Campaign Finance Report

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

Filer Identificati Number :	on 2002	088				oort		CAND	IDATE		СОММ	1ITTEE	TEE / LOBBYIST				
Name of Filing C	Committee, Candid	ate or Lo	obbyist:		FRIE	ND	S OF	BERNIE	O'NEIL	L.	<u> </u>						
Street Address:	50 DORSETT	CIRCLE															
City:	WARMINSTER							State:	PA			Zip Cod	le: 18	3974			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	Y PRE	- 2	2. X	30 DA PRIMA		POST-	3.		AMENDM REPORT?		Yes	No	\	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	y pre	≣- !	5.	30 DA		POST-	6.		TERMINA REPORT?		Yes	No	\	
report type)	ANNUAL REPORT	7.	Year 2014					NG METH CHECK C				PAPER		\checkmark	DISKE	TTE	
Name of Office S	- Sought by Candida	te:						DATE (OF ELE	CTI	ON	District Number	Office Code	Par	ty Code	County	
								МО	DAY	Υ	EAR	Number	Couc			Couc	
								11	L	4	2014		(SEE IN	ISTRUCTIO	ONS FOR C	ODES)	
	Receipts and	МО	DAY	YEAR	ł			МО	DAY	Y	EAR	FO	R OFFI	CE USE	ONLY		
Expenditures	from:		4 1	2	014	Т	0	Ţ	5	5	2014						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$			45,	618.93						
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule	1)	\$				0.00						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$	\$ 45,618.93									
D. Total Expen	ditures (From Scho	edule II	I)				\$			13,	285.20						
E. Ending Cash	Balance (Subtract	Line D	From Line (C)			\$			32,	333.73						
F. Value Of In-	Kind Contributions	Receiv	ed (From So	chedu	le II)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$				0.00			•			
				AFF	IDA	١٧٧	ΓSE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign l	nere. :	If th	is is	a Car	ndidate r	eport,	candi	idate sig	ın here.					
I swear (or affirm) correct and comple) that this report, incl ete.	uding the	attached sch	nedule	s filed	d on	paper	or by elec	tronic m	ediun	ı, are to t	he best o	f my kno	wledge a	and belie	ef , true	
Sworn to and subs	cribed before me this day of	:	20								Signature	of Perso	n Submit	ting Rep	ort		
	Signatu	ra					-					Prin	ted Name	e			
My Commission Ex	_											Ema	il				
	мо	D	AY	YR					Ar	ea Co	de	Daytim	e Telepi	none Nu	mber		
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nitte	e, C	andid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and beli	ef this	polit	ical	comm	ittee has	not viola	ited a	ny provisi	ions of the	e act of J	une 3,19	937 (P.L.	1333,	
Sworn to and subso	ribed before me this										Si	ignature o	of Candid	ate			
	day of		_ 20				_					Printe	d Name				
	Signature						-										
My Commission Exp	-											Ema	il				
	МО	D	AY	YR	l		•		Area	Code		Da	aytime T	elephon	e Numbe	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF BERNIE O'NEILL	From:	4/1/201	<u>4</u> To:	<u>5/5/2014</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	J Period	(1)	\$	0.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	0.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	y Period	(2)	\$	0.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	0.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	y Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00

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 Committe	e or Candidate		Re	eporting	Period			
			Fr	om:		То	:	
					DATE			AMOUNT
Full Name of Contributing	Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	5 4)					

PAGE TOTAL
0.00

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

0.00

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	e or Candidate		Rep	orting P	eriod			
			Fro	m:		To):	
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
								PAGE 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 from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate			Reporting	Period				
			From:			То:		
				DA	TE		A	MOUNT
Full Name of Contributing Committee				МО	DAY	YEAR	\$	0.00
Mailing Address							7 *	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	lule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00

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			Rep	orting Pe	riod			
			Fron	n:		т	o:	
				D	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac	e of Business	City		•	State		Zip	Code (Plus 4)
Enter Grand Total of Part C on Schee	dule I, Detailed Su	ımmary Page,	Section	on 3.			\$	PAGE TOTAL 0.00
							т	0.00

