

Commonwealth of Pennsylvania - Campaign Finance Report

(Note: This report must be clear and legible. It should be typed)

Filer Identification Number	Report Filed By (Mark X)	Candidate	<input type="checkbox"/>	Committee	<input checked="" 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 (Place x under report type)

1- 6 th Tuesday Pre-Primary	2- 2 nd Friday Pre-Primary	3- 30 Day Post Primary	4- 6 th Tuesday Pre-Election	5- 2 nd Friday Pre-Election	6- 30 Day Post Election	7- Annual	Special 2 nd Friday Pre-Election	Special 30 Day Post-Election
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date Of Election (MM/DD/YYYY)		5/21/2019	Year	2019	Amendment Report	<input type="checkbox"/>	Termination Report	<input type="checkbox"/>

Summary of Receipts and Expenditures	From Date	To Date	For Office Use Only
	3/1/2019	3/31/2019	
A. Amount Brought Forward From Last Report	\$	6,942.56	
B. Total Monetary Contributions and Receipts (From Schedule I)	\$	4,745	
C. Total Funds Available (Sum of Lines A and B)	\$	11,687.56	
D. Total Expenditures (From Schedule III)	\$	8,688.59	
E. Ending Cash Balance (Subtract Line D from Line C)	\$	2,998.97	
F. Value of In-Kind Contributions Received (From Schedule II)	\$	0	
G. Unpaid Debts and Obligations (From Schedule IV)	\$	0	

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 of contributions, is to the best of my knowledge and belief true, correct and complete.

Sworn to and subscribed before me this 1 day of April 2019

Lisa J. Mekovsky
Signature

My Commission expires 11 20 20
MO. DAY YR.

Steven Oberst
Signature of Person Submitting report
STEVEN OBERST
Printed Name

412 758-6512
Area Code 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 the 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 1 day of April 2019

Lisa J. Mekovsky
Signature

My Commission expires 11 20 20
MO. DAY YR.

Robert C. Wilson III
Signature of Candidate
ROBERT C. WILSON, III
Printed Name

412 999-9307
Area Code Daytime Telephone Number

Notary Public
 Commonwealth of Pennsylvania - Notary Seal
 Lisa J. Mekovsky, Notary Public
 Allegheny County
 Commission expires November 20, 2020
 Commission number 1273148
 Member, Pennsylvania Association of Notaries

SCHEDULE I
Contributions and Receipts

Detailed Summary Page

Filer Identification Number	FRIENDS OF BOBBY WILSON		
1. Unitemized Contributions and Receipts-\$50.00 or Less per Contributor			
Total for the reporting period	(1)	\$	75
2. Contributions of \$50.01 to \$250.00 (From Part A and Part B)			
Contributions Received from Political Committees (Part A)		\$	0
All Other Contributions (Part B)		\$	550
Total for the reporting period	(2)	\$	550
3. Contributions Over \$250.00 (From Part C and Part D)			
Contributions Received from Political Committees (Part C)		\$	3,500
All Other Contributions (Part D)		\$	620
Total for the reporting period	(3)	\$	4,120
4. Other Receipts-Refunds, Interest Earned, Returned Checks, ETC. (From Part E)			
Total for the reporting period	(4)	\$	0
Total Monetary Contributions and Receipts during this reporting period <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>		\$	4,745

PART B

All Other Contributions

\$50.01 TO \$250

Use this Part to itemize all other contributions with an aggregate value from \$50.01 TO \$250 in the reporting period.

(Exclude contributions from political committees reported in Part A.)

Filer Identification Number:	FRIENDS OF BOBBY WILSON
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Full Name of Contributor					Date [MM/DD/YYYY]	\$	250
H. JACOB HANCHAR					3/21/2019		
House #	Street Address				Date [MM/DD/YYYY]	\$	
	22 WEDGEWOOD LANE						
City	PITTSBURGH	State	PA	Zip Code	15215	Date [MM/DD/YYYY]	\$
Full Name of Contributor					Date [MM/DD/YYYY]	\$	100
ARTHUR E GORNICK					3/20/2019		
House #	Street Address				Date [MM/DD/YYYY]	\$	
	16 FORNOF LANE						
City	PITTSBURGH	State	PA	Zip Code	15212	Date [MM/DD/YYYY]	\$
Full Name of Contributor					Date [MM/DD/YYYY]	\$	100
DAVID R GRINNELL					3/12/2019		
House #	Street Address				Date [MM/DD/YYYY]	\$	
	2924 MARSHALL ROAD						
City	PITTSBURGH	State	PA	Zip Code	15214	Date [MM/DD/YYYY]	\$
Full Name of Contributor					Date [MM/DD/YYYY]	\$	100
MICHAEL R LOGAN					3/27/2019		
House #	Street Address				Date [MM/DD/YYYY]	\$	
	1123 W NORTHSHORE AVE						
City	CHICAGO	State	IL	Zip Code	60626	Date [MM/DD/YYYY]	\$
Full Name of Contributor					Date [MM/DD/YYYY]	\$	
House #	Street Address				Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$
Full Name of Contributor					Date [MM/DD/YYYY]	\$	
House #	Street Address				Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$

