

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 <sup>1.</sup>	COMMITTEE <sup>2.</sup> <input checked="" type="checkbox"/>	LOBBYIST <sup>3.</sup>
Name of Filing Committee, Candidate or Lobbyist: <i>Friends of Chuck Wilson</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)	6TH TUESDAY PRE-PRIMARY <sup>1.</sup>	2ND FRIDAY PRE-PRIMARY <sup>2.</sup> <input checked="" type="checkbox"/>	30 DAY POST PRIMARY <sup>3.</sup>	AMENDMENT REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION <sup>4.</sup>	2ND FRIDAY PRE-ELECTION <sup>5.</sup>	30 DAY POST ELECTION <sup>6.</sup>	TERMINATION REPORT? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>
	ANNUAL REPORT <sup>7.</sup>	YEAR <input type="checkbox"/>	FILING METHOD ( ) CHECK ONE <input type="checkbox"/>	PAPER <input checked="" type="checkbox"/> DISKETTE <input type="checkbox"/>

Name of Office Sought by Candidate: <i>Montgomery County Treasurer</i>	DATE OF ELECTION	District Number	Office Code	Party Code	County Code
	MO. DAY YEAR <i>04 26 2016</i>	-	0TH	REP	46
			(SEE INSTRUCTIONS FOR CODES)		

Summary of Receipts and Expenditures from:	MO. DAY YEAR <i>01 01 2016</i>	To	MO. DAY YEAR <i>04 11 2016</i>	FOR OFFICE USE ONLY  2016 APR 14 PM 2:35 DEFENSE VOTER SERVICES
	A. Amount Brought Forward From Last Report	\$	<i>1,447.81</i>	
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	<i>- 0 -</i>		
C. Total Funds Available (Sum of Lines A and B)	\$	<i>1,447.81</i>		
D. Total Expenditures (From Schedule III)	\$	<i>1,447.81</i>		
E. Ending Cash Balance (Subtract Line D from Line C)	\$	<i>- 0 -</i>		
F. Value of In-Kind Contributions Received (From Schedule II)	\$	<i>352.19</i>		
G. Unpaid Debts and Obligations (From Schedule IV)	\$	<i>- 0 -</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.

Subscribed before me this 16 day of April 2016

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

Notary Public: *James Brian Wynn*  
 Signature: \_\_\_\_\_  
 My Commission expires 2 25 18  
 MO. DAY YR.

**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, N.E. 320) as amended.

Subscribed before me this 13 day of April 2016

Signature of Candidate: *H. Charles Wilson, III*  
 Printed Name: H. Charles Wilson, III  
 Area Code: 215 Daytime Telephone Number: 362-7943

Notary Public: *James Brian Wynn*  
 Signature: \_\_\_\_\_  
 My Commission expires 2 5 18  
 MO. DAY YR.

OSBE 502 (7-98)

# CONTRIBUTIONS AND RECEIPTS

## Detailed Summary Page

Name of Filing Committee or Candidate <i>Friends of Chuck Wilson</i>	Reporting Period From <u>1-1-16</u> To <u>4-11-16</u>
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period	(1) \$ - 0 -

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)	
Contributions Received from Political Committees (Part A)	\$ - 0 -
All Other Contributions (Part B)	\$ - 0 -
TOTAL for the Reporting Period	(2) \$ - 0 -

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$ - 0 -
All Other Contributions (Part D)	\$ - 0 -
TOTAL for the Reporting Period	(3) \$ - 0 -

4. OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED CHECKS, ETC. (FROM PART E)	
TOTAL for the Reporting Period	(4) \$ - 0 -

<b>TOTAL MONETARY CONTRIBUTIONS AND RECEIPTS DURING THIS REPORTING PERIOD</b> <i>(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>	\$ - 0 -
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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>1-1-16</i> To <i>4-11-16</i>
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				DATE			AMOUNT
				MO.	DAY	YEAR	
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
		-					
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
		-					
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
		-					
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
		-					
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
		-					
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
		-					
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
		-					
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
		-					
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
		-					

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

PAGE TOTAL \$ <i>— 0 —</i>
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# 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 Chuck Wilson</i>	Reporting Period From <i>1-1-16</i> To <i>4-11-16</i>
---	--

Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State				
Zip Code (Plus 4)				

PAGE TOTAL
\$ - 0 -

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

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>1-1-16</i> To <i>4-11-16</i>
---	--

				DATE			AMOUNT
				MO.	DAY	YEAR	
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
		-					
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
		-					
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
		-					
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
		-					
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
		-					
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
		-					
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
		-					
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
		-					
Full Name of Contributing Committee							\$
Mailing Address							\$
City	State	Zip Code (Plus 4)					\$
		-					

PAGE TOTAL \$ <u>— 0 —</u>
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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>1-1-16</i> To <i>4-11-16</i>
---	--

				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				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							
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 \$ - 0 -
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# 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>1-1-16</i> To <i>4-11-16</i>
---	--

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 \$ - 0 -
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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 Chuck Wilson</i>	Reporting Period From <i>1-1-16</i> To <i>4-11-16</i>
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<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>	
TOTAL for the Reporting Period	(1) \$ - 0 -

<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>	
TOTAL for the Reporting Period	(2) \$ - 0 -

<b>3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)</b>	
TOTAL for the Reporting Period	(3) \$ 352.19

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.)	\$ 352.19
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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 <u>1-1-16</u> To <u>4-11-16</u>
---	--

				DATE			AMOUNT
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:							
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:							
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:							

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

PAGE TOTAL \$ - 0 -
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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 <u>1-1-16</u> To <u>4-11-16</u>
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				DATE	AMOUNT
Full Name of Contributor	MO.	DAY	YEAR		
<i>H. Charles Wilson, III</i>	<i>01</i>	<i>16</i>	<i>2016</i>	\$	<i>352.19</i>
Mailing Address <i>803 Stony Creek Ct.</i>	MO.	DAY	YEAR	\$	
City <i>Lansdale</i>	MO.	DAY	YEAR	\$	
State <i>Pa</i>	Zip Code (Plus 4) <i>19446 -</i>			\$	
Employer of Contributor <i>Self Employed</i>	Occupation <i>Certified Public Accountant</i>				
Employer Mailing Address/Principal Place of Business <i>Same as Above</i>	Description of Contribution <i>Campaign Loan Forgiveness</i>				
Full Name of Contributor	MO.	DAY	YEAR	\$	
Mailing Address	MO.	DAY	YEAR	\$	
City	MO.	DAY	YEAR	\$	
State	Zip Code (Plus 4)			\$	
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	MO.	DAY	YEAR	\$	
State	Zip Code (Plus 4)			\$	
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	MO.	DAY	YEAR	\$	
State	Zip Code (Plus 4)			\$	
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	MO.	DAY	YEAR	\$	
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 <b>\$ <i>352.19</i></b>
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**SCHEDULE III  
STATEMENT OF EXPENDITURES**

Name of Filing Committee or Candidate <i>Friends of Chuck Wilson</i>	Reporting Period From <u>1-1-16</u> To <u>4-11-16</u>
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				Amount
To Whom Paid <i>Chuck Wilson (H. Charles Wilson, III)</i>	MO. <i>01</i>	DAY <i>16</i>	YEAR <i>2016</i>	<b>\$ 1,447.81</b>
Mailing Address <i>803 Stony Creek Court</i>	Description of Expenditure <i>Campaign Loan</i>			
City <i>Lansdale</i>	State <i>Pa</i>	Zip Code (Plus 4) <i>19446 -</i>		
To Whom Paid	MO.	DAY	YEAR	<b>\$</b>
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		
To Whom Paid	MO.	DAY	YEAR	<b>\$</b>
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		
To Whom Paid	MO.	DAY	YEAR	<b>\$</b>
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		
To Whom Paid	MO.	DAY	YEAR	<b>\$</b>
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		
To Whom Paid	MO.	DAY	YEAR	<b>\$</b>
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		
To Whom Paid	MO.	DAY	YEAR	<b>\$</b>
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		
To Whom Paid	MO.	DAY	YEAR	<b>\$</b>
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		

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

**PAGE TOTAL**  
**\$ 1,447.81**

## 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 <u>1-1-16</u> To <u>4-11-16</u>
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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						

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
\$ — 0 —