

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: 2006456	Report Filed By: CANDIDATE	1.	COMMITTEE	2.	X	LOBBYIST	3.
Name of Filing Committee, Candidate or Lobbyist: DONATUCCI 2015 COMMITTEE							
Street Address: 1504 S. BROAD STREET							
City: PHILADELPHIA				State: PA		Zip Code: 19146-4856	
TYPE OF REPORT	6th Tuesday Pre-Primary	1.	2nd Friday Pre-Primary	2.	30 Day Post Primary	3.	X
	6th Tuesday Pre-Election	4.	2nd Friday Pre-Election	5.	30 Day Post Election	6.	
	Annual Report	7.	YEAR	2018			
				Amendment Report?	YES	NO	X
				Termination Report?	YES	NO	X

Name of Office Sought by Candidate: Register of Wills	DATE OF ELECTION	District Number: 51	Office Code: PH6	Party Code: DEM	County Code: 51
	MO. DAY YEAR				
	5 15 2018				

Summary of Receipts and Expenditures from:	MO. DAY YEAR	To	MO. DAY YEAR	FOR OFFICE USE ONLY
	5 1 2018		6 4 2018	
A. Amount Brought Forward From Last Report	\$ 20,442.30			COUNTY ID. OF ELECTIONS 2018 JUN 14 P 1:21 CITY COMMISSIONERS
B. Total Monetary Contributions and Receipts (From Schedule I)	\$ 2,000.00			
C. Total Funds Available (Sum of Lines A and B)	\$ 22,442.30			
D. Total Expenditures (From Schedule III)	\$ 8,975.22			
E. Ending Cash Balance (Subtract Line D from Line C)	\$ 13,467.08			
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
 13th day of JUNE 20 18

Signature: *John F. Raimondi*
 Signature of Person Submitting Report
 JOHN F. RAIMONDI, ESQ.
 Printed Name
 (215) 636-9950
 Area Code Daytime Telephone Number

Signature: *Douglas J. Nesmith*
 Signature
 COMMONWEALTH OF PENNSYLVANIA
 NOTARIAL SEAL
 DOUGLAS J. NESMITH, Notary Public
 City of Philadelphia, Phila. County
 My Commission Expires December 22, 2018

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
 13th day of JUNE 20 18

Signature: *Ronald R. Donatucci*
 Signature of Candidate
 RONALD R. DONATUCCI, ESQ.
 Printed Name
 (215) 686-6250
 Area Code Daytime Telephone Number

Signature: *Douglas J. Nesmith*
 Signature
 COMMONWEALTH OF PENNSYLVANIA
 NOTARIAL SEAL
 DOUGLAS J. NESMITH, Notary Public
 City of Philadelphia, Phila. County
 My Commission Expires December 22, 2018

SCHEDULE I
Contributions And Receipts

Detailed Summary Page

Name of Filing Committee or Candidate DONATUCCI 2015 COMMITTEE	Reporting Period From <u>05/01/2018</u> To <u>06/04/2018</u>
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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)	\$ 2,000.00
All Other Contributions (Part D)	\$ 0
TOTAL for the Reporting Period (3)	\$ 2,000.00
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.)	\$ 2,000.00

Part A

Contributions Received From Political Committees

\$50.01 TO \$250.00

Use this Part to itemize only contributions received from political committees with an aggregate value from \$50.01 to \$250.00 in the reporting period.

Name of Filing Committee or Candidate DONATUCCI 2015 COMMITTEE			Reporting Period From 05/01/2018 To 06/04/2018		
Full Name of Contributing Committee			MO.	DAY	YEAR
Mailing Address					
City	State	Zip Code (Plus 4)			
Full Name of Contributing Committee			MO.	DAY	YEAR
Mailing Address					
City	State	Zip Code (Plus 4)			
Full Name of Contributing Committee			MO.	DAY	YEAR
Mailing Address					
City	State	Zip Code (Plus 4)			
Full Name of Contributing Committee			MO.	DAY	YEAR
Mailing Address					
City	State	Zip Code (Plus 4)			
Full Name of Contributing Committee			MO.	DAY	YEAR
Mailing Address					
City	State	Zip Code (Plus 4)			
Full Name of Contributing Committee			MO.	DAY	YEAR
Mailing Address					
City	State	Zip Code (Plus 4)			
Full Name of Contributing Committee			MO.	DAY	YEAR
Mailing Address					
City	State	Zip Code (Plus 4)			
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.					Part A Total

