Commonwealth of Pennsylvania	PAGE 1 OF	(COVER PAGE)
CAMPAIGN FINANCE REPORT		(COVER PAGE)

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Filer Identification	> NA	F	iled By:	CANDIDATE	COMMITTEE	X LOBBYIST
Name of Filing Commit		Donnelly	i			
Street Address:	IS TOP 1		1			
P.O. B	ox Jut	- <u> </u>		State:	Zip Code:	
Horsh	0-M			PA_	1904	<u>4 -</u>
TYPE OF	STH TLESDAY 1 PRE-PRIMARY	2ND FRIDAY		30 DAY POST PRIMARY	AMENDMENT REPORT?	YES NO
REPORT	OTH TURSOAY	- 2ND FRIDAY	5.	SO DAY POST ELECTION	TERMINATION	yes No
lplace X to the right of	ANNUAL 7	YEAR	1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 - 1997 -	LING METHOD	PAPER	Y DISKETTE
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Name of Office Sough	t by Candidate:			DATE OF ELECTION	Number Code	
Ð				118201		IKEY 140
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Summary of Re	eceipts 📐	MO. DAY YEA	11	MO. DAY YEAR		
and Expenditure	es from:	10720		10/24/2011		
	Forward From Last		\$	1,502,36		<u>[~_]</u>
	Contributions and Re		lule !) \$ 1	$\frac{1}{10000}$	- 50	
	ailable (Sum of Lines		<u> </u>	(0), 30		ECEIVE
	res (From Schedule			7090.57		
	ance (Subtract Line		\$ 5	$5 + 11 \cdot 9 + 11$		ל ס ≧
	d Contributions Rec		· · · · · · · · · · · · · · · ·	2,451, 27	- V - G	
G. Uppaid Debts ar	며 Obligations (From	Schedule IV)	<u> </u>	0	- CO	
			FFIDAVIT SEC	TION a Candidate report	candidate sion be	
				computer diskette, are t		
COLLACT SHA COMPLEXE	ribed before me this				Ω	
27 the day of	A mademate ALTH	OF PENNSYLVANIA		Pot	Jun	h
<u> </u>	Nota	rial Seal			e of Petron Submitt EFER SVI	ing Report
Sharys		contractionery County	<u>} </u> }	[Printed Name	CCEDER
My commission exp	pires Member, Pennsviran MO.	DAY YR.	_ j.	Area Code	 Daytime	Telephone Nymber
PART II - II wis	IS & Feport of a Ca	indidate's Authorize	d Committee	, candidate shall sign mmittee has not violate	here.	the Act of June 3, 193
(P.L. 1333, No. 320)	as amended.	viromiedās sur nailaj	une pontion du		í h	
Sworn to and subs	cribed before me this	EALTH OF PENNSYLVA		11. Hun Ch	amille	
day day	of <u>Prease</u>	Notarial Seal 20		Winnings	ignature of Candidat	
- Lilou	if the Horsherry	TKp/, Montgomery Count	~	MILLIOM	Printed Name	eny
L' committe	Pilas Member, Penn	DAY YR.		Area Code	<u>343</u>	HROU e Telephone Number
1	- MO.					
	Department	t of State 🗢 Bur	eau of Comm	nissions, Elections ar	nd Legislation	
and the second of the	210 North Of	fice Building 🗣 H	larrisburg, PA	17120-0029	(717) 787-5280	
DREB-802-17-59						

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PAGE 2 OF _____

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
Citizensfor Donnelly	From (07711 To 1024111

1 UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR TOTAL for the Reporting Period (1) \$ 1 00

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART & AND PART B)		
Contributions Received from Political Committees (Part A)	\$	0
All Other Contributions (Part B)	\$	900,00
TOTAL for the Reporting Period	2) \$	900.00

3 CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)	
Contributions Received from Political Committees (Part C)	\$ 3,500.00
All Other Contributions (Part D)	\$ 12,600.00
TOTAL for the Reporting Period (3)	\$ 16,100,00

OTHER RECEIPTS - REFUNDS, INTERES	

TOTAL for the Reporting Period

(4) \$ (

Boxes 1, 2, 3 and 4, and children the dimont of the state	\$ 17,100.00
Cover Page, Item B.)	

