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:	1			Report Filed E				COMMITTEE 2.			LOB	SYIST	3.		
Name of Filing Comm	Name of Filing Committee, Cendidate or Lobbyist:														
Friends of Chuck Wilson Street Address:															
202 Somerset Court															
city: Lan.	sdale					s	tate:	oa_		Zip Cod	446	-	-		
TYPE OF REPORT	STH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMAR	IY .	2.	30 C POS	AY T PRIM	ARY	3.	AMENDA REPORT?		YES		NO	V
(place X to	OTH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTIC		5.	30 C POS	T ELEC	TION	6. V	TERMINA REPORT?		YES	.:	NO	V
the right of report type)	ANNUAL REPORT	7.	YEAR		FILING METHOD () CHECK ONE			PAPE	R	V	DISK	ETTE			
Name of Office Soug	ht by Candidate:							ELEC		District Number	Offic		Party Code		unty ode
Monta	gomery Cou	nt	y Treas	ure		MO.		1	EAR		67	#	REP		16
, , , , , ,							0.3	20)15"		(SEE II	NSTRU	CTIONS	FOR C	ODES)
	······································	мс	DAY YEA	IR T		MQ.	DAY	, vi	EAR	F	OR OF	FICE	USE C	NLY	
Summary of R and Expenditur		10			То	11	23								
	t Forward From La	st Rep	ort			1,65	0.8	6				,			-
B. Total Monetary	Contributions and F	Receipt	ts (From Sched	dule i)	\$ 6	,15	0.00	0			* }		1 45		
C. Total Funds Ava	ailable (Sum of Line	s A a	nd B)			7,8									2 1 1
D. Total Expenditu	res (From Schedule	111)				33									
E. Ending Cash Ba	lance (Subtract Line	D fro	om Line C)		\$ /	,44	7.	81					(
F. Value of In-Kind Contributions Received (From Schedule II) \$ N/A											-				
G. Unpaid Debts ar	nd Obligations (Fron	n Sche	edule IV)		\$ /	,80	0.0	0							
PART I - If this i	s a Committee rep	ort, tr		FFIDAV ere. If				ite ren	ort. e	ndidate s	ign he	e.			
	nat this report, includi												e and b	elief t	rue,
Sworn to and subscr	ribed before me this														
30th day o	Novembla	ENTH	OF DENINGER	1.5	1		S	. د هـ	18	<u></u>	مد				
	R ReliniGR	OTAR	IAL SEAL	ANIA-			- ~			Person S		g Repo	ort		
Marian.	/ / // UNTERFEER 1	Rebu	ick, Notary Publ Iontgomery Cou	lic untv	}		- 4	w ih		D/19 Printed Nam					
My commission exp	My Commis	sion E	xpires Nov. 3, 2	2019		_ 2	15	•			6-	7 5 3	3/		
	MO.	' '6X'\	ASSOCIATION OF N	OTARIES	J		Area C	ode		D	aytime	Teleph	one Nur	nber	
PART IL - If this	is a report of a C	ındida	te's Authorized	d Com	mitte	e, cand	lidate	shall si	gn her	e.			: " ; ; ; ; ;		
PART IL.— 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 subsc	ribed before me this	_	_	_			- \	//		>			_		
30th day of November 20 15] Atlante															
All A Miller Harry of Chodidate Wilson The															
Signature Printed Name 3/2 70/27															
My commission expires 20/1/ 21/3 362-1943 COMMONIM/FAI TH. OF DENNSYI VANYAY YR. Area Code Daytime Telephone Number															
COMMONW	Notarial Seal	ANTA'	1741		-	-		_44 _44	······································		₩7 (11/1 0	. e.eby	one NUI	.1061	
Jill A. Whitpain	. Budney, Notary Public Twp., Mo illemestricou l	ityof S	tate • Bure	au of	Com	nissio	ns. Ele	ctions	and i	egislatio.	n				
My Commi	SSION EXPIREMINANT OF	êiZa_B	uilding • Ha							7) 787-5					
DSEB-502 (7-99)	The second secon														

PAGE 2 OF ________

SCHEDULE I

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate

Friends of Chuck Wilson

From 10-20-15 To 11-23-15

1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER	CONT	RIBL	JTOR	
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)	\$	950.00
All Other Contributions (Part B)	\$	350.00
TOTAL for the Reporting Period	2) \$	1,300,00

