

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: ▶		Report Filed By: ▶		CANDIDATE ^{1.}		COMMITTEE ^{2.} <input checked="" type="checkbox"/>		LOBBYIST ^{3.}		
Name of Filing Committee, Candidate or Lobbyist: Citizens for Donnelly										
Street Address: PO Box 367										
City: Horsham					State: PA		Zip Code: 19044 -			
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST PRIMARY	3.	AMENDMENT REPORT?	YES	NO <input checked="" type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4. <input checked="" type="checkbox"/>	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST ELECTION	6.	TERMINATION REPORT?	YES	NO <input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	YEAR 2014		FILING METHOD () CHECK ONE ▶		PAPER	<input checked="" type="checkbox"/>	DISKETTE	
Name of Office Sought by Candidate:					DATE OF ELECTION		District Number	Office Code	Party Code	County Code
					MG. DAY YEAR		46		REP	46
							(SEE INSTRUCTIONS FOR CODES)			
FOR OFFICE USE ONLY										
Summary of Receipts and Expenditures from: ▶			MO. DAY YEAR	To	MO. DAY YEAR	RECEIVED 2014 SEP 18 PM 3:30 STATE SERVICES OFFICE OF CAMPAIGN FINANCE				
			10 10 2014	To	9 15 2014					
A. Amount Brought Forward From Last Report					\$ 30,838.30					
B. Total Monetary Contributions and Receipts (From Schedule I)					\$ 5,966.00					
C. Total Funds Available (Sum of Lines A and B)					\$ 42,804.30					
D. Total Expenditures (From Schedule III)					\$ 8,183.85					
E. Ending Cash Balance (Subtract Line D from Line C)					\$ 34,620.45					
F. Value of In-Kind Contributions Received (From Schedule II)					\$ 0					
G. Unpaid Debts and Obligations (From Schedule IV)					\$ 0					

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.

Sworn to and subscribed before me this 18 day of September, 2014

COMMONWEALTH OF PENNSYLVANIA
 Notarial Seal
 Sharyn Donnelly, Notary Public
 Horsham Twp., Montgomery County
 My Commission Expires Nov. 8, 2017
 MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

My commission expires 11 MO. 8 DAY 17 YR.

Peter Sugener
 Signature of Person Submitting Report

Peter Sugener
 Printed Name

267 Area Code 613-8494 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 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 18 day of September, 2014

COMMONWEALTH OF PENNSYLVANIA
 Notarial Seal
 Sharyn Donnelly, Notary Public
 Horsham Twp., Montgomery County
 My Commission Expires Nov. 8, 2017
 MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

My commission expires 11 MO. 8 DAY 17 YR.

William E Donnelly
 Signature of Candidate

William E Donnelly
 Printed Name

215 Area Code 343-4806 Daytime Telephone Number

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate <u>Citizens for Donnelly</u>	Reporting Period From <u>6/10/14</u> To <u>9/15/14</u>
---	---

1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ <u>0</u>

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

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$ <u>0</u>
All Other Contributions (Part D)	\$ <u>5966.00</u>
TOTAL for the Reporting Period (3)	\$ <u>5966.00</u>

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

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.)	\$ <u>5966.00</u>
--	-------------------

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 Citizens for Donnelly	Reporting Period From 6/10/14 To 9/15/14
---	---

				DATE	AMOUNT
Full Name of Contributor DB Rental				MO. DAY YEAR 6 23 14	\$ 2,000.⁰⁰
Mailing Address 1800 Pennbrook Parkway Ste. 200				MO. DAY YEAR	\$
City Lansdale	State PA	Zip Code (Plus 4) 19446-		MO. DAY YEAR	\$
Employer Name Same				Occupation Same	
Employer Mailing Address/Principal Place of Business Same					

Full Name of Contributor Russell Dunlevy				MO. DAY YEAR 7 7 14	\$ 3,500.⁰⁰
Mailing Address 50108 Ryan Rd.				MO. DAY YEAR	\$
City Pipersville	State PA	Zip Code (Plus 4) 18947-		MO. DAY YEAR	\$
Employer Name Gilmore + Assocs.				Occupation Engineer	
Employer Mailing Address/Principal Place of Business 65 E. Butler Ave Ste 100 New Britain PA 18901					

Full Name of Contributor LISA Arnold				MO. DAY YEAR 8 8 14	\$ 466.⁰⁰
Mailing Address 47 S. Fifth Ave.				MO. DAY YEAR	\$
City Lebanon	State PA	Zip Code (Plus 4) 17042-		MO. DAY YEAR	\$
Employer Name N/A				Occupation RETIRED	
Employer Mailing Address/Principal Place of Business N/A					