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	Reporting Period	in hulu
Citizens for Donnelly	From (0]7111	10/24/11
	DATE	AMOUNT
Full Name of Contributor Kenneth E. Heydt / Cynthia A. Bilous Mailing Addross		\$ 200.00
Address Lane	DAY	\$
27 Tice Lane State Zip Code (Plus 4)	MO	
Perkasie PAlizany-		\$
Full Name of Contributor Thomas A, + Nancy L. Gockowski Mailing Address		\$ 200.00
	MONS SIDAYS SALEARS	\$
244 HOILY Drive State Zip Code (Plus 4)	MO DAY YEAR	
Chalfort PA 18914-		\$
Full Name of Contributor Mathewm, + Snawn E, Garber Mailing Address	MO DAY YEAR	\$ 200.°°
	Sector and the Sector Sector and the sector	\$
City State Zip Code (Plus 4)	MO	
OHSWITE PALIBAUZ -		\$
Full Name of Contributor Kathleen E. + Allen B. Mason Mailing Address	IO IZ II	\$ 200.00
Mailing Address	MO	\$
P.O. BOX 775 City State Zip Code (Plus 4)	MO. DAY YEAR	
Montaomeryunile PA 18936-		\$
Full Name of Contributor ALDC/ TO + TOM Vennettilli		\$ 100,00
Mailing Address	STATION STATIAN STATIST	\$
59 Stone Hill Dr. City State Zip Code (Pius 4)	MO. DAY YEAR	·
Pottstown PA 194104 -		\$
Full Name of Contributor	MOTO AND AVEAB	\$
Mailing Address	MOZEL CAY STRAT	\$
City State Zip Code (Plus 4)	MOZ	-
		\$
Full Name of Contributor	MONTOAY	\$
Mailing Address	MO. DAY YEAR	\$
City State Zip Code (Plus 4)	MO	
		\$
Fuil Name of Contributor	MODAY	\$
Mailing Address	MC DAY YEAR	\$
City State Zip Code (Plus 4)	MO	
		\$
		PAGE TOTAL
Enter Grand Total of Part B on Schedule I, Detailed Summ	hary Page, Section 2.	\$ Y/Y)

P	A	GE	

OF _____

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			Rep	porting Pe	iriqd	
Vame of Filing Committee or Candidate				rom	7111	т. 1024 11
CITATO OF MULT		······		DATE		AMOUNT
with Name of Contributing Committee	00		M0.		YEAR	\$ 1,000,00
Heiling Address		P	MO		YEARS	\$
300 F. Moreland Av		Zip Code (Plus 4)	MD.	DAY	VEAR	· · · · · · · · · · · · · · · · · · ·
Hatlooro	$\Delta = 1$	90-10 -				\$
Full Name of Contributing Campittee	nA	3chis 1	M0. 10	19	11	\$ 2,000.00
Mailing Address	<u></u> \		MO.	DAY	YEAR	\$
P.O. BOX 95	State .	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Horshow	PH IC	1044 -	MO.	DAY	VEAD	
Full Name of Contributing committee Hom Cansof Italian Her	itaa	= Caunal	9	19	$\overline{11}$	\$ <u>500.00</u>
Matting Address ALALIDON Rd.	1		MO	DAY	YEAR	\$
	State V	Zip Code (Plus 4)	<u>OMO:</u>	DAY	YEAR	\$
HUQUOD	rh If	-1703 -	MQ.	DAY	YEAR	
Full Name of Contributing Committee				DAY	YEAB	\$
Mailing Address						\$
City	State	Zip Code (Plus 4) —	MO.	DAY	YEAR	\$
Full Name of Contributing Committee			MO	DAY	YEAR	\$
Mailing Address		<u></u>	MO	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	<u></u>	•••••	MO.	DAY	YÉAR	
			MO.	DAY	YEAR	\$
Mailing Address						\$
Clty	State	Zip Code (Plus 4)		DAY	YEAR	\$
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAB	\$
	<u> </u>		MO.	DAY	YEAR	\$
Full Name of Contributing Committee			MO.	DAY	YEAR	
Mailing Address						\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
			1			PAGE TOTAL
Enter Grand Total of Part C on Sche	dule I,	Detailed Summa	ry Page,	Sectio	n 3.	\$ 3,500,00