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$ 2,000,00
All Other Contributions (Part D)	\$ 1,000.00
TOTAL for the Reporting Period (3)	\$ 3,000.00

4. OTHER RECEIPTS - REFUNDS.	INTEREST EARNED, RETURNED	CHECKS, ETC	: (FROM	PART E
	TOTAL for the Reporting Peri	od (4)	\$ 1,8	00.00

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.)	\$ 6,150.00
---	-------------

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			R	eporting	Period		
Friends of Chuck		From _	0-20-1	5	To //-23-/5		
				DATE			AMOUNT
Full Name of Contributing Committee			MQ.	28	2015	\$	700:00
Citizens for Donnel	''		/ <u>()</u>	<i>∠∂</i> *	YEAR		,
PO BOX 367						\$	
Horsham	Pa	Zip Code (Pius 4) /9044 -	MO.	DAY	YEAR	\$	
Full Name of Contributing Committee	j	1171	MO.	DAY	YEAR	_	250,00
Full Name of Contributing Committee The Committee to Elect Mailing Address	£ 3	cott Zelov	/Ö	28 DAY	2015 YEAR	\$	230,00
220 Rose Lane				97.7		\$	
Haverford	Fa.	Zip Code (Plus 4) /904/ -	MO.	DAY	YEAR	\$	
Full Name of Contributing Committee	<i>j</i> ,	<i>1</i>	MO.	DAY	YEAR	¢	100.00
Friends of Bob Gods	ha//		/ <i>O</i>	28 DAY	20/5 YEAR	\$	100.00
316 Godshall Road				ı pai	1507	\$	
Souderton	State	Zip Code (Plus 4)	MO.	DAY	YEAR	s	
	<u> </u>	18964 -		T. DAY	YEAR	4	· · · · · · · · · · · · · · · · · · ·
Full Name of Contributing Committee Friends of Bob Ma	enso	ch	MO.	O2	2015	\$	250,00
Mailing Address PO Box 94		***************************************	MQ.	DAY	YEAR	\$	
East Greenville	Pa	Zip Code (Plus 4) 804 -	MO.	DAY	YEAR	\$	
Full Name of Contributing Committee			MO.	DAY	YEAR		<i>t</i>
Mailing Address			//	02	2015	\$	250,00
90 Cricket F	q ver	ive	MO.	DAY	YEAR	\$	
ardmore Ardmore	Pa	Zip Code (Plus 4) / 9003 -	MO.	DAY	YEAR	\$	
Full Name of Contributing Committee		M	MO.	DAY	YEAR	\$	
Mailing Address			MO.	DAY	YEAR	┢	
	1.6	T'- A-4-751 N				\$	
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$	
Full Name of Contributing Committee	<u> </u>		MO.	DAY	YEAR	-	
Mailing Address			No.	DAY	YEAR	\$	· · · · · · · · · · · · · · · · · · ·
			MO.	DAI	JEAR	\$	
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$	
Full Name of Contributing Committee			мо.	DAY	YEAR	\$	
Mailing Address			MO.	DAY	YEAR	\$	
City	State	Zip Code (Pius 4)	MO.	DAY	YEAR	\$	
	<u> </u>	I	<u> </u>	<u>.L</u>	.1.		GE TOTAL
Enter Grand Total of Part A on Sche	dule	l, Detailed Summar	y Page,	Section	on 2.	\$	950.00

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	Reporting Period
Friends of Chuck Wilson	From /0-20-/5 To //- 23 -/5

