## CAMPAIGN FINANCE REPORT

PAGE 1 OF /2 (COVER PAGE)

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

Filer Identification Number:	<b>'</b>		Repor Filed				COMMI	TTEE	2.	LOBBY	IST	3.		
Name of Filing Comm	of Filing Committee, Candidate or Lobbyist: Friends of Bill Whit			· e s	ıd	ρ.	<b>1</b>							
Street Address:														
2 (	2 Some	15	et Cou	ort					Г <u>а</u>					
Lan	sdale						State: Pa		2ip Cod / 94					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA' PRE-PRIMA	'	2.	1	DAY ST PRIMARY	3.	AMENDM REPORT?		YES	'	NO.	V
∜place X to	STH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTI	•	5.		DAY ST ELECTION	6. 1	TERMINA REPORT?		YES		NO	V
the right of report type)	ANNUAL REPORT	7.	YEAR				NG METHOD CHECK ONE		PAPE	R .	V	DISKET	TE	
Name of Office Sough	t by Candidate:						ATE OF ELEC	TION	District Number	Office		Party Code		inty ide
Montgo	mery Cour	$\frac{1}{2}$	Protho	note	ary	/ <b>M</b>		AR /3		OTH		EP	4	
							100   201					TIONS FO		ODES)
Summary of Re	acainte 🕨	М	DAY YE	AR		м	O. DAY YE	AR	F	OR OF	FICE U	SE ON	Υ-	
and Expenditure		10	20 201	3	То	11	23 20	15			η 1	j		
A. Amount Brought	Forward From La	st Rep	ort		\$	30,	831.65					1		
B. Total Monetary	Contributions and F	Receip	ts (From Sched	dule I)										
C. Total Funds Ava	ilable (Sum of Line	s Aa	nd B)		\$ 33,078,15									
D. Total Expenditur	es (From Schedule	111)			\$ 28,575,56									
E. Ending Cash Bala	E. Ending Cash Balance (Subtract Line D from Line C) \$ 4,502,59				<b>)</b>				M. Minner		1			
F. Value of In-Kind	d Contributions Re	ceived	(From Schedu	ile II)	\$ :	37,	750.81							
G. Unpaid Debts an	d Obligations (Fron	n Sche	dule IV)				000,00							I
			Δ	FFIDAV	/IT SI	CTIC	NI.							
PART I - If this is	a Committee rep	ort, tr						ort, ca	ndidate si	gn her	8.			
I swear (or affirm) the correct and complete.	at this report, includi	ng the	attached schedul	les, on p	paper o	or com	puter diskette, ar	re to th	ne best of	my kno	wledge	and beli	ef tr	ue,
Sworn to and subscri	· · · · · · · · · · · · · · · · · ·				_		``	$\overline{}$						
Mossey day of	November Chelinek	LTH O	F PENNSYLVA	\ <u>\</u>		<u>~</u>	Signa	ture of	Person Su			i i		
Musian o			Notary Public otgomery Count		}		Edwa		rinted Nam	IAS	10			
My commission expl	res   My Commissi	on Exp	ires Nov. 3, 20	19	-		215	-	_	96 -	- フィ	531		•
	MEMBER DENNSYLV	anigas:	SOCIATION (DE NOT)	ARIES	<u> </u>		Area Code	_				e Numbe	≥r	
PART II - If this Di	S a report of a Co	ındidə	te's Authorize	d Com	mitte	a. ca	rdidate shall sid	n her					· , . ·	
I swear (or affirm) the (P.L. 1333, No. 320) as	at to the best of my									ns of the	Act o	f June 3	, 193	7
Sworn to and subscr								. 1	! //					1
30th day of	Novemi	ماي	20_	15	}		Art	W	HAN	10				
1 domes	NWEALTHON PENN	SKINAN	NIA				1.1125==	Signat	tire of Can	didate	- ( ~	, ) <		<u> </u>
7.3.30	Notarial a dature		2011	<u></u>			ر 10 ر ر سر ا		rinted Nam		13 1	<u> </u>		≠┃
My commission exp	III A. Budney, Notary Pu Jain Twp., Montgomery mmission Expres June	County 11P201	7 YR.	-(	J		2/5 Area Code	_		ク <i>3</i> lytime T	elephor	ne Numbe	r	[
	PEHHSYLVANIA ASSOCIATION													f

