CAMPAIGN FINANCE REPORT

PAGE 1 OF

(COVER PAGE)

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identification	Report Filed By:	CANDIDATE	% 1.	COMM		2.	TOB8	oser	3.
Name of Filing Committee, Candidate or Lobbyist:	rited by:		ė.			1			
Street Address:									
City: Horsoam		State:		210 Cod	14		.,	·	
TYPE OF STH TUESDAY 1. 2ND FRIDA		80 DAY	3.	AMENDA	ENT	YES	Š	No	V
STH TUESDAY 4 2ND FRIDA	y 5.	30 DAY POST ELECTION	8.	REPORT?		YES		No	$\frac{1}{X}$
(place X to the right of report type) REPORT (place X to the right of ANNUAL 7. YEAR THE PORT THE PO		ILING METHOD		REPORT?	100		DISKE		
Name of Office Sought by Candidate:		DATE OF ELEC		District	Office		Party	Cou	
			EAR	Number	Code		Code	،ه الب	de A
		11 3 20)15	40	(SEE IN:	STRUC	TIONS F	OR CC	DDES)
Summary of Receipts Mo. DAY YE	AR	MO. DAY Y	EAR	i i i K	OR OFF	ICE L	ise on	LY.	
and Expenditures from:)15 To	9 14 20	215						
A. Amount Brought Forward From Last Report	\$ 3	3918.8	8				<i>f</i>		
B. Total Monetary Contributions and Receipts (From Sche	dule I) \$	80000	Ŏ				40.4		
C. Total Funds Available (Sum of Lines A and 8)	\$ 41	918,8	Ž			٠.			1
D. Total Expenditures (From Schedule III)	\$ <i>E</i>	5918 10	3		. * *		 C 3		
E. Ending Cash Balance (Subtract Line D from Line C)	\$ 31	a_100 a_2	5				5 		
F. Value of In-Kind Contributions Received (From Schedu	ule II) \$	\bigcirc			; .		5		
G. Unpaid Debts and Obligations (From Schedule IV)						,			
AFFIDAVIT SECTION									
PART It 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.									
I swear (or affirm) that this report, including the attached schedul correct and complete.	les, on paper or o	computer diskette,	are to th	e best of	my know	/ledge	and bel	ief tru	16,
Sworn to and subscribed before me this COMMONWEALTH OF PENNSYLVANIA	١.,	1 (ົ .						ı
day of Shiryn Donnelly, Notary Public 20	7 <u>[</u>	Jours /	Ren	0				_	
Sharp Northeam Two/Montgomery County		(\(\sigma_{\text{in}}^{\text{sign}}	inture of	Person Su	bmitting	Report	t		
MEMBER PENKSYLVANIA ASSOCIATION OF HOTARE	5	715	Pı	inted Nam	<u> </u>				
My commission expires // B // MO. DAY YR.	-] -	Area Code		72°	ytime Te	4)	e Numb	er	_
DADT II			188" a						
PART II - If this is a report of a Candidate's Authorize I swear (or affirm) that to the best of my knowledge and belief to (P.L. 1333, No. 320) as amended.	his political com	candidate shall s mittee has not vio	gn here	provision	s of the	Act o	% o o o o o o o o o o o o o o o o o o	1937	7
(P.L. 1333, No. 320) as amended. Sworn to and subscribed before me this			,	,			· oane ·	, 150,	
16 th day of COMMONWEALTH OF PENNSYLVANIA	1	Allen G	1).						
Sharyn Donnelly, Notary Public) II o	Signatu	re of Care	didate				-
Morsham Two Montgomery County MisCommission Eypires Nov. 8, 2017	」	MITION	<u> ک</u> Pr	inted Nem	Ω	ПÅ			_
My commission expires HEMBEL PENNSYLVANDASSOCIATION OF HOTARD	5	215		30	13.4	101	7/1		

Department of State ● Bureau of Commissions, Elections and Legislation 210 North Office Building ● Harrisburg, PA 17120-0029 ● (717) 787-5280