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PART D ALL OTHER CONTRIBU		6E OF
ALL OTHER CONTRIBC		
Use this Part to itemize all other contributions	with an aggregate val	iue of
Use this Part to itemize all other contributions from political commit	tees reported in Part	C.)
Name of Filing Committee or Candidate	Reporting Period From 07111	то 10/24/11
Citizens for Donnelly	DATE	AMOUNT
Full Name of Contributor Thomas A. Stella Wathns		\$ 400.00
Mailing Address	MO. DAY YEAR	\$
Chy SIZ Park 9000 State Zip Code (Plus 4) Chy Da 189710-	MO. DAY YEAR	\$
Employer Name	Occupation	
Individual Employer Mailing Address/Principal Place of Business	<u> </u>	
Same	MO. DAY YEAR	\bullet $2 \rightarrow 00$
TOPI HI SUSAA P. Ardman		\$ 300.00
Meiling Address 3047 Conrad Way		\$
City State Zip Code (Plus 4)	MO. DAY YEAR	\$
Employer Name	Occupation	
Employer Mailing Address/Principal Place of Business		
Same	MO. DAY YEAR	\$ 400.00
John A. Barbara J. Swenson		• 400.
Mailing Address 26 UICUPDINT LARC	MD. DAY YEAR	\$
LENIHOWA State Zip Code (Plus 4)		1\$
Employer Name Trainidual	Occupation	
Employer Mailing Address/Principal Place of Busiliess		
Full Name of Contributor	MO. DAY YEAR	\$ 5/1)00
Mailing Address	MO. DAY YEAR	s
101 DUCHESS PLACE State _ Zip Code (Plus 4)	MO. DAY YEAR	\$
Northwales PAL19454-	Occupation	≯
Employer Name		
Employer Mailing Address/Principal Place of Business		
Full Name of Contributer		\$2500.00
Milling Association of the second second	MONT DAY & SAVEA	\$
State Juth LIVCLE DTC.	MO. DAY YEAR	\$
malvern Philosof-	Occupation	
Employer Name	Same	
Employer Mailing Address/Principal Place of Business	······································	
The Court Total of Part D on Schedule I. Detailed Summ	ary Page, Section 3.	PAGE TOTAL 00

Enter Grand Total of Part D on Schedule 1, Detaile

		PART D
All	OTHER	CONTRIBUTIONS

PAGE _____ OF _____

-	-		
		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.)

	Reporting Period
Name of Filing Committee or Candidate	From 6711 To 102411
Citizens for Donnelly	DATE AMOUNT
Full Name of Contributor Graline L. + Chostopher N. Giuliani	10 13 11 \$ 500 °°
Mailing Address	S MORE CHORNEL S
1745 LOIS ROad State Zip Code (Plus 4)	MO
	\$
Employer Name	Occupation
Trainidual	
Employer Mailing Address/Principal Place of Business	
Same	MO DAY YEAR \$ 500 00
Full Name of Contributor	10171700
Mailing Address	MO. DAY YEAR \$
2002 WEST ROCK ROCO State Zip Code (Plus 4)	MO
Perkasie PA 18944 - 2012	\$
Employer Name	Attorney
Employer Mailing Address/Principal Place of Business	
SAME	
Full Name of Contributor	10 17 11 \$ 2,000.00
Dale E Caya	DAY YEAR
Mailing Address	\$
City State Zip Code (Plus 4)	MO DAY YEAR \$
Schersville PA 18960-	Occupation
Torindual	
Employer Mailing Address/Principal Place of Business	
Sanl	MO DAY PYEAR \$ 500 00
EUL Name of Contributor MARKE, + KELLYA, HIMSWORTH	10 18 11 \$ 500,00
Mailing Address	MO DAY YEAR \$
205 JOAN D(. State Zip Code (Plus 4)	MO
Trappe PA 194210-	\$
Employer Name	Decupation
Employer Mailing Address/Principal Place of Business	
Full Name of Contributor	
Demis P Mulligan	
Mailing Address	\$
	MO. DAY YEAR \$
Ambler IPHIMUDZ	Occupation
Employer Name	
Employer Mailing Address/Principal Place of Business	
Same	PAGE TOTAL
Enter Grand Total of Part D on Schedule I, Detailed Summa	ary Page, Section 3. \$ 4,500.