### SCHEDULE I

PAGE 2 OF 12

### CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting Period
Friends of Bill Whiteside	From 10-20-15 To 11-23-15

1. UNITEMIZED	CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER	CONT	RIBU	TOR	
	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)	\$ /	, 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, ET	TC.	(FROM	PART B
TOTAL for the Reporting Period (4	1)	\$	

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

Reporting Period

#### 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		Reporting Period				
Friends of Bill	$\underline{\hspace{0.1cm}}$ $\omega$	hiteside		From /	0 - 20 - /:	5 To <u>//-23-/5</u>
				DATE		AMOUNT
Full Name of Contributing Committee	2 <i>i</i> .	_	MO.	DAY	YEAR	\$ 204.50
Full Name of Contributing Committee  Friends of Nancy J. 6  Mailing Address	SCKE		// MO.	17 DAY	2015 YEAR	# 204750
1798 Meadow Glen.	Drive	•		924.	7,000	\$
City			MO.	DAY	YEAR	
Lansdale	Pa	19446 -				\$
Full Name of Contributing Committee			MO.	DAY	YEAR	œ.
Mailing Address			MO.	DAY	YEAR	\$
Halling Address			NO.		IEAN	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
						\$
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Mailing Address			140	BAY	VEAD	*
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	
		-				<b>  \$</b>
Full Name of Contributing Committee			MO.	DAY	YEAR	
						\$
Mailing Address			MO,	DAY	YEAR	s
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
		_				<b>  \$</b>
Full Name of Contributing Committee			MO.	DAY	YEAR	
						\$
Meiling Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MQ.	DAY	YEAR	
	1 1	_				<b>1</b> \$
Full Name of Contributing Committee			MO.	DAY	YEAR	_
						\$
Mailing Address			MO.	DAY	YEAR	s
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
					1,2,7,11	\$
Full Name of Contributing Committee			MO	DAY	YEAR	
Mailing Address				644	VEAR	\$
maning vones			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
		<u> </u>				\$
					_	PAGE TOTAL
Enter Grand Total of Part A on Sche	edul <b>e</b> I,	Detailed Summa	ry Page,	Section	on 2.	\$ 204.50
DCER-502 /7-99)						
DSEB-502 (7-99)						

# 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	Reporting Period
Friends of Bill Whiteside	From 10-20-15 To 11-23-15