PAGE 2 OF _____

CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

		,	
Name of Filing Committee or Candidate (11705 for Donnelly	Reporting Per From (4)	iod	To 9/14/15
1. UNITEMIZED CONTRIBUTIONS AND RECEIPTS - \$50.00 OR LESS	PER CONT	RIB	TOR
TOTAL for the Reporting Perior	d (1)	\$	0
2. CONTRIBUTIONS \$50.01 TO \$250.00 (FROM PART A AND PART	B)		
Contributions Received from Political Committees (Part A)	·	\$	
All Other Contributions (Part B)		\$	0
TOTAL for the Reporting Perio	d (2)	\$	0
		1	
3. CONTRIBUTIONS OVER \$250.00 (FROM PART C AND PART D)		48 M	10 (2011) 2011 (1 a de 1000) 800 (1 a de 1000)
Contributions Received from Political Committees (Part C)		\$	1,000.00
All Other Contributions (Part D)		\$	7,000.00
TOTAL for the Reporting Period	d (3)	\$	8,000.00
4 OTHER RECEIPTS - REFUNDS, INTEREST EARNED, RETURNED C	HECKS, ET(), (F	ROM PART E
TOTAL for the Reporting Period	d (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.)		\$	8,000.00

PAGE	_3	OF	8	
		_		

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.

Citizens for Donn	را ا حر	,	R	eporting From (Period NG//	5 to 9/14/15
	C_{II}	1		DATE		AMOUNT
Full Name of Contributing Committee			MO.		YEAR	
Mailing Address		· · · · · · · · · · · · · · · · · · ·	Mo.	DAY	15 YEAR	\$ 1,000
LO BOX 6128						\$
Harrisburg	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee		17110	MO.	DAY	YEAR	
Mailing Address						\$
moning Address			Mo.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	_
		-	ļ			\$
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	
City	State	Zip Code (Plus 4)				\$
,	State	Lip code (Figs 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee	<u> </u>		MO	DAY	YEAR	
Mailing Address						\$
			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
Full Name of Contributing Commission		_				\$
Full Name of Contributing Committee			MO.	DAY	YEAR	\$
Mailing Address			MO.	DAY	YEAR	&
City	State	Zip Code (Plus 4)	1		B-77-07-05-	\$
		-	мо.	DAY	YEAR	\$
Full Name of Contributing Committee	<u> </u>		MO.	DAY	YEAR	<u> </u>
Mailing Address			140		1000	\$
			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	\$
Full Name of Contributing Committee			No.	DAY	Vran	*
			MO.	, DAI	TEAR	\$
Mailing Address			MO.	DAY	YEAR	\$
City	State	Zip Code (Plus 4)	MO.	DAY	YEAR	
		_				\$
Full Name of Contributing Committee	···		MO.	DAY	YEAR	\$
Meiling Address			MO.	DAY	YEAR	
City	State	Zin Codo /him A				\$
·	Gra(e	Zip Code (Plus 4)	∵MO.	DAY	YEAR	\$
						PAGE TOTAL
Enter Grand Total of Part C on Sched	ule I,	Detailed Summary	/ Page.	Section		\$ 1,000
SEB-502 (7-99)	•	-	3-,			+ 1/000

ALL OTHER CONTRIBUTIONS

AGE 4 OF 8

Reporting Period

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

DSEB-502 (7-99)

Full Name of Contributor Full Name of Contr	Citizens for Donne	114	1			From 🗘	19/15	5 To 9/14/15
MALING Address PAIN Name of Contributor Maling Address Principal Place of Business Employer Maling Address Principal Place of Business Place Open Place of Business Place Open Place						DATE		AMOUNT
MACING Address Principal Place of Business Full Name of Contributor Employer Mailing Address Principal Place of Business Employer Name Occupation Employer Name Occupation	Full-Name of Contributor.					DAY =	YEAR	\$ 7,000
Semployer Name Semp			***************************************			DAY	YEAR	
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Employer Name Occupation								\$
		State	Zip Code	(Plus 4) —			YEAR	s
Employer Mailing Address/Principal Place of Business					Occupati	on		
	Employer Mailing Address/Principal Place of Business							

Enter Grand Total of Part D on Schedule I, Detailed Summary Page, Section 3.