PART D					
All	OTHER	CONTRIBUTIONS			

PAGE _____OF ____

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				Reporting Period	
Littzens for Donr	nel			From UTI	1 TO 10/24/11
				DATE	AMOUNT
Full Name of Contributor Danielk, + Rosemary	Δ-2	eff			\$1,000.00
Mailing Address	116		2 MD		\$
	State	Zip Code (Plus 4	S.MO	DAY	
	РД	19437 -			\$
Individual			Occup	Ation	
Employer Mailing Address/Principal Place of Business					
Elli Name of Contributor GILMORE				DAY YEAR	\$ 3,000.00
Beiling Address 350 E. Butler Ave,			OMC	DAY YEAR	\$
City	State PA	Zip Code (Plus 4	Sim Q	DAY	\$
Employer Name			Occup	ation	
Employer Mailing Address/Principal Place of Business				- ([#] -	· · · · · · · · · · · · · · · · · · ·
Full Name of Contributor			MO	DAY LEAR	1
					\$
Mailing Address			MO	DAY YEAR	\$
City	State	Zip Code (Plus 4	CM	DAY IS YEAR	\$
Employer Name		<u></u> .	Occup	pation	·
Employer Mailing Address/Principal Place of Business					
· · · · · · · · · · · · · · · · · · ·					
Full Name of Contributor		·····	o Mo	DAY	
A 488 YO 1 - Y - Y - Y - Y - Y - Y - Y - Y - Y -					\$
Mailing Address			MO	DAY	\$
City	State	Zip Code (Plus 4	OM [®]	DAY	\$
Employer Name			Occup	ation	
Employer Mailing Address/Principal Place of Business			<u></u>		
		· · · · · · · · · · · · · · · · · · ·			
Full Name of Contributor			MO	DAY	\$
Mailing Address			MO	DAY	\$
City	State	Zip Code (Plus 4 —	MO	DAY YEAR	\$
Employer Name			Occup	ation	J
Employer Mailing Address/Principal Place of Business			<u> </u>		
Enter Grand Total of Part D on Schedu	ule I,	Detailed Sum	nary Pag	e, Section 3.	\$ 4,000,00

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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	melly	Reporting Per From	1	To 10/24/11	
1. UNITEMIZED IN-KIND CONTRIBU	UTIONS RECEIVED - VALUE OF	\$50.00 OR L	ESS PI	R CONTRIBUTOR	
	TOTAL for the Reporting Peric	od (1)	\$	Ò	
2. IN-KIND CONTRIBUTIONS RECE	IVED - VALUE OF \$50.01 TO \$2	250.00 (FROM	PART	F	
	TOTAL for the Reporting Peric	od (2)	\$	0	
3 IN-KIND CONTRIBUTION RECEIV	VED - VALUE OVER \$250.00 (FR	OM PART G			
	TOTAL for the Reporting Peric	od (3)	\$ /	0,951,29	
TOTAL VALUE OF IN-KIND CONTE REPORTING PERIOD (Add and enter and 3; also enter on Page 1, Repor	amount totals from Boxes 1, 2,		\$ /(5,951.29	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

	SCHEDULE II	F	AGE OF				
IN-KINI	D CONTRIBUTION	S RECEIVED					
	VALUE OVER \$250.00						
Name of Filing Committee or Candidate	nally	Reporting Perior	1 - 10 bull				
	INCHY						
Full Name of Contributor	Ennaylvania	MOULE DAY TYEAR	\$71109.74				
Mailing Address State Street		MO. DAY YEAH	\$3,781.55				
Hainsburg	State Zip Code (Plus 4)	MO. DAY YEAR	\$				
≢mployer of Contributor		Occupation	L				
Employer Mailing Address/Principal Place of Business	8	Description of Contribution	Postage				
Full Name of Contributor							
Meiling Address		(MONI TOAY) YEAR	\$				
City	State Zip Code (Plus 4)	MOLET IN DAYN INYEARD					
Employer of Contributor		Occupation] \$				
Employer Mailing Address/Principal Place of Business		Description of Contribution					
EDIName of Contributor		MO2 DAY YEAR	· · · · · · · · · · · · · · · · · · ·				
Mailing Address		MD. DAY	\$				
City	State Zip Code (Plus 4)		\$				
Employer of Contributor		MOIT MOAY HYEAR	\$				
Employer Mailing Address/Principal Place of Business		Occupation					
		Description of Contribution					
Full Name of Contributor		MO. DAY YEAR	\$				
Mailing Address	na n	MO. DAY YEAR	\$				
¢ity .	State Zip Code (Plus 4) 	MO. DAY YEAR	\$				
Employer of Contributor	······	Occupation	······································				
Employer Mailing Address/Principal Place of Business		Description of Contribution					
Full Name of Contributor		IL MOUS IN DAY! I YEAR I	\$				
Mailing Address	· · · · · · · · · · · · · · · · · · ·	TIMO IN INDAY IN IVEAR	\$				
φαίας. City	State Zip Code (Plus 4)		≎ \$				
Employer of Contributor		Occupation	*				
Employer Mailing Address/Principal Place of Business	Description of Contribution						
			PAGE TOTAL				
Enter Grand Total of Part G on Schee Summary Page, Section 3.	dule II, In-Kind Contribut	tions Detailed	\$10951 29				