				DATE			AMOUNT
Full Name of Contributor		1+0	MO.	DAY	YEAR	\$	<i>i</i>
Charles & Dorothy To	17/127		MO.	17 DAY	2015	*	100.00
4 Farrier Lane			MO.	DAT	YEAR	\$	
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	├	
Blue Bell	Pa	19422-				1 \$	
Full Name of Contributor			MO.	DAY	YEAR	<del>                                     </del>	
Lance & NINA Roger.	_5		11	17	2015	1 \$	250.00
		,	MO.	DAY	YEAR	1	
710 Great Springs R	oad	<u></u>				\$	
Bryn Mawk	State	Zip Code (Plus 4)	MO.	DAY	YEAR		
	10	19010 -				\$	_
Full Name of Contributor		1	MO.	DAY	YEAR	\$	5 C A A A
Kenneth & Phyllis Mille Mailing Address	LVOI			17	2015		250 00
			MO.	DAY	YEAR	\$	
4625 Eden Street	State	Zip Code (Plus 4)	MO.	DAY	YEAR	<u> </u>	
Philadelphia	Pa	Zip Code (Plus 4) 19114 -		יאט	TEAR	s	
Full Name of Contributor			MO.	DAY	YEAR	Ť	
Scott & Denise Exl	ev		11	1.7	2015	\$	250,00
Mailing Address	-/-		MO.	DAY	YEAR		
946 IVY Lane						\$	
Pottstown	State	Zip Code (Plus 4)	MO.	DAY	YEAR		
7 8 2 2 3 2 0 0077	ra	19464 -				\$	
Full Name of Contributor			MO.	DAY	YEAR		
Joseph Tornetta			11	17	2015	\$	/00:00
910 Germantown P	ike		MQ.	DAY	YEAR	\$	
		Zip Code (Plus 4)	MO.	DAY	YEAR	<u> </u>	**************************************
Plymouth Meeting	Pa	19401-		<u> </u>		\$	
ull Name of Contributor			MO.	DAY	YEAR		
Mailing Address / Santacroce			11	10	2015	\$	250,00
TAD Branch Dries	٠,		MO.	DAY	YEAR	\$	
709 Gregory Drive	1 51010	Zip Code (Plus 4)	_			-	
Horsham	Pa	19044 -	MO.	DAY	YEAR	\$	
full Name of Contributor	1,00	. , - , ,	MO.	70.45	Verte	9	
and the south individual of			mU.	DAY	YEAR	\$	
Mailing Address	·············		MO.	DAY	YEAR		
				* (***	W/- 77 ·	\$	
Dity	State	Zip Code (Plus 4)	MQ.	DAY	YEAR		
						\$	
ull Name of Contributor			MO.	DAY	YEAR	4	
Mailing Address						\$	
g Addiess			MO.	DAY.	YEAR	\$	
ity	State	Zip Code (Plus 4)	1			_	·····
•		- more (F103 m)	MQ.	DAY	YEAR	\$	
							E TOTAL
Total Comment Total Comment Comment			_	_			
inter Grand Total of Part B on Sche	dule i,	Detailed Summar	y Page,	Section	1 <b>2</b> .	\$	1,200.00
EB-502 (7-99)							

Reporting Period

#### 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				porting	Period	
Friends of Bill	WI	riteside	[	From <u>/</u>	0-20-1	5 To 11-23-15
				DATE		AMOUNT
Full Name of Contributing Committee			MO.	DAY		\$ 510.00
Area 1 GOP Mailing Address		·	MO.	/ 7 DAY	20/5 YEAR	
119 Zieglerville 1 City Sichwenksville	Roa	d	//	17	205	\$ 282.00
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
JChWENKSVIIIE	Pa	19413-				*
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	
						\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
		<del>-</del>				7
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	_
						\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
		<del>-</del>				3
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Mailing Address	<del> </del>		MO.	DAY	YEAR	
						\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
		<del>-</del>				
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	_
						\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
	1			or natives in		
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	<u> </u>
						\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Euli Nama of Contribution Commisses	.1		MQ.	DAY	YEAR	
Full Name of Contributing Committee				- DAI		\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)		D.E.V	VEAS	*
		-	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	<u> </u>		MO.	DAY	YEAR	
	· · · · · · · · · · · · · · · · · · ·					\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
	<u> </u>	<del>-</del>		· · · · · · · · · · · · · · · · · · ·		\$
						PAGE TOTAL
Enter Grand Total of Part C on Sche	dule I,	Detailed Summan	y Page,	Sectio	п 3.	\$ 792,00
DSEB-502 (7-99)	_	•	. <del>-</del> ·		ı	

