

CAMPAIGN FINANCE REPORT

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

File Identification Number: <input type="checkbox"/>	Report Filed By: <input type="checkbox"/>	CANDIDATE ^{1.}	COMMITTEE ^{2.} <input checked="" type="checkbox"/>	LOBBYIST ^{3.}
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Name of Filing Committee, Candidate or Lobbyist:
Friends of Chuck Wilson

Street Address:
202 Somerset Court

City: *Lansdale* State: *Pa* Zip Code: *19446 -*

TYPE OF REPORT <small>(place X to the right of report type)</small>	6TH TUESDAY PRE-PRIMARY ^{1.}	2ND FRIDAY PRE-PRIMARY ^{2.}	30 DAY POST PRIMARY ^{3.}	AMENDMENT REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION ^{4.}	2ND FRIDAY PRE-ELECTION ^{5.}	30 DAY POST ELECTION ^{6.} <input checked="" type="checkbox"/>	TERMINATION REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
	ANNUAL REPORT ^{7.} <input type="checkbox"/>	YEAR <input type="checkbox"/>	FILING METHOD () CHECK ONE <input checked="" type="checkbox"/>	PAPER <input checked="" type="checkbox"/> DISKETTE <input type="checkbox"/>

Name of Office Sought by Candidate: *Montgomery County Treasurer*

DATE OF ELECTION			District Number	Office Code	Party Code	County Code
MO.	DAY	YEAR	-	0TH	REP	46
<i>11</i>	<i>03</i>	<i>2015</i>				

(SEE INSTRUCTIONS FOR CODES)

Summary of Receipts and Expenditures from:	MO.	DAY	YEAR	To	MO.	DAY	YEAR	FOR OFFICE USE ONLY
		<i>10</i>	<i>20</i>	<i>2015</i>		<i>11</i>	<i>23</i>	
A. Amount Brought Forward From Last Report				\$	<i>1,650.86</i>			
B. Total Monetary Contributions and Receipts (From Schedule I)				\$	<i>6,150.00</i>			
C. Total Funds Available (Sum of Lines A and B)				\$	<i>7,800.86</i>			
D. Total Expenditures (From Schedule III)				\$	<i>6,353.05</i>			
E. Ending Cash Balance (Subtract Line D from Line C)				\$	<i>1,447.81</i>			
F. Value of In-Kind Contributions Received (From Schedule II)				\$	<i>N/A</i>			
G. Unpaid Debts and Obligations (From Schedule IV)				\$	<i>1,800.00</i>			

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*, 20*15*

Marian R. Rebeck
 Notarial Seal
 Marian R. Rebeck, Notary Public
 Whitpain Twp., Montgomery County
 My Commission Expires Nov. 3, 2019

Edward Diasio
 Signature of Person Submitting Report
 Edward DIASIO
 Printed Name
 215 Area Code 896-7531 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*, 20*15*

Jill A. Budney
 Signature
 My commission expires *6 11 2017*

Harold Charles Wilson III
 Signature of Candidate
 Harold Charles Wilson III
 Printed Name
 215 Area Code 362-7943 Daytime Telephone Number

Notarial Seal
 Jill A. Budney, Notary Public
 Whitpain Twp., Montgomery County
 My Commission Expires Nov. 11, 2017

Department of State • 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 Chuck Wilson</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)	\$ <i>50.00</i>
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2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)

Contributions Received from Political Committees (Part A)	\$ <i>950.00</i>
All Other Contributions (Part B)	\$ <i>350.00</i>
TOTAL for the Reporting Period	(2) \$ <i>1,300.00</i>

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)

Contributions Received from Political Committees (Part C)	\$ <i>2,000.00</i>
All Other Contributions (Part D)	\$ <i>1,000.00</i>
TOTAL for the Reporting Period	(3) \$ <i>3,000.00</i>

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)