\$10,951,29

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SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	From 6711 To 102411
Citizens for Donnelly	
in the marsh broubling (minitee)	MOS DAY YEAR Amount
Mailing Address Elm Street Ste, 320	Description of Expenditure
Conshohoclen A 9428 -	
FUPPOLS of POt MOSESSO	$\frac{MO}{O} = \frac{BAY}{VEAR} + \frac{Amount}{$} = 25, \infty$
Mailing Address DUNDA SCHLOSSER BO	Description of Expenditure
City State Zip Code (Plus 4) Hayleysville PA 1948-	• •
To Whom Paid	MO. DAY YEAR Amount (0 17 11 \$005,00
1023 (Duit Street	Description of Expenditure
Chy State Zip Code (Plus 4) Beading A 9601 -	
Ta Whom Paid Tay Manal	MO. DAY YEAR Amount 9 29 11 \$ 24.54
Mailing Address 1000 Boardwalk at Virginia Ave.	Description of Expenditure
City ALLACTER OF THE Zip Code (Plus 4) Atlantic City 0508401-	
To Whom Paid	MO: DAY YEAR Amount 7511 \$374,08
Mailing Address Boar Owall Lat Virginia Ave,	Description of Expenditure
City State Zip Code (Plus 4) AHAAAACCIM DT (0840) -	
To Whom Phid Bedstone Gnill	T 8 Amount \$ 49,87
Mailing Address Germantown PK.	Description of Expenditure MECHNQ
Plymouth Meeting PA 19462-	
MALLEY FORCE WINDERES	THY II \$ 00
Milling Address	Meeting
City Stete Zip Code (Plus 4) INON N.C. PA 19097-	
NOT NSTOWN Parking FEE	$\begin{array}{c c c c c c c c c c c c c c c c c c c $
Mailing Address F. Airy Street	Description of Expenditure
City State Zip Code (Plus 4)	
Enter Grand Total of Expenditures on Page 1, Report Cover F	Page, Item D. \$ 821.49

PAGE ____OF ____

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period From 07711 To 102411
BUE Comet	Ang. DAY YEAR Amount S 1 S 1.75
Mailing Address 1005 Easton Pd. Clim Blenside Plus 4) DA 1903 -	meeting
To Whom Paid VIIIage Tavern The VIIIage Tavern Mailing Address	MO. DAY YEAR Amount S 4 11 \$ 30,01 Description of Expenditure MCCH09
STIStump Pd. Morthwales MA 19454-	MO. DAY YEAR Amount UO
By Whom Paid Greater Norristown PAL Mailing Address 340 Harding BNJ.	Description of Expenditure HC /2 P9 /
To Whom Paid To Whom Paid To Whom Paid To Whom Paid The Cans of Italian Hentage Cancil	MO DAY YEAR Amount 00
Mailing Address 2650 AUGUDON RO. City	Description of Expenditure
Pudubon DA 19403- To Whom Paid Providence Republican Committee	C DAY YEAR Amount C DAY YEAR Amount Description of Expenditure
Mailing Address Hennouse Rd. 151 Ri Hennouse Rd. City AUDON PA 19403 -	Support
Thends of West Nornton	MO. DAY YEAR Amount G J / \$ 50,000 Description of Expenditure
Mailing Address Main Street City State Zip Code (Plus 4) Mornistown PA 19401-	
To Whom Paid Committee to Elect Diane Misko Mailing Address Cumberland Bel.	MO. DAY YEAR Amount CO 9 2 5 60, CO Description of Expenditure
Abinaton PA 1901 -	
Mailling Address 526 Willow AUC, State Zip Code (Plus	Support
Enter Grand Total of Expenditures on Page 1, Report Cover	PAGE TOTAL

