

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: ▶		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)	5TH TUESDAY PRE-PRIMARY ^{1.}	2ND FRIDAY PRE-PRIMARY ^{2.} <input checked="" type="checkbox"/>	30 DAY POST PRIMARY ^{3.}	AMENDMENT REPORT?	YES	NO <input checked="" type="checkbox"/>
	8TH TUESDAY PRE-ELECTION ^{4.}	2ND FRIDAY PRE-ELECTION ^{5.}	30 DAY POST ELECTION ^{6.}	TERMINATION REPORT?	YES	NO <input checked="" type="checkbox"/>
	ANNUAL REPORT ^{7.}	YEAR: 2019	FILING METHOD () CHECK ONE ▶		PAPER <input checked="" type="checkbox"/>	DISKETTE
Name of Office Sought by Candidate:				DATE OF ELECTION		District Number
				MO. DAY YEAR		
				5 21 2019	46	
					Party Code REP	County Code 46
(SEE INSTRUCTIONS FOR CODES)						
Summary of Receipts and Expenditures from: ▶			MO. DAY YEAR	To	MO. DAY YEAR	FOR OFFICE USE ONLY
			4 2 2019		5 6 2019	RECEIVED OFFICE OF VOTER SERVICES MONTG. CO. PA 2019 MAY -8 PM 1:04
A. Amount Brought Forward From Last Report			\$ 19850.80			
B. Total Monetary Contributions and Receipts (From Schedule I)			\$ 0			
C. Total Funds Available (Sum of Lines A and B)			\$ 19850.80			
D. Total Expenditures (From Schedule III)			\$ 814.15			
E. Ending Cash Balance (Subtract Line D from Line C)			\$ 19042.65			
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

COMMONWEALTH OF PENNSYLVANIA day of 19 NOTARIAL SEAL Michelle C. Sepilyeda, Notary Public Notary Public, Montgomery County My Commission Expires Sept. 30, 2019 MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES My commission expires 19 MO. DAY YR.	Signature of Person Submitting Report Louis Spino Printed Name 215 850.8429 Area Code Daytime Telephone Number
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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

COMMONWEALTH OF PENNSYLVANIA day of 19 NOTARIAL SEAL Michelle C. Sepilyeda, Notary Public Notary Public, Montgomery County My Commission Expires Sept. 30, 2019 MEMBER, PENNSYLVANIA ASSOCIATION OF NOTARIES My commission expires 19 MO. DAY YR.	Signature of Candidate William E. Donnelly Printed Name 215 343.4806 Area Code Daytime Telephone Number
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CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate Citizens for Donnelly	Reporting Period From 4/2/19 To 5/10/19
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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)	\$ 0
TOTAL for the Reporting Period (2)	\$ 0

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

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.)	\$ 0
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**SCHEDULE III
STATEMENT OF EXPENDITURES**

Name of Filing Committee or Candidate Citizens for Donnelly	Reporting Period From 4/2/19 To 5/16/19
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To Whom Paid USPS	MO. 4	DAY 8	YEAR 19	Amount \$ 7.45
Mailing Address 575 Hursham Rd - 038				
Description of Expenditure postage				
City Horsham	State PA	Zip Code (Plus 4) 19044		

To Whom Paid Camp Rainbow	MO. 4	DAY 9	YEAR 19	Amount \$ 250.00
Mailing Address 489 Clemmers Mill Rd.				
Description of Expenditure Support/Event				
City Schwenksville	State PA	Zip Code (Plus 4) 19473		

To Whom Paid Brown Paper Tickets	MO.	DAY	YEAR	Amount \$ 56.70
Mailing Address 200 Nickerson St.				
Description of Expenditure Support/Event				
City Seattle	State WA	Zip Code (Plus 4) 98109		

To Whom Paid RCymn	MO. 5	DAY 1	YEAR 19	Amount \$ 250.00
Mailing Address 90 Cricket Ave.				
Description of Expenditure Support/Event				
City Ardmore	State PA	Zip Code (Plus 4) 19003		

To Whom Paid mcc	MO. 5	DAY 1	YEAR 19	Amount \$ 250.00
Mailing Address 600 Kenlyn Blue Bell Pl #240				
Description of Expenditure Support/Event				
City Blue Bell	State PA	Zip Code (Plus 4) 19422		

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
\$ 814.15