PAGE 6 OF 12

# 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 Period
Friends of Bill Whiteside	From 10 . 20-15 To 11-23-15

7770						
				DATE		AMOUNT
Full Name of Contributor			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	Mo.	DAY	YEAR	\$
Employer Name	<u> </u>		Occupation	on	<u></u>	
Employer Mailing Address/Principal Place of Business						
Full Name of Contributor			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Employer Name	<del></del>		Occupation	on	<u></u>	
Employer Mailing Address/Principal Place of Business						
m co. Mar			MO.	DAY	YEAR	
Full Name of Contributor						\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Employer Name			Occupation	on		
Employer Mailing Address/Principal Place of Business				- :		
Full Name of Contributor			MQ.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO	DAY	YEAR	\$
Employer Name		<u> </u>	Occupation	na	<u> </u>	
Employer Mailing Address/Principal Place of Business	-		1			
Full Name of Contributor			MO:	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MQ.	DAY	YEAR	\$
Employer Name	J #	<u> </u>	Occupation	on	<u> </u>	<u> </u>
Employer Mailing Address/Principal Place of Business	***************************************			***************************************		
Enter Grand Total of Part D on Sche	dule l	, Detailed Summar	y Page,	Sectio	n 3.	PAGE TOTAL

DSEB-502 (7-99)

PAGE 7 OF 12

# 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.

Friends of	Bill Whit.	eside		From <u>//</u>		5 To 11-23-15
II Name					· · · · · · · · · · · · · · · · · · ·	
ailing Address						
ity	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
ety			NO.		, , , , , , , , , , , , , , , , , , , ,	\$
Receipt Description					_	
rull Name						
Mailing Address	<del></del>				-	
Dity	State	Zip Code (Plus 4)	Mo.	DAY	YEAR	Amount
мту			111			\$
Receipt Description						
Full Name				<del></del>		
Mailing Address						
						——————————————————————————————————————
Sity	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount \$
Receipt Description					I	
uli 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
		<u> </u>				\$
Receipt Description						
Full Name						
Mailing Address		444			,	
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	Amount
						\$
Receipt Description						
Receipt Description						PAGE TOTAL

SCHEDULE II

PAGE 8 OF 12

## 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 Per	iod		
Friends of Bill Whiteside	From <u>/0</u>	26-15	To 11-23-1	<u>'5"</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE C	OF \$50.00 OR L	ESS PER	CONTRIBUTO	)R
TOTAL for the Reporting Pe	eriod (1)	\$		
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO	\$250.00 (FROM	PART I	<b>5)</b>	
TOTAL for the Reporting Pe	eriod (2)	\$		
		· · · · · · · · · · · · · · · · · · ·		
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (	FROM PART G			
TOTAL for the Reporting Pe	eriod (3)	\$ 3	7,750.81	/
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.)	2,	<b>\$</b> 3	7, 750.8	, [

#### SCHEDULE II PART F

## IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			1	eporting		
Friends of Bill W	Shit	eside		From _/	0-20-1	5 To <u>//-23-15</u>
				DATE		AMOUNT
Full Name of Contributor			MO.		YEAR	
						\$
Mailing Address			MO.	DAY	YEAR	<b>&amp;</b>
						\$
City	State	Zip Code (Plus 4)	MQ.	DAY	YEAR	\$
	<u> </u>				l	
Description of Contribution:						
Coll Name of Contributor			140	DAY	Lvman	
Full Name of Contributor			MO.	UAT	YEAR	\$
Mailing Address			MC.	DAY	YEAR	
•						\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
		-				\$
Description of Contribution:			**************************************	······································		- In a subtraction of the first succession of
Full Name of Contributor			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
i City	13.00		, MO.	DAY	TEAN	\$
Description of Contribution:	J					
Full Name of Contributor			MO.	DAY	YEAR	
						\$
Mailing Address			MO.	DAY	YEAR	\$
						<b>,</b>
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
	<u> </u>	_			<u> </u>	
Description of Contribution:						
Full Name of Contributor			MO.	DAY	YEAR	
TOT REGING OF CONTROLOR			mų.	DAT	: TEAR	\$
Mailing Address			MO.	DAY	YEAR	
						\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	_
·						\$
Description of Contribution:						
				· · · · ·		
Full Name of Contributor			MO.	DAY	YEAR	s
Mailing Address			MO.	DAY	YEAR	
maining Address			*****	277.1	,	\$
City	State	Zip Code (Plus 4)	MQ.	DAY	YEAR	
·		_				<b>] \$</b>
Description of Contribution:		<u>.                                    </u>	<u> </u>	·	<del></del>	
Enter Grand Total of Part E on Cohe	dula *	In-Kind Contribu	tions Da	امدالمط		PAGE TOTAL
Enter Grand Total of Part F on Schee Summary Page, Section 2.	dule i	l, In-Kind Contribu	itions De	etalled		PAGE TOTAL