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.

Filer Identification Number:	FRIENDS OF BOBBY WILSON
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Full Name of Contributing Committee		FRATERNAL ASSOCIATION OF PROFESSIONAL PARAMEDICS PAC		Date [MM/DD/YYYY]	\$	1,000
				3/1/2019		
House #	Street Address	PO BOX 8454		Date [MM/DD/YYYY]	\$	
City	PITTSBURGH	State	PA	Zip Code	15220	Date [MM/DD/YYYY]
						\$
Full Name of Contributing Committee		PEOPLE FOR PEDUTO		Date [MM/DD/YYYY]	\$	2,500
				3/6/2019		
House #	Street Address	427 HASTINGS STREET		Date [MM/DD/YYYY]	\$	
City	PITTSBURGH	State	PA	Zip Code	15206	Date [MM/DD/YYYY]
						\$
Full Name of Contributing Committee				Date [MM/DD/YYYY]	\$	
House #	Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]
						\$
Full Name of Contributing Committee				Date [MM/DD/YYYY]	\$	
House #	Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]
						\$
Full Name of Contributing Committee				Date [MM/DD/YYYY]	\$	
House #	Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]
						\$
Full Name of Contributing Committee				Date [MM/DD/YYYY]	\$	
House #	Street Address			Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]
						\$

PART D
All Other Contributions

Over \$250.00

Use this Part to itemize all other contributions with an aggregate value over \$250.00 in the reporting period.
 (Exclude contributions from political committees reported in Part C)

Filer Identification Number:	FRIENDS OF BOBBY WILSON
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Full Name of Contributor				ROBERT WILSON, JR.		Date [MM/DD/YYYY]	\$	620
						3/6/2019		
House #		Street Address	1123 HASLAGE AVE			Date [MM/DD/YYYY]	\$	
City	PITTSBURGH	State	PA	Zip Code	15212	Date [MM/DD/YYYY]	\$	
Employer Name				PITTSBURGH PARKING AUTHORITY		Occupation	ASSISTANT PROCUREMENT MANAGER	
Employer Mailing Address / Principal Place of Business				232 BOULEVARD OF THE ALLIES, PITTSBURGH PA 15222				

Full Name of Contributor						Date [MM/DD/YYYY]	\$	
House #		Street Address				Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$	
Employer Name						Occupation		
Employer Mailing Address / Principal Place of Business								

Full Name of Contributor						Date [MM/DD/YYYY]	\$	
House #		Street Address				Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$	
Employer Name						Occupation		
Employer Mailing Address / Principal Place of Business								

Full Name of Contributor						Date [MM/DD/YYYY]	\$	
House #		Street Address				Date [MM/DD/YYYY]	\$	
City		State		Zip Code		Date [MM/DD/YYYY]	\$	
Employer Name						Occupation		
Employer Mailing Address / Principal Place of Business								

SCHEDULE II

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

Filer Identification Number:	FRIENDS OF BOBBY WILSON	
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1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.00 OR LESS PER CONTRIBUTOR		
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TOTAL for the reporting period	(1)	\$	0
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2. IN-KIND CONTRIBUTIONS RECEIVED-VALUE OF \$50.01 TO \$250.00 (FROM PART F)		
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TOTAL for the reporting period	(2)	\$	0
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3. IN-KIND CONTRIBUTION RECEIVED-VALUE OVER \$250.00 (FROM PART G)		
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TOTAL for the reporting period	(3)	\$	0
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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)		\$	0
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SCHEDULE III
Statement of Expenditures

