

COMMONWEALTH OF PENNSYLVANIA
CAMPAIGN FINANCE STATEMENT

File this in lieu of a full report *only* if aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period.

FILER IDENTIFICATION NUMBER		REPORT FILED ON BEHALF OF		CANDIDATE	<input checked="" type="checkbox"/>	COMMITTEE	<input type="checkbox"/>	LOBBYIST	<input type="checkbox"/>	
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST FRIENDS OF BOBBY WILSON										
STREET ADDRESS 1123 HASLAGE AVE										
CITY PITTSBURGH				STATE PA		ZIP CODE 15212 —				
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE			DISTRICT NO.	PARTY		DATE OF ELECTION		
1. 5TH TUESDAY PRE-PRIMARY		PITTSBURGH CITY COUNCIL			1	Dem		MO.	DAY	YEAR
2. 2ND FRIDAY PRE-PRIMARY <input checked="" type="checkbox"/>								5	21	19
3. 30 DAY POST-PRIMARY								FOR OFFICE USE ONLY		
4. 5TH TUESDAY PRE-ELECTION										
5. 2ND FRIDAY PRE-ELECTION										
6. 30 DAY POST-ELECTION										
7. ANNUAL REPORT										
DATES OF REPORTING PERIOD		NO.	DAY	YEAR	TO	NO.	DAY	YEAR		
		1	1	19		2	28	19		
CASH BALANCE AT END OF REPORTING PERIOD:				\$	0					
TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD:				\$	0					
AMENDMENT REPORT?		YES		NO		X				
TERMINATION REPORT?		YES		NO		X				

AFFIDAVIT SECTION

PART I -

If statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.
 If statement is filed on behalf of a Candidate, the Candidate must sign here.
 If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.

I SWEAR (OR AFFIRM) THAT THE AGGREGATE RECEIPTS OR DISBURSEMENTS OR LIABILITIES INCURRED DURING THE REPORTING PERIOD INDICATED ABOVE DID NOT EXCEED TWO HUNDRED AND FIFTY DOLLARS (\$250.00) AND THIS REPORT IS TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRULY CORRECT AND COMPLETE.

SWORN TO AND SUBSCRIBED BEFORE ME THIS
 28 DAY OF February 20 19
 Lisa J. Mekovsky
 SIGNATURE

MY COMMISSION EXPIRES 20 20
 NO. DAY YR.

NOTARIAL SEAL
 Lisa J. Mekovsky, Notary Public
 City of Pittsburgh, Allegheny County
 My Commission Expires Nov. 20 2012

SIGNATURE OF PERSON SUBMITTING REPORT
 ROBERT C. WILSON, III
 PRINTED NAME

909-9307
 AREA CODE DAYTIME TELEPHONE NUMBER

PART II -

If statement is filed on behalf of a Candidate's Authorized Committee, Candidate must 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 8, 1937 (P.L. 1333, No. 320) AS AMENDED.

SWORN TO AND SUBSCRIBED BEFORE ME THIS
 _____ DAY OF _____ 20____

 SIGNATURE

MY COMMISSION EXPIRES _____
 NO. DAY YR.

 SIGNATURE OF CANDIDATE

 PRINTED NAME

 AREA CODE DAYTIME TELEPHONE NUMBER