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 DONATUCCI 2015 COMMITTEE			Reporting Period From <u>05/01/2018</u> To <u>06/04/2018</u>		
Full Name of Contributor			MO.	DAY	YEAR
Mailing Address					
City	State	Zip Code (Plus 4)			
Full Name of Contributor			MO.	DAY	YEAR
Mailing Address					
City	State	Zip Code (Plus 4)			
Full Name of Contributor			MO.	DAY	YEAR
Mailing Address					
City	State	Zip Code (Plus 4)			
Full Name of Contributor			MO.	DAY	YEAR
Mailing Address					
City	State	Zip Code (Plus 4)			
Full Name of Contributor			MO.	DAY	YEAR
Mailing Address					
City	State	Zip Code (Plus 4)			
Full Name of Contributor			MO.	DAY	YEAR
Mailing Address					
City	State	Zip Code (Plus 4)			
Full Name of Contributor			MO.	DAY	YEAR
Mailing Address					
City	State	Zip Code (Plus 4)			
Enter Grand Total of Part B on Schedule I, Detailed Summary Page, Section 2.					Part B Total

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 DONATUCCI 2015 COMMITTEE				Reporting Period From <u>05/01/2018</u> To <u>06/04/2018</u>			
Full Name of Contributing Committee LOCAL UNION #98 I.B.E.W. COMMITTEE on POLITICAL EDUCA!				MO.	DAY	YEAR	\$ 2,000.00
				5	22	2018	
Mailing Address 1719 Spring Garden Street							
City Philadelphia		State PA	Zip Code (Plus 4) 19130				
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.							
Part C Total							\$ 2,000.00

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 DONATUCCI 2015 COMMITTEE			Reporting Period From <u>05/01/2018</u> To <u>06/04/2018</u>		
Full Name of Contributor					MO. DAY YEAR
Mailing Address					
City		State	Zip Code (Plus 4)		
Employer Name			Occupation		
Employer Mailing Address/Principal Place of Business					
Full Name of Contributor					MO. DAY YEAR
Mailing Address					
City		State	Zip Code (Plus 4)		
Employer Name			Occupation		
Employer Mailing Address/Principal Place of Business					
Full Name of Contributor					MO. DAY YEAR
Mailing Address					
City		State	Zip Code (Plus 4)		
Employer Name			Occupation		
Employer Mailing Address/Principal Place of Business					

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

Part D Total

Part E Other Receipts

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.

Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate DONATUCCI 2015 COMMITTEE			Reporting Period From <u>05/01/2018</u> To <u>06/04/2018</u>		
Full Name			MO.	DAY	YEAR
Mailing Address					
City	State	Zip Code (Plus 4)			
Receipt Description					
Full Name			MO.	DAY	YEAR
Mailing Address					
City	State	Zip Code (Plus 4)			
Receipt Description					
Full Name			MO.	DAY	YEAR
Mailing Address					
City	State	Zip Code (Plus 4)			
Receipt Description					
Full Name			MO.	DAY	YEAR
Mailing Address					
City	State	Zip Code (Plus 4)			
Receipt Description					
Full Name			MO.	DAY	YEAR
Mailing Address					
City	State	Zip Code (Plus 4)			
Receipt Description					

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

Part E Total

SCHEDULE II

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 DONATUCCI 2015 COMMITTEE	Reporting Period From <u>05/01/2018</u> To <u>06/04/2018</u>
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1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR

TOTAL for the Reporting Period (1)	\$	0
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2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)

TOTAL for the Reporting Period (2)	\$	0
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3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250 (FROM PART G)

TOTAL for the Reporting Period (3)	\$	0
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TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1, 2 and 3; also enter this amount on Page 1, Report Cover Page, Item F.	\$	0
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SCHEDULE II
Part F
In-kind Contributions Received
VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate DONATUCCI 2015 COMMITTEE			Reporting Period From <u>05/01/2018</u> To <u>06/04/2018</u>		
Full Name of Contributor			MO.	DAY	YEAR
Mailing Address					
City		State	Zip Code (Plus 4)		
Description of Contribution					
Full Name of Contributor			MO.	DAY	YEAR
Mailing Address					
City		State	Zip Code (Plus 4)		
Description of Contribution					
Full Name of Contributor			MO.	DAY	YEAR
Mailing Address					
City		State	Zip Code (Plus 4)		
Description of Contribution					
Full Name of Contributor			MO.	DAY	YEAR
Mailing Address					
City		State	Zip Code (Plus 4)		
Description of Contribution					
Full Name of Contributor			MO.	DAY	YEAR
Mailing Address					
City		State	Zip Code (Plus 4)		
Description of Contribution					

Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.