Priends of Cr	, <u>, , , , , , , , , , , , , , , , , , </u>					
				DATE	F	AMOUNT
Full Name of Contributor			MO.	DAY	YEAR	\$ 100.00
Thomas Zarko			/ O MO.	28 DAY	20/5	+ / 00×00
Aeiling Address 2209 Sarahs L	ano.			DAT	YEAR	\$
ZZO / O W W Z	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
Warrington	Pa State	18976 -	MO.	UAT	TEAR	\$
				- BAN	WE 48	
Full Name of Contributor	disand 1			19	· ·	\$ 250.00
Mailing Address	Blo ard 7	- OF Man	MO.	DAY	20/5 YEAR	200.00
120 Belle C.	celo.					\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
Blue Bell	Pa	19422 -				\$
	I	, , , , , , , , , , , , , , , , , , , ,	MO.	DAY	YEAR	
ull Name of Contributor				- VAI	1500	\$
Mailing Address			MO.	DAY	YEAR	
					1 EAR	\$
lity	State	Zip Code (Plus 4)	MÓ.	DAY	YEAR	
		_				\$
uli Name of Contributor			MO.	DAY	YEAR	
an manual or commodities					TEAR .	\$
Mailing Address			MO.	DAY	YEAR	
						\$
Sity	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
	i i	-				\$
uli Name of Contributor			MO.	DAY	YEAR	
						\$
Mailing Address			MQ.	DAY	YEAR	
						\$
ity	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
]			\$
uli Name of Contributor			MO.	DAY	YEAR	_
			1]	\$
Mailing Address			MO.	DAY	YEAR	\$
			1			*
Dity	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
					<u> </u>	\$
ull Name of Contributor		-	MO.	DAY	YEAR	\$
failing Address			0. 9 (January 27)			7
neuring Munices			MO.	DAY	YEAR	s
ity	State	Zip Code (Plus 4)		STORY AND ST	VEAS	
] 5,2,6	— — — — — — — — — — — — — — — — — — —	MO.	DAY	YEAR	\$
uil Name of Contributor				DAY	VE45	T
un came or Contributor			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	
-				DAT.	IEAR	\$
Sity	State	Zip Code (Pius 4)	MQ.	DAY	YEAR	
		- -	******	- F-C-7	,	\$
	<u></u>			L		PAGE TOTAL
				_		
Enter Grand Total of Part B o	n Schedule I,	Detailed Summar	y Page,	Section	n 2.	\$ 350,00
						<u> </u>

DSEB-502 (7-99)

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	Reporting Period					
Friends of Chuck	Ilson		From	0-20-	15 To 11-23-15	
				DATE		AMOUNT
Full Name of Contributing Committee	~ (No theo	MO. 10	29	YEAR 2015	\$ 2,000-00
Mailing Address	·/ <	S MINU LLCC	MO.	DAY	YEAR	
1798 Meadow 614	Z/) ~	Drive				\$
Towamencin Republica Mailing Address 1798 Meadow 6/4 City Lansdale	Pa	19446 -	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	*
			1110.		1	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	*
	<u> </u>	-				\$
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Mailing Address		* · · · · · · · · · · · · · · · · · · ·	MQ.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	3
		-	mo.	. DAT	FAR	\$
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			40	- BAY	- VEAR	\$
•			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)	MQ.	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
Enter Grand Total of Part C on Sched	dule l	, Detailed Summar	y Page,	Section	п 3.	\$ 2,000.00

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			- 1'	Reporting	reriod	
Friends of Cho	ck i	Wilson		From _/	10-20-	15 To 11-23-15
				DATE		AMOUNT
Full Name of Contributor	ì		MO.	DAY	YEAR	.
DB Renta	· · · · · · · · · · · · · · · · · · ·	, , , , , , , , , , , , , , , , , , ,	10	29	2015	\$ 1,000,00
Mailing Address 1800 Pennbroo	k P	arkway 200	MQ.	DAY	YEAR	\$
1800 Pennbroo ity Lansdale	State PA	Zip Code (Plus 4) / 9446	Mo.	DAY	YEAR	\$
Dischell, Bartle Domployer Mailing Address/Principal Place of Business			Occupat	ion A	ttern	ev (
mployer Mailing Address/Principal Place of Business	7	<u> </u>				
Same as Above						
III Name of Contributor			MO.	DAY	YEAR	\$
ailing Address			MQ.	DAY	YEAR	
-						\$
İty	State	Zip Code (Plus 4)	MO.	DAY	YEAR	VII VIII
] [-				S
nployer Name			Occupat	ion		
mplayer Mailing Address/Principal Place of Business						
III Name of Contributor			MO.	DAY	YEAR	
					1	\$
ailing Address			MO.	DAY	YEAR	e
						\$
ty	State	Zip Code (Plus 4)	MO.	DAY	YEAR	s
		-				3
nployer Name			Occupat	ion		
nployer Mailing Address/Principal Place of Business						
III Name of Contributor			MO.	DAY	YEAR	\$
ailing Address			<u> </u>			7
array Address			MO.	DAY	YEAR	\$
ty	State	Zip Code (Plus 4)		mass	1	
•	""		MO.	DAY	YEAR	\$
ployer Name	⊥		Occupat	ion	1	
decartae remina			Occupat			
nployer Mailing Address/Principal Place of Business			_1			
II Name of Contributor			240	DAY	1 VEAB	
, , , , , , , , , , , , , , , , , , ,			MU.		FEAH	\$
eiling Address	-		MQ.	DAY	YEAR	
						\$
ty	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
		-				\$
nployer Name	- 		Occupat	ion	<u> </u>	
mployer Mailing Address/Principal Place of Business						
						PAGE TOTAL
nter Grand Total of Part D on Sche	dule I,	Detailed Summar	y Page,	, Sectio	n 3.	\$ 1,000,00
						# 1/000;00