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PAGE ____OF ____

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Repor	ting Period	<u>, 1</u>
Citizens for Donne	Πü		From	- 11F10 -	1 70 10 24 11
	14				
or cater nomistrium P	AC		9 6	ay year 2 11	Amount00 \$50,00
	<u> </u>		Description of	Expenditure	
340 Harding Blvd.	itate	Zip Code (Plus 4)	I. OIK	21/01/	
nornstum If	AI	940[-			
To Whom Paid			9 7	AY YEAR	\$ 000, 00
Billing Address 314 E. Johnson Highwa	24		Description of		
	2A	Zip Code (Plus 4) /940/-			
Mapital Amotions			9	3 11	Amount 699.40
Malling Address	H.I	·····	Description o	f Expenditure	i na
City	State	Zip Code (Plus 4) 19038 -		, , , , , , , , , , , , , , , , , , , ,	<u> </u>
Glenside K	M	17020		DAY	Amount 00
Montco IMCCWF			91/	3 //	\$ 50,00
P.O. BOX 311			Eve		
	State A	Zip Code (Plus 4)			
To Whom Pajd Valley Forge, Beefn	AI	10.	E 817	DAY YEAR	Amount 6.24
Milling Address S. Trooper Rd.		-	Description (hng	· · · · · · · · · · · · · · · · · · ·
Eagleville	State PA	2ip Code (Plus 4) 1943 -)	
To Whom Peld			MO:	DAY	Amount \$
Mailing Address			Description	of Expenditure	
City	State	Zip Code (Plus 4)			
		÷			
To Whom Paid			я <u>мо</u>	DAY	Amount \$
Mailing Address			Description	of Expenditure	
City	State	Zip Code (Plus 4) 			
To Whom Paid			MO	DAY	Amount \$
Mailing Address		<u> </u>	Description	of Expenditure	
City	State	Zip Code (Plus 4)			
		 			PAGE TOTAL
Enter Grand Total of Expenditures on Pa	ge 1,	Report Cover	Page, Iten	n D.	\$ 4,045.64

PAGE _____OF _____

SCHEDULE III

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period From 07111 To 1024111
Citizens for Donnelly	From 01111 10 10 12-1111
	MO DAY YEAR Amount
Springfield GOP	Mo. DAV YEAR AMOUNT 9 13 11 \$ 150.00 Description of Expenditure
Mailing Address	Support
City State Zip Code (Plus 4)	
	MO. BAY YEAR Amount
Montgomery Tup. Kepublican Committee	Description of Expenditure
255 Twining RO.	Fundiaiser Event
City State Zip Code (Plus 4) PA 19446	
To Whom Paid Upper Montomery County Republican Club	MO, DAY YEAR Amount 9 13 11 \$ 50.00
fire Enuth St.	Description of Expenditure
City State Zip Code (Pius 4) RED Hill PAISOTU-	Fundraiser
To Whom Paid S of Lengre Bruno	MD. DAY YEAR Amount 9 15 11 \$ 05.00
Mailing Address	Description of Expenditure
135 Scarlet Dr. State Zip Code (Plus 4)	
Conshonacken pA/19428-	Fundraiser
To Whom Paid Pravo 1 Castor Campaga	MO. DAY YEAR Amount 9 07 11 \$ 10,000,00
Mailing Address	Description of Expenditure Support
City State Constant PA 19428 -080	
To Whom Paid Transferrer CAP	10 5 11 \$ 45,00
Mailing Address Main St Ste. 144	Description of Expenditure
City State Zip Code (Plus 4)	Fundraiser
	MO. DAY YEAR Amount
Montomery County Young Republicons	Description of Expenditure
City State Zip Code (Plus 4)	Memorial Luncheon
Frends of The Daugherty	MO: DAY YEAR Amount CO
Mailing Address 228 COX Rd.	RE-Election Fundrase
State Zip Code (Plus 4) Jan Kintown PA 19040	
JATHOAT	Page Item D. SID. 870
Enter Grand Total of Expenditures on Page 1, Report Cover F	Page, Item D. $\$ 0.870.$