Filer Identification Number:	FRIENDS OF BOBBY WILSON
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To Whom Paid		ActBlue	Date [MM/DD/YYYY]		\$	2.01	
			3/2/2019				
House #	Street Address	366 SUMMER STREET				Description of Expenditure	
City	SOMERVILLE	State	MA	Zip Code	02144	FEE	
To Whom Paid		VANTIV	Date [MM/DD/YYYY]		\$	6.89	
			3/11/2019				
House #	Street Address	900 CHELMSFORD ST				Description of Expenditure	
City	LOWELL	State	MA	Zip Code	01852	PROCESSING FEE	
To Whom Paid		HARLAND CLARKE	Date [MM/DD/YYYY]		\$	19.99	
			3/14/2019				
House #	Street Address	15955 LA CANTERA PARKWAY				Description of Expenditure	
City	SAN ANTONIO	State	TX	Zip Code	78256	CHECK PRINTING	
To Whom Paid		SCHUYLER SHEAFFER	Date [MM/DD/YYYY]		\$	875	
			3/23/2019				
House #	Street Address	1121 KING AVE				Description of Expenditure	
City	PITTSBURGH	State	PA	Zip Code	15206	STAFFING	
To Whom Paid		SCHUYLER SHEAFFER	Date [MM/DD/YYYY]		\$	875	
			3/13/2019				
House #	Street Address	1121 KING AVE				Description of Expenditure	
City	PITTSBURGH	State	PA	Zip Code	15206	STAFFING	
To Whom Paid		YOUNG BROTHERS BAR	Date [MM/DD/YYYY]		\$	25	
			3/11/2019				
House #	Street Address	1441 WOODS RUN AVE				Description of Expenditure	
City	PITTSBURGH	State	PA	Zip Code	15212	EVENT COST	
To Whom Paid		THE NORTHSIDE CHRONICLE	Date [MM/DD/YYYY]		\$	616	
			3/2/2019				
House #	Street Address	922 MIDDLE ST #A				Description of Expenditure	
City	PITTSBURGH	State	PA	Zip Code	15212	AD	
To Whom Paid		AMPERSAND CONSULTING	Date [MM/DD/YYYY]		\$	1,435.99	
			3/28/2019				
House #	Street Address	PO BOX 40384				Description of Expenditure	
City	PITTSBURGH	State	PA	Zip Code	15021	PRINTED MATERIALS	

SCHEDULE III
Statement of Expenditures

Filer Identification Number:	FRIENDS OF BOBBY WILSON
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To Whom Paid	AMPERSAND CONSULTING	Date [MM/DD/YYYY]	\$	
		3/29/2019		3,093.5
House #	Street Address	Description of Expenditure		
	PO BOX 40384			
City	State	Zip Code		
PITTSBURGH	PA	15201	PRINTING MATERIALS	
To Whom Paid	1 & 1 INTERNET INC	Date [MM/DD/YYYY]	\$	
		3/28/2019		29.98
House #	Street Address	Description of Expenditure		
	701 LEE ROAD STE 300			
City	State	Zip Code		
WAYNE	PA	19087	DOMAIN	
To Whom Paid	USPS	Date [MM/DD/YYYY]	\$	
		3/29/2019		516.19
House #	Street Address	Description of Expenditure		
	395 FEDERAL STREET			
City	State	Zip Code		
PITTSBURGH	PA	15212	POSTAGE	
To Whom Paid	ALLEGHENY ELKS LODGE #339	Date [MM/DD/YYYY]	\$	
		3/28/2019		736.5
House #	Street Address	Description of Expenditure		
	400 CEDAR AVE			
City	State	Zip Code		
PITTSBURGH	PA	15212	EVENT	
To Whom Paid	GIANT EAGLE	Date [MM/DD/YYYY]	\$	
		3/28/2019		456.54
House #	Street Address	Description of Expenditure		
	320 CEDAR AVE			
City	State	Zip Code		
PITTSBURGH	PA	15212	EVENT	
To Whom Paid		Date [MM/DD/YYYY]	\$	
House #	Street Address	Description of Expenditure		
City	State	Zip Code		
To Whom Paid		Date [MM/DD/YYYY]	\$	
House #	Street Address	Description of Expenditure		
City	State	Zip Code		
To Whom Paid		Date [MM/DD/YYYY]	\$	
House #	Street Address	Description of Expenditure		
City	State	Zip Code		