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
	From (9) 15 To 9/14/15
Citizens for Donnelly	110111 4 11 11 11 11 11 11 11 11 11 11 11 1
To Whom Paid	MO DAY YEAR Amount
IACREOT	0 15 15 \$ 475.
Mailing Address POBOX 479	Description of Expanditure
City State Zip Code (Plus 4)	conference expense
Lalley for Judge	WO 25 15 \$ 175 00
Invaling Address	Description of Expenditure
City State Zip Code (Plus 4)	SUPPORT
Hansburg PA 17101-	, ,
Phillip Address - Aubonpain 2	MO: DAY YEAR Amount (1 29 15 \$ 10.32
Mailing Address	Description of Expenditure
8500 Essington Auc CIU State Zip Code (Plus 4)	Conference expense
MNUQQEIDNIA PAUGISZ	
To Whom Paid VIII age Inn #839 Mailing Address	MO. DAY YEAR AMOUNT 4.96
Mailing Address 705) TOWCRD	Description of Expenditure
705) TOWERO. State Zip Code (Plus 4)	Conference expense
Denue/ (0 80249)	`'
To Whom Paid	MO. DAY YEAR Amount
Pazzos Pail Mailing Address	MO: DAY YEAR Amount 1 29 /5 \$ 37.85 Description of Expenditure
122 E. Meadow Pr.	conference expense
Vail State Zip Code (Plus 4) CO 8/(157	
To Whom Paid,	MD. DAY YEAR Amount
Mailing Address	Description of Expenditure
City State Zip Code (Plus 4)	conference expense
UCU State Zip Code (Plus 4) CO 8/057	
To Whom Paid	MO DAY YEAR Amount
Moes Onginal	7 1 15 \$ 25.08
Mailing Address (DIC) W. CIONSHEAD (16	Description of Expenditure CONFORME EXPOSE
City State Zip Code (Plus 4)	CONTO UNE EXPENSE
Vail (0/8/1057	
MOCS Onginal	MO: DAY YEAR Amount 7 2 15 \$ 25.70
CILL W. Lanshead Cir	Description of Expenditura CONFECCION EXPENSE.
City State Zip Code (Plus 4)	CAPOIS C
UG 1 1057-	
Enter Grand Total of Expenditures on Page 1, Report Cover Page	PAGE TOTAL age, Item D. \$ \(\begin{align*}
= =	-3-, non b. ■ \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
Citizens to Obnnelly	From (19/15 to 9/14/15
To Whom Paid 34741	Mo. DAY YEAR Amount
Hailing Address 7080 Tower Kd	Description of Expanditure CONFERENCE CXICOSE,
Denuel State Zip Code (Plus 4)	
Mamott at Vail	MO: DAY YEAR Amount 39.83
Mailing Address	Description of Expenditure
715 W. UCOShead (11 City State Zip Code (Plus 4)	conference expense
Vail 10181657	
Colonial Arrport Parking	MO. DAY YEAR Amount \$ 58.50
4305. Governor Printz Blud	Description of Expenditure CONFOCOCH CXXX
State Zip Code (Plus 4) State Zip Code (Plus 4) PH 19029-	
Bill Donnelly	MO. DAY YEAR Amount \$ 13 15 \$ U 78,70
Mailing Address	Description of Expenditure
POBOX 3U7 City State Zip Code (Plus 4)	Reinbusement-travel
HOISNAM FA 19044	Conference expense
Friends of Chuck Wilson	MO: DAY YEAR Amount 7 15 15 \$ 50.00 Description of Expenditure
Meiling Address P() BOX 1 () C	Description of Expenditure Support
City State Zip Code (Pius 4)	
thends of Joe Subbio	MO. DAY YEAR Amount 10,00
Mailing Address 343 (nmbndae Rd	Description of Expenditure, Support
City State Zip Code (Plus 4)	σορροίτ
To Whom Paid	MO: DAY YEAR Amount
ETC toundotion	Pescription of Expenditure
PO BOX 1567	donation
Horsham PA 1904	
To Whom Avid NO GO (S	MO: DAY YEAR Amount 50.93
507 Hasham RO.	Description of Expenditure Mechina
State Zio Code (Plus 4)	
	PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page 1	sge, Item D. \$2,855.01