Part F Total

SCHEDULE II

Part G

In-kind Contributions Received

VALUE OVER \$250.00

Name of Filing Committee or Candidate DONATUCCI 2015 COMMITTEE			Reporting Period From <u>05/01/2018</u> To <u>06/04/2018</u>		
Full Name of Contributor			MO.	DAY	YEAR
Mailing Address					
City	State	Zip Code (Plus 4)			
Employer of Contributor			Occupation		
Employer Mailing Address/Principal Place of Business			Description of Contribution		
Full Name of Contributor			MO.	DAY	YEAR
Mailing Address					
City	State	Zip Code (Plus 4)			
Employer of Contributor			Occupation		
Employer Mailing Address/Principal Place of Business			Description of Contribution		
Full Name of Contributor			MO.	DAY	YEAR
Mailing Address					
City	State	Zip Code (Plus 4)			
Employer of Contributor			Occupation		
Employer Mailing Address/Principal Place of Business			Description of Contribution		

Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.

Part G Total

SCHEDULE III
Statement Of Expenditures

Name of Filing Committee or Candidate DONATUCCI 2015 COMMITTEE			Reporting Period From <u>05/01/2018</u> To <u>06/04/2018</u>			
To Whom Paid GM FINANCIAL LEASING			MO.	DAY	YEAR	\$ 795.50
			5	11	2018	
Mailing Address 75 Remittance Drive - Suite 1738						
City Chicago		State IL	Zip Code (Plus 4) 60675-1738			
Description of Expenditure Car Expenses (Lease, Insurance, etc.)						
To Whom Paid CARD MEMBER SERVICES (CHASE)			MO.	DAY	YEAR	\$ 3,000.00
			5	14	2018	
Mailing Address P.O. Box 15153						
City Wilmington		State DE	Zip Code (Plus 4) 19886-5153			
Description of Expenditure Charitable Contribution (MGH)						
To Whom Paid COMMITTEE to ELECT JONATHAN J.R.ROWANS			MO.	DAY	YEAR	\$ 500.00
			5	14	2018	
Mailing Address 1816 South 2nd Street						
City Philadelphia		State PA	Zip Code (Plus 4) 19148-1935			
Description of Expenditure Contribution						
To Whom Paid RONALD R. DONATUCCI			MO.	DAY	YEAR	\$ 2,000.00
			5	14	2018	
Mailing Address 1504 S. Broad Street						
City Philadelphia		State PA	Zip Code (Plus 4) 19146-4856			
Description of Expenditure ELECTION DAY EXPENSES (GOTV)						
To Whom Paid JULIA PEREZ			MO.	DAY	YEAR	\$ 350.00
			5	9	2018	
Mailing Address 1628 South 20th Street						
City Philadelphia		State PA	Zip Code (Plus 4) 19145			
Description of Expenditure Cleaning of 1615 Porter Street (Ward Hdqtrs.)						
To Whom Paid COMCAST XFINITY			MO.	DAY	YEAR	\$ 50.97
			5	27	2018	
Mailing Address P.O. Box 3001						
City Southeastern		State PA	Zip Code (Plus 4) 19398-3001			
Description of Expenditure Service to 1615 Porter Street (Ward Hdqtrs.)						

SCHEDULE III
Statement Of Expenditures

Name of Filing Committee or Candidate DONATUCCI 2015 COMMITTEE			Reporting Period From <u>05/01/2018</u> To <u>06/04/2018</u>			
To Whom Paid SOUTH PHILADELPHIA LIONS CLUB			MO. 5	DAY 27	YEAR 2018	\$ 100.00
Mailing Address 1109 Childs Avenue c/o Rita R. DiAntonio						
City Drexel Hill		State PA	Zip Code (Plus 4) 19026			
Description of Expenditure Contribution						
To Whom Paid VERIZON			MO. 5	DAY 27	YEAR 2018	\$ 31.92
Mailing Address P.O. Box 15124						
City Albany		State NY	Zip Code (Plus 4) 12212-5124			
Description of Expenditure Service to 1615 Porter Street (Ward Hdqtrs.)						
To Whom Paid AMERICAN EXPRESS			MO. 5	DAY 29	YEAR 2018	\$ 151.45
Mailing Address P.O. Box 15026						
City Albany		State NY	Zip Code (Plus 4) 12212-5026			
Description of Expenditure Miscellaneous Campaign Expense Reimbursement						
To Whom Paid CARD MEMBER SERVICES (CHASE)			MO. 5	DAY 27	YEAR 2018	\$ 1,995.38
Mailing Address P.O. Box 15153						
City Wilmington		State DE	Zip Code (Plus 4) 19886-5153			
Description of Expenditure Miscellaneous Campaign Expense Reimbursement						
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						
Schedule III Total \$ 8,975.22						

SCHEDULE IV

Statement Of Unpaid Debts

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period.