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		Report	ing Peri	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address	_						\neg	
City	State	Zip Code (Plus 4)					
Receipt Description	•	•		•	•	•	•	
			.	_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page,	Section	4.			\$	0.00

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	Reporting Period	l	
FRIENDS OF BERNIE O'NEILL	From:	<u>4/1/2014</u> To:	<u>5/5/2014</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Car	ndidate		Reportin	g Period				
			From:			To	:	
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•		•	•		•		
					-			
Enter Grand Total of Part F o	n Schedule II, In-Ki	nd Contributions Detai	led Sun	mary Pa	ge,		PAGE TOTAL	•
Section 2.						\$	(0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address									\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	ation				
Employer Mailing Address/Principal Plac	e of Business	City	′	Stat	e Zip	Code(Plus 4)	Desci	ript	ion of Contribution	on
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	ontributions De	etaile	ed				PAGE TO	ΓAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Per	riod		
FRIENDS OF BERNIE O'NEILL	From	4/1/2014	То:	<u>5/5/2014</u>

		L					
				DATE			AMOUNT
To Whom Paid			мо	DAY	YEAR		
WARMINSTER REPUBLICAN (CLUB		1-10				
Mailing Address PO. BOX	2313		1	26	2014	\$	100.00
City WARMINSTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	18974	WINTER	BLAST			
To Whom Paid			мо	DAY	YEAR		
LINDA ONEILL			MO		ILAK		
Mailing Address 50 DORSI	ETT CIRCLE					\$	100.00
City WARMINSTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	18974	REIMBU	RSEMENT	EXPENSE	S	
To Whom Paid			мо	DAY	YEAR		
LINDA O'NEILL			MO	DAT	TEAR		
Mailing Address 50 DORSI	ETT CIRCLE		2	19	2014	\$	97.94
City WARMINSTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	l	
	PA	18974	REIMBU	RSEMENT	COPIES,	/ STAMPS	
To Whom Paid	·	<u>.</u>					
HALLOWELL & amp; BRANSTI	ETTER		МО	DAY	YEAR		
Mailing Address 3031 LOG	GAN ST.		2	28	2014	\$	10,000.00
City CAMP HILL	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	I	
	PA	17011	CONSU	_TING SER	VICES 20	014	
To Whom Paid				DAY	YEAR		
					IILAN	1	
			МО				
LINDA ONEILL	ETT CIRCLE		3	1	2014	\$	100.00
LINDA ONEILL	ETT CIRCLE State	Zip Code (Plus 4)	3	1		\$	100.00
LINDA ONEILL Mailing Address 50 DORSI		Zip Code (Plus 4) 18974	3 Descript		enditure		
LINDA ONEILL Mailing Address 50 DORSI	State		3 Descript CERTIFI	tion of Exp	enditure		
LINDA ONEILL Mailing Address 50 DORSI City WARMINSTER To Whom Paid	State		3 Descript	tion of Exp	enditure		
LINDA ONEILL Mailing Address 50 DORSI City WARMINSTER	State PA		3 Descript CERTIFI	tion of Exp	enditure		
LINDA ONEILL Mailing Address 50 DORSI City WARMINSTER To Whom Paid BUCKS CO. G.O.P.	State PA		3 Descript CERTIFI MO	tion of Exp	enditure TO FILE YEAR 2014	PETITION	1,500.00

