

Commonwealth of Pennsylvania
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: DIA		Report Filed By: CANDIDATE 1. <input type="checkbox"/> COMMITTEE 2. <input checked="" type="checkbox"/> LOBBYIST 3. <input type="checkbox"/>	
Name of Filing Committee, Candidate or Lobbyist: Citizens for Donnelly			
Street Address: P.O. Box 367			
City: Horsham		State: PA	Zip Code: 19044 -
TYPE OF REPORT (place X to the right of report type)	1. <input type="checkbox"/> 1ST FRIDAY PRE-PRIMARY	2. <input checked="" type="checkbox"/> 2ND FRIDAY PRE-PRIMARY	3. <input type="checkbox"/> 30 DAY POST-PRIMARY
	4. <input type="checkbox"/> 1ST FRIDAY PRE-ELECTION	5. <input type="checkbox"/> 2ND FRIDAY PRE-ELECTION	6. <input type="checkbox"/> 30 DAY POST-ELECTION
	7. <input type="checkbox"/> ANNUAL REPORT	YEAR: 2012	
FILING METHOD (CHECK ONE)		PAPER <input checked="" type="checkbox"/> DISKETTE <input type="checkbox"/>	
Name of Office Sought by Candidate:		DATE OF ELECTION MO. DAY YEAR 4 24 2012	District Number 46
		Office Code REP	Party Code REP
		County Code 46	
		(SEE INSTRUCTIONS FOR CODES)	
Summary of Receipts and Expenditures from:		FOR OFFICE USE ONLY	
MO. DAY YEAR 1 1 2012 To 4 9 2012			
A. Amount Brought Forward From Last Report	\$ 20878.47	OFFICE OF ELECTORAL SERVICES MONTG CO PA APR 13 P 3:52 RECEIVED	
B. Total Monetary Contributions and Receipts (From Schedule I)	\$ 4900.00		
C. Total Funds Available (Sum of Lines A and B)	\$ 25,778.47		
D. Total Expenditures (From Schedule III)	\$ 3324.64		
E. Ending Cash Balance (Subtract Line D from Line C)	\$ 22453.83		
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 or Candidate report, 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 12th day of April, 2012.

Notarial Seal
 Michelle L. Sepulveda, Notary Public
 Horsham Twp., Montgomery County
 My Commission Expires Sept. 30, 2015
 MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

Signature: Peter Senger
 Signature of Person Submitting Report
PETER SENER
 Printed Name

My commission expires 9 30 15
 MO. DAY YR.

267 613-8494
 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 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 12th day of April, 2012.

Notarial Seal
 Michelle L. Sepulveda, Notary Public
 Horsham Twp., Montgomery County
 My Commission Expires Sept. 30, 2015
 MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES

Signature: William E. Donnelly
 Signature of Candidate
William E. Donnelly
 Printed Name

My commission expires 9 30 15
 MO. DAY YR.

215 343-4806
 Area Code Daytime Telephone Number

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate Citizens for Donnelly	Reporting Period From 1/1/2012 To 4/9/2012
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1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS PER CONTRIBUTOR		
TOTAL for the Reporting Period	(1)	\$ 0

2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART B)		
Contributions Received from Political Committees (Part A)		\$ 0
All Other Contributions (Part B)		\$ 1,400.⁰⁰
TOTAL for the Reporting Period	(2)	\$ 1,400.⁰⁰

3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)		
Contributions Received from Political Committees (Part C)		\$ 0
All Other Contributions (Part D)		\$ 3,500.⁰⁰
TOTAL for the Reporting Period	(3)	\$ 3,500.⁰⁰