TOTAL for the Reporting Period	(4)	\$ <i>1,800.00</i>
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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.)	\$ <i>6,150.00</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 Chuck Wilson</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	Mailing Address	City	State Zip Code (Plus 4)	MO. DAY YEAR	\$
<i>Citizens for Dannelly</i>	<i>PO Box 367</i>	<i>Horsham</i>	<i>Pa 19044 -</i>	<i>10 28 2015</i>	<i>\$ 100.00</i>
<i>The Committee to Elect Scott Zelov</i>	<i>220 Rose Lane</i>	<i>Haverford</i>	<i>Pa 19041 -</i>	<i>10 28 2015</i>	<i>\$ 250.00</i>
<i>Friends of Bob Godshall</i>	<i>316 Godshall Road</i>	<i>Souderton</i>	<i>PA 18964 -</i>	<i>10 28 2015</i>	<i>\$ 100.00</i>
<i>Friends of Bob Mensch</i>	<i>PO Box 94</i>	<i>East Greenville</i>	<i>Pa 18041 -</i>	<i>11 02 2015</i>	<i>\$ 250.00</i>
<i>RCLMN</i>	<i>90 Cricket Avenue</i>	<i>Ardmore</i>	<i>Pa 19003 -</i>	<i>11 02 2015</i>	<i>\$ 250.00</i>
					\$
					\$
					\$
					\$
					\$
					\$
					\$
					\$
					\$
					\$

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

PAGE TOTAL <i>\$ 950.00</i>

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 Chuck Wilson</i>	Reporting Period From <i>10-20-15</i> To <i>11-23-15</i>
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Full Name of Contributing Committee	DATE			AMOUNT
	MO.	DAY	YEAR	
<i>Towamencin Republican Committee</i>	<i>10</i>	<i>29</i>	<i>2015</i>	\$ <i>2,000.00</i>
Mailing Address <i>1798 meadow Glen Drive</i>	MO.	DAY	YEAR	\$
City <i>Lansdale</i>	MO.	DAY	YEAR	\$
State <i>Pa</i>	MO.	DAY	YEAR	\$
Zip Code (Plus 4) <i>19446 -</i>	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	MO.	DAY	YEAR	\$
Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	MO.	DAY	YEAR	\$
Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	MO.	DAY	YEAR	\$
Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	MO.	DAY	YEAR	\$
Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	MO.	DAY	YEAR	\$
Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	MO.	DAY	YEAR	\$
Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	MO.	DAY	YEAR	\$
Zip Code (Plus 4)	MO.	DAY	YEAR	\$

PAGE TOTAL	\$ <i>2,000.00</i>
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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 Chuck Wilson</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 <i>DB Rental</i>	MO. DAY YEAR <i>10 29 2015</i>	\$ <i>1,000.00</i>
Mailing Address <i>1800 Pennbrook Parkway #200</i>	MO. DAY YEAR	\$
City <i>Lansdale</i> State <i>PA</i> Zip Code (Plus 4) <i>19446-</i>	MO. DAY YEAR	\$
Employer Name <i>Dischell, Bartle Dooley</i>	Occupation <i>Attorneys</i>	
Employer Mailing Address/Principal Place of Business <i>Same as Above</i>		

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

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

PAGE TOTAL \$ 1,000.00

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 Chuck Wilson</i>	Reporting Period From <i>10-20-15</i> To <i>11-23-15</i>
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Full Name <i>H. Charles Wilson, III</i>						
Mailing Address <i>803 Stony Creek Court</i>						
City <i>Lansdale</i>	State <i>Pa</i>	Zip Code (Plus 4) <i>19446-</i>	MO. <i>10</i>	DAY <i>28</i>	YEAR <i>2015</i>	Amount <i>\$ 1,800.00</i>

Receipt Description
Loan to Campaign

Full Name

Mailing Address

City	State	Zip Code (Plus 4) -	MO.	DAY	YEAR	Amount \$
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Receipt Description

Full Name

Mailing Address

City	State	Zip Code (Plus 4) -	MO.	DAY	YEAR	Amount \$
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Receipt Description

Full Name

Mailing Address

City	State	Zip Code (Plus 4) -	MO.	DAY	YEAR	Amount \$
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Receipt Description

Full Name

Mailing Address

City	State	Zip Code (Plus 4) -	MO.	DAY	YEAR	Amount \$
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Receipt Description