BERNIE O NEILL							• •	AGE 12
Mailing Address 50 DORSETT CIRCLE	To Whom Paid			МО	DAY	YEAR		
City WARMINSTER State Zip Code (Plus 4) Description of Expenditure REIMBURSEMENT TO Whom Paid LINDA ONEILL Mo DAY YEAR FOOD, CARDS / STAMPS - THANK YOU YEAR State Zip Code (Plus 4) Description of Expenditure REIMBURSEMENT - FOOD, CARDS / STAMPS - THANK YOU TO Whom Paid BOWMAN HILL WILDFLOWER PRESERVE Mo DAY YEAR State Zip Code (Plus 4) Description of Expenditure REIMBURSEMENT - FOOD, CARDS / STAMPS - THANK YOU TO Whom Paid State Zip Code (Plus 4) Description of Expenditure PA 18938 DONATION TO Whom Paid BERNIE ONEILL Mailing Address 50 DORSETT CIRCLE 4 26 2014 \$ 500.00 To Whom Paid BERNIE ONEILL Mo DAY YEAR TO WHOM Paid BERNIE ONEILL Mailing Address 50 DORSETT CIRCLE 4 26 2014 \$ 79.43 TO WHOM PAID TO WHOM PA	BERNIE O NEILL							
TO Whom Paid LINDA ONEILL Mailing Address 50 DORSETT CIRCLE State PA 18974 PEAR PEIMBURSEMENT TO Whom Paid BOWMAN HILL WILDFLOWER PRESERVE Mailing Address BOX 685 1635 RIVER RD City NEW HOPE State PA 18938 BOX 685 1635 RIVER RD To Whom Paid BERNIE ONEILL Mailing Address 50 DORSETT CIRCLE State Zip Code (Plus 4) Description of Expenditure PA 18938 DONATION TO Whom Paid BERNIE ONEILL Mailing Address 50 DORSETT CIRCLE State Zip Code (Plus 4) DONATION To Whom Paid BERNIE ONEILL Mailing Address 50 DORSETT CIRCLE State Zip Code (Plus 4) Description of Expenditure PA 18938 DONATION To Whom Paid BERNIE ONEILL Mailing Address 50 DORSETT CIRCLE State Zip Code (Plus 4) Description of Expenditure PA 18974 PA 18974 PAGE TOTAL PAGE TOTAL	Mailing Address 50 DORSETT CIRCLE			4	10	2014	\$	744.11
To Whom Paid LINDA ONEILL Mailing Address 50 DORSETT CIRCLE	City WARMINSTER	State	Zip Code (Plus 4)	Description of Expenditure				
LINDA ONEILL Mailing Address 50 DORSETT CIRCLE 4 10 2014 \$ 63.72 City WARMINSTER State PA 18974 Description of Expenditure REIMBURSEMENT - FOOD, CARDS / STAMPS - THANK YOU TO Whom Paid BOWMAN HILL WILDFLOWER PRESERVE Mailing Address BOX 685 1635 RIVER RD 4 26 2014 \$ 500.00 City NEW HOPE State Zip Code (Plus 4) Description of Expenditure DONATION TO Whom Paid BERNIE ONEILL Mailing Address 50 DORSETT CIRCLE 4 26 2014 \$ 79.43 City WARMINSTER State Zip Code (Plus 4) Description of Expenditure DONATION TO WHOM Paid BERNIE ONEILL Mailing Address 50 DORSETT CIRCLE 4 26 2014 \$ 79.43 City WARMINSTER State Zip Code (Plus 4) Description of Expenditure REIMBURSEMENT STAPLES - OFFICE SUP PAGE TOTAL PAGE TOTAL		PA	18974	REIMBURSEMENT				
City WARMINSTER State PA 18974 To Whom Paid BOWMAN HILL WILDFLOWER PRESERVE Mailing Address BOX 685 1635 RIVER RD City NEW HOPE State PA 18938 MO DAY YEAR State Zip Code (Plus 4) Description of Expenditure PA 18938 DONATION To Whom Paid BERNIE ONEILL MO DAY YEAR State Zip Code (Plus 4) Description of Expenditure PA 18938 MO DAY YEAR MO DAY YEAR State Zip Code (Plus 4) Description of Expenditure PA 18938 DONATION To Whom Paid BERNIE ONEILL Mo DAY YEAR State Zip Code (Plus 4) Description of Expenditure PA 18938 State PA 18938 MO DAY YEAR MO DAY YEAR BERNIE ONEILL MILL STATE STAPLES - OFFICE SUP PAGE TOTAL PAGE TOTAL	To Whom Paid LINDA ONEILL			мо	DAY	YEAR		
