO.	DAY	YEAR				\$
<i>Republican Party of Pennsylvania</i>				<i>10</i>	<i>26</i>	<i>2015</i>	<i>18,770.90</i>
Mailing Address <i>112 State Street</i>				MO.	DAY	YEAR	\$
City <i>Harrisburg</i>	State <i>Pa</i>	Zip Code (Plus 4) <i>17101 -</i>		MO.	DAY	YEAR	\$
Employer of Contributor <i>N/A</i>				Occupation <i>N/A</i>			
Employer Mailing Address/Principal Place of Business <i>N/A</i>				Description of Contribution <i>Literature & Postage</i>			
<i>Republican Party of Pennsylvania</i>				<i>10</i>	<i>30</i>	<i>2015</i>	<i>18,979.91</i>
Mailing Address <i>112 State Street</i>				MO.	DAY	YEAR	\$
City <i>Harrisburg</i>	State <i>Pa</i>	Zip Code (Plus 4) <i>17101 -</i>		MO.	DAY	YEAR	\$
Employer of Contributor <i>N/A</i>				Occupation <i>N/A</i>			
Employer Mailing Address/Principal Place of Business <i>N/A</i>				Description of Contribution <i>Literature & Postage</i>			
				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			
				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business				Description of Contribution			
				MO.	DAY	YEAR	\$
Mailing Address				MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		MO.	DAY	YEAR	\$
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
\$ 37,750.81

SCHEDULE III

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate <i>Friends of Bill Whiteside</i>	Reporting Period From <i>10-20-15</i> To <i>11-23-15</i>
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To Whom Paid <i>Montgomery County Rep. Comm.</i>	MO.	DAY	YEAR	Amount
Mailing Address <i>860 Pennlyn Blue Bell Pk. #240</i>	<i>10</i>	<i>22</i>	<i>2015</i>	<i>\$ 28,000.00</i>
City <i>Blue Bell</i>	Description of Expenditure <i>Support</i>			
State <i>Pa</i>	Zip Code (Plus 4) <i>19422-</i>			

To Whom Paid <i>United States Post Office</i>	MO.	DAY	YEAR	Amount
Mailing Address <i>1407 Bruce Road</i>	<i>10</i>	<i>24</i>	<i>2015</i>	<i>\$ 409.40</i>
City <i>Oreland</i>	Description of Expenditure <i>Bulk Mail</i>			
State <i>Pa</i>	Zip Code (Plus 4) <i>19075-</i>			

To Whom Paid <i>Clarice Latham</i>	MO.	DAY	YEAR	Amount
Mailing Address <i>12 Stonington Court</i>	<i>11</i>	<i>03</i>	<i>2015</i>	<i>\$ 158.61</i>
City <i>Dresher</i>	Description of Expenditure <i>Facebook Promotional Fees</i>			
State <i>Pa</i>	Zip Code (Plus 4) <i>19025-</i>			

To Whom Paid <i>Paypal</i>	MO.	DAY	YEAR	Amount
Mailing Address <i>2221 N. First Street</i>	<i>11</i>	<i>10</i>	<i>2015</i>	<i>\$ 7.55</i>
City <i>San Jose</i>	Description of Expenditure <i>Fee</i>			
State <i>CA</i>	Zip Code (Plus 4) <i>95131-</i>			

To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				<i>\$</i>
City	Description of Expenditure			
State	Zip Code (Plus 4)			
	-			

To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				<i>\$</i>
City	Description of Expenditure			
State	Zip Code (Plus 4)			
	-			

To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				<i>\$</i>
City	Description of Expenditure			
State	Zip Code (Plus 4)			
	-			

To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				<i>\$</i>
City	Description of Expenditure			
State	Zip Code (Plus 4)			
	-			

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

PAGE TOTAL
\$ 28,575.56

**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 Bill Whiteside</i>	Reporting Period From <u>10-20-15</u> To <u>11-23-15</u>
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Name of Creditor <i>W. Winston Whiteside, III</i>					Outstanding Balance of Debt \$ 2,000.00	
Mailing Address <i>217 Jefferson Ave.</i>	DATE DEBT INCURRED	MO. <i>03</i>	DAY <i>04</i>	YEAR <i>2015</i>		
City <i>Horsham</i>	State <i>PA</i>	Zip Code (Plus 4) <i>19044</i>				
Description of Debt <i>Loan to Campaign</i>						

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 \$ 2,000.00
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