PAGE _____OF _____

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period				
Citizens for Donnelly	From 6711 To 102411				
To Whom Paid	MO DAY YEAR Amount SO				
	Description of Expenditure				
DAT Truin KO.	Fundraise				
	MO DAY YEAR Amount 00				
Upper Menon Republican Committee	10 5 11 \$ 50.00				
Moking Address PD BOX U0932	Pescription of Expenditure Fall Reception				
Clay State Zip Code (Plus 4)	I GET I I C SPISI				
King 19046-					
To Whom Paid	MO: DAY YEAR Amount				
Committee to REFLECT Dennis Zappone	Description of Expenditure				
1442 Marheld HVORUC	Re-Election Support				
Glenside PA 19038 -					
O'TOTTAIL.	MO. DAY YEAR Amount				
Committee to Elect District Judge Ester, 1. (051110	Description of Expenditure				
Mailing Address. Killerspear D()	Fundraiser				
Site Lip coor i no -					
Jeffersonville PALA403-	MD: DAY YEAR Amount				
Matt Braidi for Commissioner	10 11 11 \$ 25.00				
	Description of Expenditure				
Mailing Address Hall Avenue 1235 Hall Avenue City State Zip Code (Plus 4)	Fundraiser				
Abinatur 1901-					
	MO DAY YEAR Amount				
West Nonton Republican Committee	Description of Expenditure				
Mailing Address O. BOX 382	Fall Reception				
City State Zip Code (Flus 47					
	MO. YEAR Amount				
Area 8 Republican Conmittee	10 17 11 100,				
Mailing Address	Description of Expenditure Fall Reception				
City State Zip Code (Plus 4)					
Nomistann PA 19403-	MO. DAY YEAR Amount				
Coggins for Judge	MO. DAY YEAR AMOUNT CO				
Mailing Address	Description of Expenditure				
509 SWEDE St. State Zip Code (Plus 4)	1 and a contraction				
Domistown 19401-					
PAGE TOTAL					
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. \$915.00					

PAGE ____OF ____

SCHEDULE III STATEMENT OF EXPENDITURES

ame of Filing Committee or Candidate			ļ	Reporting Per	iod	<u> </u>
Citzens for Donnel	N			From U	<u>+ </u>	To 10/24/11
UTICA IS TUP DUME	<u> </u>					
Whom Paid 2 Republicanos			MO2	DAY Y IB	EAR	s (0).00
ATECA 2 Republicans				tion of Expendi		
215 BUCNERT Rd.	State	Zip Code (Plus 4)	20	pport	-	
Ottstown	PA	19464				
Whom Poid Umstown Park+ Recre		00	MO			\$ 100.00
	an	011		tion of Expend	iture	¥
230 E. Airy Streft	State	Zip Code (Plus 4)	$\mathcal{P}_{\mathcal{X}}$	natio		·····
Nomstown		9401 -				
	111		<u>мо.</u>	DAY	VEAR	\$2,335.°°
Autom Paid Paid Republican Pa	<u> </u>			ation of Expend	iture	
P.O. Box 95	State	Zip Code (Plus 4)	μĽ	mtio	<u> </u>	
Horsham		9044-		فبراديب والمحمد وعرب		
to Whom Paid Scater Anistown Society Fr	A A	45	MO.		YEAB	\$ 35,00
Mailing Address	X LII	1.2	Descri	ption of Expans		
208 Dekalb Street	State	Zip Code (Plus 4)	110	<u> </u>	2211	
Norristown	PAI	19401 -				
Phils Tavern			MO:	17	YEAR	Amount \$ 00.50
				eetin Cetin	diture	
131 Butler Pill	State	Zip Code (Plus 4)	111		1	
Blue Bell	PA	9422 -				Amount
To Whom Paid			MO	DAY	YEAR	\$
Mailing Address			Descr	iption of Expen	diture	
City	State	Zip Code (Plus 4)				
		_			YEAR	Amount
To Whom Peid			MO	DAY	TEAR	\$
Mailing Address			Descr	iption of Exper	nditure	
City	State	Zip Code (Plus 4)	+			
			.⊖MC	DAY	YEAR	Amount
To Whom Paid						\$
Mailing Address			Desc	ription of Expe	nditure	
City	State	Zip Code (Plus 4)	1	<u>.</u>		
						PAGE TOTAL
Enter Grand Total of Expenditures on P	age 1.	Report Cover	Page,	ltem D.		\$ 2,556.50
CITEL GIALIC LATEL AL EXPERIMENDE OFF		• • • • • • • • •	_ · ·			