

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	1.	COMMITTEE	2.	LOBBYIST	3.													
NAME OF FILING COMMITTEE, CANDIDATE OR LOBBYIST <i>William E. Donnelly</i>																					
STREET ADDRESS <i>PO Box 367</i>																					
CITY <i>Horsham</i>			STATE <i>PA</i>		ZIP CODE <i>19044</i>																
TYPE OF REPORT (CHECK ONE)		NAME OF OFFICE SOUGHT BY CANDIDATE			DISTRICT NO.	PARTY		DATE OF ELECTION													
6TH TUESDAY PRE-PRIMARY 1. 2ND FRIDAY PRE-PRIMARY 2. 30 DAY POST-PRIMARY 3. 6TH TUESDAY PRE-ELECTION 4. 2ND FRIDAY PRE-ELECTION 5. 30 DAY POST-ELECTION 6. ANNUAL REPORT 7.					<i>46</i>	<i>REP</i>		MO. DAY YEAR _____													
		DATES OF REPORTING PERIOD			<table border="1"> <tr> <th>MO.</th> <th>DAY</th> <th>YEAR</th> </tr> <tr> <td><i>10</i></td> <td><i>23</i></td> <td><i>12</i></td> </tr> </table> TO <table border="1"> <tr> <th>MO.</th> <th>DAY</th> <th>YEAR</th> </tr> <tr> <td><i>11</i></td> <td><i>26</i></td> <td><i>12</i></td> </tr> </table>		MO.	DAY	YEAR	<i>10</i>	<i>23</i>	<i>12</i>	MO.	DAY	YEAR	<i>11</i>	<i>26</i>	<i>12</i>	FOR OFFICE USE ONLY		
MO.	DAY	YEAR																			
<i>10</i>	<i>23</i>	<i>12</i>																			
MO.	DAY	YEAR																			
<i>11</i>	<i>26</i>	<i>12</i>																			
		CASH BALANCE AT END OF REPORTING PERIOD: \$ <u><i>0</i></u> TOTAL AMOUNT OF FILER'S OUTSTANDING DEBTS OR LIABILITIES AT THE END OF REPORTING PERIOD: \$ <u><i>0</i></u>			OFFICE OF VOTER SERVICES 2012 DEC -6 P 3:47 RECEIVED																
		AMENDMENT REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> TERMINATION REPORT? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>																			

**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, TRUE, CORRECT AND COMPLETE.

SWORN TO AND SUBSCRIBED BEFORE ME THIS  
 4<sup>th</sup> DAY OF NOVEMBER 2012  
 Michelle I. Sepulveda, Notary Public  
 1000 North 2nd, Montgomery County  
 My Commission Expires Sept. 30, 2015  
 MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

*William E. Donnelly*  
 SIGNATURE OF PERSON SUBMITTING REPORT  
 William E. Donnelly  
 PRINTED NAME  
 215 AREA CODE 343.4806 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 3, 1937 (P.L. 1333, No. 320) AS AMENDED.

SWORN TO AND SUBSCRIBED BEFORE ME THIS  
 \_\_\_\_\_ DAY OF \_\_\_\_\_ 20\_\_\_\_  
 \_\_\_\_\_  
 SIGNATURE

\_\_\_\_\_  
 SIGNATURE OF CANDIDATE  
 \_\_\_\_\_  
 PRINTED NAME

MY COMMISSION EXPIRES \_\_\_\_\_  
 MO. DAY YR.

\_\_\_\_\_  
 AREA CODE \_\_\_\_\_  
 \_\_\_\_\_  
 DAYTIME TELEPHONE NUMBER