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
\$ 5966.⁰⁰

SCHEDULE III

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Citizens for Donnelly	Reporting Period From 6/10/14 To 9/15/14
---	---

To Whom Paid	MO.	DAY	YEAR	Amount
IACREOT Mailing Address 50 Old Pond Ln. City Statesville State NC Zip Code (Plus 4) 28025	6	16	14	\$ 420.00
Description of Expenditure conference expense				
Hershey Mailing Address 325 University Dr. City Hershey State PA Zip Code (Plus 4) 17033	6	19	14	\$ 309.69
Description of Expenditure conference expense				
MCKC Mailing Address 800 Penilyn Blue Bell Pkwy Ste. 240 City Blue Bell State PA Zip Code (Plus 4) 19422	6	23	14	\$ 100.00
Description of Expenditure donation				
US Airways Mailing Address 4000 E. Sky Harbor Blvd. City Phoenix State AZ Zip Code (Plus 4) 85034	7	1	14	\$ 48.94
Description of Expenditure conference expense				
US Airways Mailing Address 4000 E Sky Harbor Blvd. City Phoenix State AZ Zip Code (Plus 4) 85034	7	2	14	\$ 466.00
Description of Expenditure conference expense				
US Airways Mailing Address 4000 E Sky Harbor Blvd. City Phoenix State AZ Zip Code (Plus 4) 85034	7	2	14	\$ 466.00
Description of Expenditure conference expense				
US Airways Mailing Address 4000 E. Sky Harbor Blvd. City Phoenix State AZ Zip Code (Plus 4) 85034	7	2	14	\$ 122.00
Description of Expenditure conference expense				
DAPCC Mailing Address 2304 E Fairmount St. City Allentown State PA Zip Code (Plus 4) 18909	7	16	14	\$ 50.00
Description of Expenditure conference registration				

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

PAGE TOTAL
\$ 1922.63

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Citizens for Donnelly	Reporting Period From 6/10/14 To 9/15/14
---	---

To Whom Paid Rustus Law Barbill	MO. 7	DAY 24	YEAR 14	Amount \$ 115.57
Mailing Address 20041 S. Tamiami Trail				
Description of Expenditure conference expense				
City Estero	State FL	Zip Code (Plus 4) 33928		

To Whom Paid Alamo Rental Car	MO. 7	DAY 25	YEAR 14	Amount \$ 609.94
Mailing Address 10999 Terminal Access Rd.				
Description of Expenditure conference expense				
City Ft. Myers	State FL	Zip Code (Plus 4) 33913-		

To Whom Paid Hyatt Hotel	MO. 7	DAY 28	YEAR 14	Amount \$ 1454.35
Mailing Address 2600 Champion Ring Rd.				
Description of Expenditure conference Expense				
City Ft. Myers	State FL	Zip Code (Plus 4) 33913-		

To Whom Paid Shulas	MO. 7	DAY 28	YEAR 14	Amount \$ 108.83
Mailing Address 11000 Terminal Access Rd.				
Description of Expenditure conference expense				
City Ft Myers	State FL	Zip Code (Plus 4) 33913-		

To Whom Paid Colonial Airport	MO. 7	DAY 28	YEAR 14	Amount \$ 58.54
Mailing Address 630 S. Governor Printz Blvd.				
Description of Expenditure conference expense				
City Lester	State PA	Zip Code (Plus 4) 19029-		

To Whom Paid Friends of Bob Mensch	MO. 7	DAY 28	YEAR 14	Amount \$ 250.00
Mailing Address 404 Main St.				
Description of Expenditure Support				
City Pennsburg	State PA	Zip Code (Plus 4) 18693-		

To Whom Paid ETC Foundation	MO. 7	DAY 30	YEAR 14	Amount \$ 1,000.00
Mailing Address 229 Horseshoe Rd.				
Description of Expenditure Support				
City Horsham	State PA	Zip Code (Plus 4) 19044-		

To Whom Paid Bill Donnelly	MO. 8	DAY 4	YEAR 14	Amount \$ 75.00
Mailing Address PO Box 367				
Description of Expenditure Reimbursement				
City Horsham	State PA	Zip Code (Plus 4) 19044-		

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

PAGE TOTAL
\$ 3632.23

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Citizens for Donnelly	Reporting Period From 6/10/14 To 9/15/14
---	---