DSEB-502 (7-99)

Reporting Period

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 Chuck Wilson	From <u>/0-20</u>	0-15 To 11-23-15
Full Name H. Charles Wilson, 111		
Mailing Address 803 Stony Creek Court		
Mailing Address 803 Stony Creek Court City Lansdale Pa 19446-	MO. DAY YEAR	
Receipt Description Loan to Campaign		
Full Name	···	
Mailing Address		
	MO Francisco	Amount
City State Zip Code (Plus 4)	MO. DAY YEAR	\$
Receipt Description		
Full Name		
Mailing Address		
City State Zip Code (Plus 4)	MO. DAY YEAR	Amount \$
Receipt Description	I	
Full Name		
Mailing Address		
City State Zip Code (Plus 4)	MO I RAVIEWA	Amount
State Zip Code (Flus 4)	MQ. DAY YEAR	\$
Receipt Description		
Full Name		
Mailing Address		
City State Zip Code (Plus 4)	MO. DAY YEAR	
Receipt Description		\$
needly. Description		
Full Name		
Mailing Address	- Marie and American Company	
City State Zip Code (Plus 4)	MO: ZOAY Z	Amount \$
Receipt Description	1	<u>Li</u>
	·	PAGE TOTAL
Enter Grand Total of Part E on Schedule I, Detailed Summary	Page, Section 4.	\$ 1,800.00

Name of Filing Committee or Candidate

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 Chuck Wilson	From 10-	20-15	To //- 23 -/5
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF	\$50.00 OR 1	ESS P	ER CONTRIBUTOR
TOTAL for the Reporting Period	od (1)	\$	NIA
2 IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$	250.00 (FRON	A PART	
TOTAL for the Reporting Period	od (2)	\$	NA
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250,00 (FR	OM PART C	n	
TOTAL for the Reporting Period	<u> </u>	\$	N/A
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.)		\$	N/A

SCHEDULE II PART F

IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Friends of Chuck	Wi	150N	1	From _		15 To 11-23-15
				DATE		AMOUNT
Full Name of Contributor			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MQ.	DAY	YEAR	\$
Description of Contribution:		1	Ь	1		· 180° · 1
Full Name of Contributor			MO.	DAY	YEAR	
						\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MQ.	DAY	YEAR	\$
Description of Contribution:		<u> </u>	<u> </u>		<u> </u>	
Full Name of Contributor			MO.	DAY	YEAR	\$
Mailing Address	• • • • • • • • • • • • • • • • • • • •		MQ.	DAY	YEAR	
		·				\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Description of Contribution:	W			•		
Full Name of Contributor			MO.	DAY	YEAR	<u> </u>
Section Address		<u> </u>				\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4) —	MO.	DAY	PASY	\$
Description of Contribution:						
Full Name of Contributor			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	
						\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Description of Contribution:						
Full Name of Contributor			MO.	DAY	YEAR	_
	·					\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4) —	Mo.	DAY	YEAR	\$
Description of Contribution:	<u> </u>		<u>. </u>	<u> </u>	l	
						PAGE TOTAL
Enter Grand Total of Part F on Sched Summary Page, Section 2.	ule II	l, In-Kind Contribut	ions D	etailed		\$ N/A
Juninary rage, Jection 2.						- "/7

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate			F	Reporting Period				
Friends of Chuck Wilson				From 10-20-15 To //-2				
				DATE		AMOUNT		
Full Name of Contributor			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					
Full Name of Contributor			MO.	DAY	YEAR	\$		
Mailing Address	MO.	DAY	YEAR	\$				
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$		
Employer of Contributor			Occupat	ion	1			
Employer Mailing Address/Principal Place of Business	······································	<u></u>	Descript	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	\$		
Employer of Contributor			Occupat	ion	•			
Employer Mailing Address/Principal Place of Business			Descript	ion of Con	tribution			
Full Name of Contributor			MO.	БАУ	YEAR	\$		
Mailing Address			MO.	DAY	YEAR	\$		
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$		
Employer of Contributor			Occupat	ion				
Employer Mailing Address/Principal Place of Business			Descript	ion of Con	tribution			
Full Name of Contributor			MQ.	DAY	YEAR	\$		
Mailing Address	MO.	DAY	YEAR	\$				
City	State	Zip Code (Plus 4)	мо	DAY	YEAR	\$		
Employer of Contributor			Occupat	ion		<u> </u>		
Employer Mailing Address/Principal Place of Business			Description of Contribution					
						PAGE TOTAL		
Enter Grand Total of Part G on Sched	dule ii	i, in-Kind Contribu	itions D	etailed		\$ N/A		