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 (Add and enter amount totals from Boxes 1, 2, 3 and 4; also enter this amount on Page 1, Report Cover Page, Item B.)	\$ 4,900.⁰⁰
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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 Citizens for Donnelly	Reporting Period From 1/1/12 To 4/9/12
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Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
Thomas/Elizabeth Pileggi Mailing Address 1301 Twinning Rd. City Dresher State PA Zip Code (Plus 4) 19025 -	1	23	12	\$ 250. ⁰⁰
Anthony/Lillian Disandro Mailing Address 205 McClure Dr. City Blue Bell State PA Zip Code (Plus 4) 19408 -	1	23	12	\$ 150. ⁰⁰
Thomas/Stella Watkins Mailing Address 949 Easton Rd. City Warrington State PA Zip Code (Plus 4) -	2	20	12	\$ 100. ⁰⁰
Albert/Toni Vennettilli Mailing Address 59 Stone Hill Dr. City Pottstown State PA Zip Code (Plus 4) 19404 -	2	22	12	\$ 100. ⁰⁰
Matthew/Erin Garber Mailing Address 97 Byers Rd. City Ottsville State PA Zip Code (Plus 4) 18942 -	2	23	12	\$ 100. ⁰⁰
Joel/Susan Ardman Mailing Address 3047 Conrad Way City Lansdale State PA Zip Code (Plus 4) 19446 -	2	26	12	\$ 100. ⁰⁰
John/Barbara Swenson Mailing Address 36 Viewpoint Ln. City Levittown State PA Zip Code (Plus 4) 19054 -	2	28	12	\$ 200. ⁰⁰
Benneth Heydt/Cynthia Bilas Mailing Address 27 Tice Ln. City Perkasie State PA Zip Code (Plus 4) 18944 -	2	29	12	\$ 100. ⁰⁰

Enter Grand Total of Part B on Schedule I, Detailed Summary Page, Section 2.

PAGE TOTAL
\$ 1,100.⁰⁰

PART 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 <u>Citizens for Donnelly</u>	Reporting Period From <u>1/1/12</u> To <u>4/9/12</u>
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Full Name of Contributor	DATE			AMOUNT
	MO.	DAY	YEAR	
<u>Thomas/Nancy Eockowski</u>	<u>2</u>	<u>29</u>	<u>12</u>	\$ <u>200.00</u>
Mailing Address <u>249 Holly Dr.</u>	MO.	DAY	YEAR	\$
City <u>Chalfont</u>	MO.	DAY	YEAR	\$
State <u>PA</u>	MO.	DAY	YEAR	\$
Zip Code (Plus 4) <u>18914 -</u>	MO.	DAY	YEAR	\$
<u>Kathleen/Allen Mason</u>	<u>2</u>	<u>29</u>	<u>12</u>	\$ <u>100.00</u>
Mailing Address <u>P.O. Box 775</u>	MO.	DAY	YEAR	\$
City <u>Montgomeryville</u>	MO.	DAY	YEAR	\$
State <u>PA</u>	MO.	DAY	YEAR	\$
Zip Code (Plus 4) <u>18936 -</u>	MO.	DAY	YEAR	\$
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	MO.	DAY	YEAR	\$
Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	MO.	DAY	YEAR	\$
Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	MO.	DAY	YEAR	\$
Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	MO.	DAY	YEAR	\$
Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributor	MO.	DAY	YEAR	\$
Mailing Address	MO.	DAY	YEAR	\$
City	MO.	DAY	YEAR	\$
State	MO.	DAY	YEAR	\$
Zip Code (Plus 4)	MO.	DAY	YEAR	\$

PAGE TOTAL
\$ 300.00

Enter Grand Total of Part B on Schedule I, Detailed Summary Page, Section 2.

**PART D
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 1/1/12 To 4/9/12
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	DATE	AMOUNT
Full Name of Contributor Steven Gilmore	MO. DAY YEAR 3 20 12	\$ 3500.⁰⁰
Mailing Address 350 E. Butler Ave.	MO. DAY YEAR	\$
City New Britain State PA Zip Code (Plus 4) 18901 -	MO. DAY YEAR	\$
Employer Name Individual	Occupation Individual	
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		
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
\$ 3500.⁰⁰

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Citizens for Donnelly	Reporting Period From <u>1/1/12</u> To <u>4/9/12</u>
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To Whom Paid TACREOT	MO. <u>1</u>	DAY <u>7</u>	YEAR <u>12</u>	Amount \$ 75.00
Mailing Address 2400 Augusta Dr.	Description of Expenditure Conference expense			
City Houston	State TX	Zip Code (Plus 4) 77057		

To Whom Paid Hershey Lodge	MO. <u>1</u>	DAY <u>9</u>	YEAR <u>12</u>	Amount \$ 154.29
Mailing Address 235 University Dr.	Description of Expenditure Conference expense			
City Hershey	State PA	Zip Code (Plus 4) 17133-		

To Whom Paid Joe Thasmanis	MO. <u>1</u>	DAY <u>10</u>	YEAR <u>12</u>	Amount \$ 222.41
Mailing Address 1800 Diagonal Rd.	Description of Expenditure conference expense			
City Alexandria	State VA	Zip Code (Plus 4) 22314-		