# SCHEDULE II PART G

## IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate			R	eporting	Period	
Friends of Bill	WF	riteside		From 🗾	0-20-1	5 To 11-23-15
				DATE		AMOUNT
Full Name of Contributor	· 0	)	MO.	DAY	YEAR 2015	\$ 18,770,90
Mailing Address		ennsylvania	/ Ø	26 DAY.	∠0/3 YEAR	
112 State St.	122	t .				\$
Full Name of Contributor  Republican Party of  Mailing Address  112 State Sta  City  Harrisburg  Employer of Contributor	Pa	Zip Code (Plus 4) /7/0/ -	MO.	DAY	YEAR	\$
N/A				N	IA	
Employer Mailing Address/Principal Place of Business  N/A			,	on of con erati		Postage
Full Name of Contributor Republican Party O	) <del>f</del> ,	Pennsylvania	MQ.	30	20/5	\$ 18,979.91
Full Name of Contributor  Republican Party of  Mailing Address  1/2 State Street	_		MO.	DAY	YEAR	\$
city Harrisburg	Pa	Zip Code (Plus 4) /7/0/ -	MO.	DAY	YEAR	\$
N/A			Occupati	on //	A	
Employer Mailing Address/Principal Place of Business			Descripti L/+	on of Con erat	tribution	Postage
Full Name of Contributor			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY .	YEAR	\$
City	State	Zip Code (Plus 4) 	MO.	DAY	YEAR	\$
Employer of Contributor			Occupati	an		
Employer Meiling Address/Principal Place of Business			Descripti	ion of Con	tribution	
Full Name of Contributor			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4) —	MO.	DAY	YEAR	\$
Emplayer of Contributor			Occupati	on		
Employer Mailing Address/Principal Place of Business			Descript	ion of Con	tribution	
Full Name of Contributor			MO.	DAY	YEAR	\$
Mailing Address			MQ.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Employer of Contributor			Occupati	on		
Employer Mailing Address/Principal Place of Susiness			Descript	ian of Car	tribution	
Enter Grand Total of Part G on School Summary Page, Section 3.	iule I	I, In-Kind Contribu	tions D	etailed		* 37,750.81

DSEB-502 (7-99)