Full Name

Mailing Address

City	State	Zip Code (Plus 4) -	MO.	DAY	YEAR	Amount \$
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Receipt Description

PAGE TOTAL

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

\$ 1,800.00

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 Chuck Wilson</i>	Reporting Period From <i>10-20-15</i> To <i>11-23-15</i>
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1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ <i>N/A</i>

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

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

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.)	\$ <i>N/A</i>
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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 Chuck Wilson</i>	Reporting Period From <i>10-20-15</i> To <i>11-23-15</i>
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Full Name of Contributor	Mailing Address	City	State	Zip Code (Plus 4)	DATE			AMOUNT
					MO.	DAY	YEAR	\$
							\$	
							\$	
							\$	
Description of Contribution:								
							\$	
							\$	
							\$	
Description of Contribution:								
							\$	
							\$	
							\$	
Description of Contribution:								
							\$	
							\$	
							\$	
Description of Contribution:								
							\$	
							\$	
							\$	
Description of Contribution:								
							\$	
							\$	
							\$	
Description of Contribution:								

Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.

PAGE TOTAL \$ <i>N/A</i>

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

Name of Filing Committee or Candidate <i>Friends of Chuck Wilson</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 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 \$ <i>N/A</i>

SCHEDULE III
STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate <i>Friends of Chuck Wilson</i>	Reporting Period From <i>10-20-15</i> To <i>11-23-15</i>
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To Whom Paid <i>RCR, Inc.</i>	MO.	DAY	YEAR	Amount
Mailing Address <i>55 Beacon Hill Lane</i>	<i>10</i>	<i>25</i>	<i>2015</i>	<i>\$ 3,956.00</i>
City <i>Phoenixville</i>	Description of Expenditure <i>mailing</i>			
State <i>Pa</i>	Zip Code (Plus 4) <i>19460-</i>			

To Whom Paid <i>Silver Bullet, LLC</i>	MO.	DAY	YEAR	Amount
Mailing Address <i>746 E. Winchester Street, Suite 140</i>	<i>11</i>	<i>04</i>	<i>2015</i>	<i>\$ 2,397.05</i>
City <i>Salt Lake City</i>	Description of Expenditure <i>Robo Calls</i>			
State <i>UT</i>	Zip Code (Plus 4) <i>84107-</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)			

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
\$ 6,353.05

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 Chuck Wilson</i>	Reporting Period From <i>10-20-15</i> To <i>11-23-15</i>
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Name of Creditor <i>H. Charles Wilson III</i>	DATE DEBT INCURRED			MO.	DAY	YEAR	Outstanding Balance of Debt <i>\$ 1,800.00</i>
Mailing Address <i>803 Stony Creek Ct.</i>				<i>10</i>	<i>28</i>	<i>2015</i>	
City <i>Lansdale</i>				State <i>Pa</i>	Zip Code (Plus 4) <i>19446</i>		
Description of Debt <i>Campaign Loan</i>							

Name of Creditor	DATE DEBT INCURRED			MO.	DAY	YEAR	Outstanding Balance of Debt <i>\$</i>
Mailing Address							
City				State	Zip Code (Plus 4)		
Description of Debt							

Name of Creditor	DATE DEBT INCURRED			MO.	DAY	YEAR	Outstanding Balance of Debt <i>\$</i>
Mailing Address							
City				State	Zip Code (Plus 4)		
Description of Debt							

Name of Creditor	DATE DEBT INCURRED			MO.	DAY	YEAR	Outstanding Balance of Debt <i>\$</i>
Mailing Address							
City				State	Zip Code (Plus 4)		
Description of Debt							

Name of Creditor	DATE DEBT INCURRED			MO.	DAY	YEAR	Outstanding Balance of Debt <i>\$</i>
Mailing Address							
City				State	Zip Code (Plus 4)		
Description of Debt							

Name of Creditor	DATE DEBT INCURRED			MO.	DAY	YEAR	Outstanding Balance of Debt <i>\$</i>
Mailing Address							
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

\$ 1,800.00