Name of Filing Committee or Candidate DONATUCCI 2015 COMMITTEE					Reporting Period From 05/01/2018 To 06/04/2018			
Name of Creditor							Outstanding Balance of Debt	
Mailing Address					Date Debt Incurred	MO.	DAY	YEAR
City			State	Zip Code (Plus 4)				
Description of Debt								
Name of Creditor							Outstanding Balance of Debt	
Mailing Address					Date Debt Incurred	MO.	DAY	YEAR
City			State	Zip Code (Plus 4)				
Description of Debt								
Name of Creditor							Outstanding Balance of Debt	
Mailing Address					Date Debt Incurred	MO.	DAY	YEAR
City			State	Zip Code (Plus 4)				
Description of Debt								
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							Schedule IV Total	

Commonwealth of Pennsylvania
Campaign Finance Statement

File this in lieu of a full report *only if* aggregate receipts, expenditures, or liabilities incurred each did not exceed \$250.00 during the reporting period.

Filer Identification Number: 2006456	Report Filed On Behalf of: CANDIDATE 1. <input checked="" type="checkbox"/>	COMMITTEE 2. <input type="checkbox"/>	LOBBYIST 3. <input type="checkbox"/>												
Name of Filing Committee, Candidate or Lobbyist: RONALD R. DONATUECI, ESQ															
Street Address: 1504 S. BROAD STREET															
City: PHILADELPHIA		State: PA	Zip Code: 19146-4856												
TYPE OF REPORT (Check One)	Name of Office Sought by Candidate: Register of Wills		District No. 51												
			Party DEM												
		DATE OF ELECTION													
		MO. DAY YEAR													
		5 15 2018													
6th Tuesday Pre-Primary 1.			FOR OFFICE USE ONLY 2018 JUN 14 P 1:23 CITY COMMISSIONERS												
2nd Friday Pre-Primary 2.															
30 Day Post Primary 3. <input checked="" type="checkbox"/>															
6th Tuesday Pre-Election 4.															
2nd Friday Pre-Election 5.															
30 Day Post Election 6.															
Annual Report 7.															
Dates of Reporting Period		<table border="1" style="display:inline-table; margin-right:10px;"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>5</td><td>1</td><td>2018</td></tr> </table> To <table border="1" style="display:inline-table;"> <tr><th>MO.</th><th>DAY</th><th>YEAR</th></tr> <tr><td>6</td><td>4</td><td>2018</td></tr> </table>		MO.	DAY	YEAR	5	1	2018	MO.	DAY	YEAR	6	4	2018
MO.	DAY	YEAR													
5	1	2018													
MO.	DAY	YEAR													
6	4	2018													
Cash Balance At End Of Reporting Period: \$		0													
Total Amount of Filer's Outstanding Debts or Liabilities At End Of Reporting Period: \$		0													
Amendment Report? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>															
Termination Report? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>															

AFFIDAVIT SECTION

PART I -

If statement is filed on behalf of a Political Committee or Candidates's Committee, the Treasurer must sign here.
 If statement is filed on behalf of a Candidate, the Candidate must sign here.
 If statement is filed on behalf of a Contributing Lobbyist, the Lobbyist must sign here.

I swear (or affirm) that the aggregate receipts or disbursements or liabilities incurred during the reporting period indicated above did not exceed two hundred and fifty dollars (\$250.00) and this report is, to the best of my knowledge and belief, true, correct and complete.

Sworn to and subscribed before me this

13th day of JUNE 20 18

Donald J. Novak
 Signature

Signature of Person Submitting Report

My commission expires _____
 MO. **DOUGLAS J. NESMITH, Notary Public**
 City of Philadelphia, Phila. County
 My Commission Expires December 22, 2018

RONALD R. DONATUECI, ESQ
 Printed Name
(215) 680-6250
 Area Code Daytime Telephone Number

PART II -

If statement is filed on behalf of Candidate's Authorized Committee, the Candidate must 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

_____ day of _____ 20 _____

 Signature
 My commission expires _____
 MO. DAY YEAR

 Signature of Candidate

 Printed Name

 Area Code Daytime Telephone Number