#### SCHEDULE III

## STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			lρ	00051:00	Pariod		
Name of Filing Committee or Candidate	17 7	1 10	Reporting Period  From 10-20-15 To 11-22-15				
Friends of Bill W	Iniz	es 10/2		From 1	0.40.	13 10 11-L3-13	
Hontgomery County	Rep	Comm.	MO. / ○	DAY 2Z	YEAR 2015	\$ 28,000.00	
Montgomery County Mailing Address 860 Pennlyn Blue B	3.011	PK #240		on of Expe			
Blue Bell	Pa	Zip Code (Plus 4) 19422-	•	Jup	<i>-</i>		
United States Posi	Ł O	ffice	MQ.	24	YEAR 2015	Amount \$ 409.40	
Mailing Address 1407 Bruce Road	<u>d</u>		Description	on of Expe $\mathcal{B}$ $\mathcal{J}\mathcal{B}$	enditure M	ail	
Oreland	Pa	Zip Code (Plus 4) 19075-					
To Whom Paid  Clarice Latham  Mailing Address			MO.	DAY 03	YEAR 20/5	Amount \$ 158.61	
12 Stonington Court						Promotional	
Dresher Dresher	Pa	zip Code (Plus 4) 19025 –			Fees		
To Whom Paid Paypal  Mailing Address  ADD A To A Character  Mailing Address			MO.		YEAR 2015	Amount <b>5</b> 7.55	
Mailing Address 2221 N. First Street City		P8. (1.44)	Description	on of Expe	enditure		
San Lose	State ('A	Zip Code (Plus 4) 95/31 -					
To Whom Paid			MO.	DAY	YEAR	Amount	
Mailing Address	<del></del>		Description	on of Expe	enditure	\$	
City	State	Zip Code (Plus 4)			<u></u>		
To Whom Paid	<u> </u>		MO.	DAY	YEAR	Amount \$	
Mailing Address		708 12	Description	on of Expe	inditure		
City	State	Zip Code (Plus 4)					
To Whom Paid	<u> </u>		MO.	DAY	YEAR	Amount	
Mailing Address	<del></del>	**************************************	Description	on of Expe	nditure	\$	
City	State	Zip Code (Plus 4)					
To Whom Paid	1		MO.	DAY	YE KR	Amount &	
Mailing Address		Manufacture de la constante de	Description	on of Expe	enditura	\$	
City	State	Zip Code (Plus 4)					
						PAGE TOTAL	
Enter Grand Total of Expenditures on Pag	ge 1, 1	Report Cover P	age, Ite	m D.		\$ 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			Reporting	Period	
Friends of Bill White	teside	1			15 To 11-23-15
Name of Creditor  W. Winston Whiteside, III  Mailing Address					Outstanding Balance of Debt \$ 2,000,0
	DEBT	MO.	DAY	YEAR	
Horsham	INCURRED	State	DAY Zip Code 19044	(Plus 4)	
	<del></del>	F   1	19077	-	
Loan to Campaign					
					Outstanding Balance of Debt  \$
Mailing Address	DATE DEBT INCURRED	Mo.	DAY	YEAR	
City	111001111	State	Zip Code	(Plus 4)	
Description of Debt					
Name of Creditor			·		Outstanding Balance of Debt
Meiling Address	DATE	MO. ::	DAY	YEAR	\$
City	DEBT INCURRED	State	Zip Code		
		31818	ZIP COUL	शिus ⇒,	
Description of Debt				<del></del>	
Name of Creditor					Outstanding Balance of Debt
Mailing Address	DATE DEBT	MO.	DAY	YEAR	
City	LINCURRED	State	Zip Code —	(Plus 4)	
Description of Debt				<u></u>	
Nama of Creditor					Outstanding Balance of Debt
Name of Creditor  Mailing Address	DATE	MO.	To DAY?	VEAG	Outstanding Balance of Debt.
Mailing Address	DATE DEBT INCURRED	MO.	Z. DAY	PASY	
	DEBT	MO.	Zip Code		
Mailing Address	DEBT				
Mailing Address City	DEBT				Substanding Balance of Debt
Mailing Address  City  Description of Debt	DEBT INCURRED				
Mailing Address  City  Description of Debt  Name of Creditor	DEBT INCURRED	State	Zip Code	(Plus 4)	S Outstanding Balance of Debt
Mailing Address  City  Description of Debt  Name of Creditor  Mailing Address	DEBT INCURRED DATE DEBT	State	Zip Code	(Plus 4)	S Outstanding Balance of Debt
Mailing Address  City  Description of Debt  Name of Creditor  Mailing Address  City	DEBT INCURRED DATE DEBT	State	Zip Code	(Plus 4)	Outstanding Balance of Debt
Mailing Address  City  Description of Debt  Name of Creditor  Mailing Address  City	DEBT INCURRED  DATE DEBT INCURRED	State MO.	Zip Code	(Plus 4)	S Outstanding Balance of Debt