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
Citizens for Donnelly	From 49/15 To 9/14/15
Mailing Address OON. Bethlehen Pk. City State Zip Code (Plus 4)	MO. DAY YEAR AMOUNT 7.01
900 N. Bethlehem Pk.	Description of Expenditure Methog
(tmb/e/ PA 1900)	
To Whom Paid DILL DONNELLY Mailing Address	MO. DAY YEAR Amount S
PO BOX 3U7	Description of Expenditure (CIMPLYCEMENT - TYQUE)
HOSham State Zip Code (Plus 4)	Conference expense
Blue Bell Too	MO. DAY YEAR Amount S /O /5 \$ /22.87
Mailing Address (DO) W. Stippack PK State Zip Code (Plus 4)	Description of Expenditure
Blue Bell PA 19422	
Montganay Tup Republican Comm. Mailing Address	MD. DAY YEAR Amount S /O /5 \$ 90.00 Description of Expenditure
doa Dimerset (1).	Description of Expenditure SUPPULT
Capsdale State Zip Code (Plus 4) PA 1944(2)	
Enends of Larry Junes	MO. DAY YEAR Amount \$ 1/1 /5 \$ 55 UO
130 Church Rd.	Description of Expenditure SCOPOr +
	V
Committee to Elect Tom Zipfel	8 13 15 \$ (00.00)
a PIT Fischer LO.	Description of Expenditure SUDDY +
Hatfield PA 19440	
Enends of Ton Panzel	MO. DAY YEAR Amount \$ 75.00
Mailing Address TO DC City State Zip Code (Plus 4)	Description of Expenditure SUDPOIT
Obtained PA -	, ,
Cirillo fur Judge	8 21 15 \$ 35 00
Mailing Address Walthurst Rd. City State Zip Code (Plus 4)	SUPPUY F
MENUN Station PA 1906	
Enter Grand Total of Expenditures on Page 1, Report Cover Page	PAGE TOTAL \$ 1,314.36

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate		Reporting Period	, ,
Citizens for Donnelly		From 6/9/15	5 to 9/14/15
	······································		
To Whom Paid LO MINSTELL PUBLICAN COM Mailing Address PO BOX 3151 City. State	mM	MO. DAY YEAR S 35 /5 Description of Expenditure	\$ +0.00
Meiling Address	1/11/.	Description of Expenditure	
City State	Zip Code (Plus 4)	Support	
Warminster 193	18974		
Tolbert for County Commi	ssioner	MO. DAY YEAR 9 2 /5 Description of Expenditure	* /50.00
PO COX U21		Support	
Blil Bell State	Zip Code (Plus 4)	,	
To Whom Paid FOCOUS OF USA FE/MOO Mailing Address		MO: DAY YEAR Description of Expenditure	Amount 50.00
Mailing Address POBOX 704		Description of Expenditure SUPPORT	
LIPSI Chester On	10251-		
Committee to Elect Tom Zy Mailing Address 2791 Fischer Rd. State	ofe l	MO. DAY YEAR Description of Expenditure	* 150 UO
Mailing Address 79 Fischer Id		Description of Expenditure SUPPOINT	
Hatfield PA	Zip Code (Plus 4)		
To Whom Paid		MO. DAY YEAR	Amount
Frends of Bruce Casto	(, <u>) </u>	Description of Expenditure	\$ 100.00
PO BUX 1010	Zip Code (Plus 4)	Support	
Nonstown	Zip Code (Plus 4)		
Heckman for Judge		MO. DAY YEAR S /5 Description of Expenditure	* 150.00
Mailing Address 1207 Tressler Dr.		Description of Expenditure	
Fa. Washington	Zip Code (Plus 4)	<i>Soppon</i>	
In Whom Paid		MO. DAY YEAR	Amount
COST Nomton Republican	1 (OMM).	Description of Expenditure	\$ 100.00
807 Ironic Ct.		SUPPURT	
East nomtun PA	e Zip Code (Pius 4)		
To Whom Paid		MO. DAY YE .R	Amount
Mailing Address		Description of Expenditure	\$
City Stat	e Zip Code (Plus 4)		
	-		
Enter Grand Total of Expenditures on Page 1	Report Cover P	age Item D	PAGE TOTAL \$ X√() °°

1000