To Whom Paid Friends of Todd Stephens	MO. 8	DAY 7	YEAR 14	Amount \$ 100.00
Description of Expenditure Support				
Mailing Address 300 E. Moreland Ave				
City Hatboro	State PA	Zip Code (Plus 4) 19040		

To Whom Paid James Samng	MO. 8	DAY 22	YEAR 14	Amount \$ 62.95
Description of Expenditure domains				
Mailing Address 46 Terrace Rd.				
City Plumouth Meetings	State PA	Zip Code (Plus 4) 19462-		

To Whom Paid Tom Corbett for Governor	MO. 8	DAY 26	YEAR 14	Amount \$ 1,000.00
Description of Expenditure Support				
Mailing Address PO Box 1145				
City Harrisburg	State PA	Zip Code (Plus 4) 17108-		

To Whom Paid Gilles for 154	MO. 9	DAY 3	YEAR 14	Amount \$ 250.00
Description of Expenditure Support				
Mailing Address 213 Woods Rd.				
City Glenside	State PA	Zip Code (Plus 4) 19038-		

To Whom Paid Buona via	MO. 9	DAY 8	YEAR 14	Amount \$ 71.04
Description of Expenditure meeting				
Mailing Address 426 Horsham Rd.				
City Horsham	State PA	Zip Code (Plus 4) 19044-		

To Whom Paid MCRC	MO. 9	DAY 5	YEAR 14	Amount \$ 500.00
Description of Expenditure Fall Reception				
Mailing Address 860 Penilyn Blue Bell PL Stk. 240				
City Blue Bell	State PA	Zip Code (Plus 4) 19022-		

To Whom Paid Committee to Elect Tom Quigley	MO. 9	DAY 5	YEAR 14	Amount \$ 250.00
Description of Expenditure Support				
Mailing Address 860 Penilyn Blue Bell PL Stk. 240				
City Blue Bell	State PA	Zip Code (Plus 4) 19022-		

To Whom Paid Friends of Bruce Costar Inc	MO. 9	DAY 5	YEAR 14	Amount \$ 150.00
Description of Expenditure Support				
Mailing Address PO Box 1010				
City Namistown	State PA	Zip Code (Plus 4) 19404		

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

PAGE TOTAL
\$ 2383.99

SCHEDULE III
STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate: Citizens for Donnelly Reporting Period: From 6/10/14 To 9/15/14

To Whom Paid	MO.	DAY	YEAR	Amount
<u>Friends of Mary Toepel</u>	<u>9</u>	<u>5</u>	<u>14</u>	<u>\$ 100.00</u>
Mailing Address	Description of Expenditure			
<u>307 Hampton Cir.</u>	<u>Support</u>			
City	State	Zip Code (Plus 4)		
<u>Gilbertsville</u>	<u>PA</u>	<u>19325</u>		

To Whom Paid	MO.	DAY	YEAR	Amount
<u>Dee Adcock for US Congress</u>	<u>9</u>	<u>5</u>	<u>14</u>	<u>\$ 30.00</u>
Mailing Address	Description of Expenditure			
<u>2115 Eversley Ave.</u>	<u>Support</u>			
City	State	Zip Code (Plus 4)		
<u>Abington</u>	<u>PA</u>	<u>19001</u>		

To Whom Paid	MO.	DAY	YEAR	Amount
<u>Whitemarsh Rep. Comm.</u>	<u>9</u>	<u>12</u>	<u>14</u>	<u>\$ 75.00</u>
Mailing Address	Description of Expenditure			
<u>4029 Wooduff Rd.</u>	<u>Support</u>			
City	State	Zip Code (Plus 4)		
<u>Lafayette Hill</u>	<u>PA</u>	<u>19444</u>		

To Whom Paid	MO.	DAY	YEAR	Amount
<u>MTRC</u>	<u>9</u>	<u>12</u>	<u>14</u>	<u>\$ 40.00</u>
Mailing Address	Description of Expenditure			
<u>207 Somerset Ct.</u>	<u>Support</u>			
City	State	Zip Code (Plus 4)		
<u>Lansdale</u>	<u>PA</u>	<u>19446</u>		

To Whom Paid	MO.	DAY	YEAR	Amount
				\$
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		
		-		

To Whom Paid	MO.	DAY	YEAR	Amount
				\$
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		
		-		

To Whom Paid	MO.	DAY	YEAR	Amount
				\$
Mailing Address	Description of Expenditure			
City	State	Zip Code (Plus 4)		
		-		

To Whom Paid	MO.	DAY	YEAR	Amount
				\$
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
\$ 245.00