SCHEDULE III

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			R	eporting		
Friends of Chuck C	צאונע	مه		From /	0-20-	-15 To 11-23-15
RCR, Inc. Mailing Address ROW, Inc.			MO.	25°	YEAR 2015	Amount \$ 3,956.00
33 Dellon nin Fil	Ne.			on of Exp	enditure	
Phoenixville	Pa	Zip Code (Plus 4) /9460				
To Whom Paid	•		MO.	DAY	2015	Amount \$ 2,397.05
Mailing Address 746 E. Winchester Street	5,50	vite 140	Descripti	on of Exp	enditure	<u>'</u>
Silver Bullet, LLC Mailing Address 746 F. Winchester Street City Salt Lake City	State	Zip Code (Plus 4) 84/07 -				
To Whom Paid			MO.	DAY	YEAR	Amount \$
Mailing Address		· · · · · · · · · · · · · · · · · · ·	Descripti	on of Exp	enditure	
City	State	Zip Code (Plus 4)				
To Whom Paid	<u> </u>		MO.	DAY	YEAR	Amount \$
Mailing Address			Descripti	on of Exp	enditure enditure	
City	State	Zip Code (Plus 4)			· · · · · · · · · · · · · · · · · · ·	
To Whom Paid	1	e e	MO.	DAY	YEAR	Amount S
Mailing Address			Descripti	on of Exp	enditure	
City	State	Zip Code (Plus 4)		-		
To Whom Paid			MO.	DAY	YEAR	Amount \$
Mailing Address	······································		Descripti	on of Exp	enditure	
City	State	Zip Code (Plus 4)	<u> </u>			
To Whom Paid	<u> </u>		MO.	DAY	YEAR	Amount
Mailing Address			Descripti	on of Exp	enditure	<u> </u>
Спу	State	Zip Code (Plus 4)				
To Whom Paid	<u> </u>		MO	DAY	YE GR	Amount
Mailing Address			Descript	on of Exp	enditura	<u> </u>
City	State	Zip Code (Plus 4)				
		1	<u> </u>			PAGE TOTAL
Enter Grand Total of Expenditures on Pa	ge 1.	Report Cover P	age, Iti	em D.		\$ 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.

lame of Filing Committee or Candidate			Reporting Period				
Friends of Chuck l	Wilson				15 To 11-23-15		
H. Charles Wilson III					Outstanding Balance of Debt \$ /, 8 00, 00		
Name of Creditor H. Charles Wilson III Mailing Address 803 Stony Creek Ct City	DATE DEBT INCURRED	MO. 10	28	2015			
Lansdale		State	Zip Code 19446	Plus 4)			
Description of Debt Campaign Loa	w						
Name of Creditor					Outstanding Balance of Debt		
Mailing Address	DATE DEBT INCURRED	MO	DAY	YEAR	and the second s		
City	1	State	Zip Code	(Pius 4)			
Description of Dabt							
Name of Creditor				-	Outstanding Balance of Debt		
Mailing Address	DATE DEBT	Mo.	DAY	YEAR			
City	INCURRED	State	Zip Code	(Plus 4)			
Description of Debt							
Name of Creditor					Outstanding Balance of Debt		
Mailing Address	DATE DEBT	Mo.	DAY	YEAR			
City	INCURRED	State	Zip Code	(Plus 4)			
Description of Debt					The state of the s		
Name of Creditor					Outstanding Balance of Debt		
Address Address	Toare	L. Agger			\$		
Mailing Address City	DATE DEBT INCURRED	MO.	DAY	YEAR			
		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					Professional Company of the State of the Sta		
Enter Grand Total of Unpaid Debts on Pa	age 1, Report Cover	r Page, I	tem G.	İ	PAGE TOTAL \$ /, 800.00		