To Whom Paid Joe Thasmanis	MO. <u>1</u>	DAY <u>10</u>	YEAR <u>12</u>	Amount \$ 75.72
Mailing Address 1800 Diagonal Rd.	Description of Expenditure conference expense			
City Alexandria	State VA	Zip Code (Plus 4) 22314-		

To Whom Paid Embassy Suites	MO. <u>1</u>	DAY <u>12</u>	YEAR <u>12</u>	Amount \$ 431.07
Mailing Address 1000 Diagonal Rd.	Description of Expenditure conference expense			
City Alexandria	State VA	Zip Code (Plus 4) 22314-		

To Whom Paid North Wales Rep. Comm.	MO. <u>1</u>	DAY <u>13</u>	YEAR <u>12</u>	Amount \$ 75.00
Mailing Address 340 Windsor Way	Description of Expenditure Support			
City North Wales	State PA	Zip Code (Plus 4) 19451-		

To Whom Paid MCRK	MO. <u>1</u>	DAY <u>20</u>	YEAR <u>12</u>	Amount \$ 190.00
Mailing Address 314 E. Johnson Highway Ste. 200	Description of Expenditure Support			
City Normstown	State PA	Zip Code (Plus 4) 19401-		

To Whom Paid Hershey Lodge	MO. <u>1</u>	DAY <u>30</u>	YEAR <u>12</u>	Amount \$ 154.29
Mailing Address 235 University Dr.	Description of Expenditure conference expense			
City Hershey	State PA	Zip Code (Plus 4) 17133-		

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.	PAGE TOTAL \$ 1,377.78
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SCHEDULE III

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Citizens for Donnelly	Reporting Period From 1/1/12 To 4/9/12
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To Whom Paid	MO	DAY	YEAR	Amount	Description of Expenditure
Lisa Arnold Mailing Address: 47 S. 5th Ave. City: Lebanon State: PA Zip Code (Plus 4): 17042-	2	2	12	\$ 210.29	Conference expense reimbursement
Rep. Comm. Lawer Merion/Norbeth Mailing Address: 3 1/2 Lancaster Ave. City: Ardmore State: PA Zip Code (Plus 4): 19003-	2	2	12	\$ 150.00	Event
Friends of Marcy Teipel Mailing Address: 2050 E. Hian St. City: Pottstown State: PA Zip Code (Plus 4): 19464-	2	2	12	\$ 250.00	Event
CTEC Mailing Address: P.O. Box 30246 City: Elkins Park State: PA Zip Code (Plus 4): 19023 -	2	5	12	\$ 100.00	donation
PNC Mailing Address: 3006 Welsh Rd. City: Willow Grove State: PA Zip Code (Plus 4): 19090-	2	13	12	\$ 25.00	filing fee
Babies R Us Mailing Address: 2 Airport Square City: North Wales State: PA Zip Code (Plus 4): 19054 -	2	19	12	\$ 104.19	Supporter gift
Friends of Todd Stephens Mailing Address: P.O. Box 95 City: Horsham State: PA Zip Code (Plus 4): 19044-	2	29	12	\$ 1000.00	support
PJ Lindhans Mailing Address: 799 Dekalb Pl. City: Blue Bell State: PA Zip Code (Plus 4): 19422-	3	5	12	\$ 38.38	Meeting

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

PAGE TOTAL
\$ 1877.86

SCHEDULE III
STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate Citizens for Donnelly	Reporting Period From 1/1/12 To 4/9/12
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To Whom Paid	MO.	DAY	YEAR	Amount
Worcester GOP	3	22	12	\$ 600.00
Mailing Address PO Box 317	Description of Expenditure Donation			
City Worcester	State MA	Zip Code (Plus 4) 01490-		
Bamada Inn	4	2	12	\$ 9.00
Mailing Address Plank Rd. 220 + Plank Rd. Exit	Description of Expenditure conference expense			
City Altoona	State PA	Zip Code (Plus 4) 16801 -		
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	State	Zip Code (Plus 4)		
		-		
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	State	Zip Code (Plus 4)		
		-		
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	State	Zip Code (Plus 4)		
		-		
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	State	Zip Code (Plus 4)		
		-		
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	State	Zip Code (Plus 4)		
		-		
To Whom Paid	MO.	DAY	YEAR	Amount
Mailing Address				\$
City	State	Zip Code (Plus 4)		
		-		

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

PAGE TOTAL
\$ 609.00