TO Whom Paid BOWMAN HILL WILDFLOWER PRESERVE Mailing Address BOX 685 1635 RIVER RD City NEW HOPE State Zip Code (Plus 4) Description of Expenditure PA 18938 DONATION TO Whom Paid BERNIE ONEILL Mailing Address 50 DORSETT CIRCLE City WARMINSTER State Zip Code (Plus 4) Description of Expenditure PA 18938 DONATION To Whom Paid BERNIE ONEILL Mailing Address 50 DORSETT CIRCLE Lip Code (Plus 4) Description of Expenditure PA 18974 Description of Expenditure REIMBURSEMENT STAPLES - OFFICE SUP PAGE TOTAL PAGE TOTAL	Mailing Address 50 DORSETT CIRCLE			4	10	2014	\$	63.72
TO Whom Paid BOWMAN HILL WILDFLOWER PRESERVE Mailing Address BOX 685 1635 RIVER RD City NEW HOPE State Zip Code (Plus 4) Description of Expenditure PA 18938 DONATION TO Whom Paid BERNIE ONEILL Mailing Address 50 DORSETT CIRCLE City WARMINSTER State Zip Code (Plus 4) Description of Expenditure PA 18974 Description of Expenditure PA 26 2014 \$ 79.43	City WARMINSTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	ı	
BOWMAN HILL WILDFLOWER PRESERVE Mailing Address BOX 685 1635 RIVER RD City NEW HOPE State Zip Code (Plus 4) Description of Expenditure PA 18938 DONATION To Whom Paid BERNIE ONEILL Mailing Address 50 DORSETT CIRCLE City WARMINSTER State Zip Code (Plus 4) Description of Expenditure PA 18974 Description of Expenditure REIMBURSEMENT STAPLES - OFFICE SUP PAGE TOTAL PAGE TOTAL		PA	18974					
Mailing Address BOX 685 1635 RIVER RD 4 26 2014 \$ 500.00 City NEW HOPE State PA 18938 DONATION To Whom Paid BERNIE ONEILL Mailing Address 50 DORSETT CIRCLE 4 26 2014 \$ 79.43 City WARMINSTER State PA 18974 REIMBURSEMENT STAPLES - OFFICE SUP PAGE TOTAL PAGE TOTAL	To Whom Paid			мо	DAY	YFAR		
City NEW HOPE State Zip Code (Plus 4) Description of Expenditure PA 18938 DONATION To Whom Paid BERNIE ONEILL Mailing Address 50 DORSETT CIRCLE 4 26 2014 \$ 79.43 City WARMINSTER State Zip Code (Plus 4) Description of Expenditure PA 18974 REIMBURSEMENT STAPLES - OFFICE SUP PAGE TOTAL PAGE TOTAL	BOWMAN HILL WILDFLOWER PRESERVE			1-10		I Z/IIX		
To Whom Paid BERNIE ONEILL Mailing Address 50 DORSETT CIRCLE State PA 18974 Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. PA 18938 DONATION MO DAY YEAR 4 26 2014 \$ 79.43 PAGE TOTAL	Mailing Address BOX 685 1635 RIVER RD			4	26	2014	\$	500.00
To Whom Paid BERNIE ONEILL Mailing Address 50 DORSETT CIRCLE State Zip Code (Plus 4) Description of Expenditure PA 18974 REIMBURSEMENT STAPLES - OFFICE SUP PAGE TOTAL PAGE TOTAL	City NEW HOPE	State	Zip Code (Plus 4)	Description of Expenditure				
BERNIE ONEILL Mailing Address 50 DORSETT CIRCLE State PA 18974 PA PA PAGE TOTAL PAGE TOTAL PAGE TOTAL		PA	18938	DONATION				
City WARMINSTER State PA 18974 PA PA PA PA PA PA PA PA PA P	To Whom Paid BERNIE ONEILL			мо	DAY	YEAR		
PA 18974 REIMBURSEMENT STAPLES - OFFICE SUP PAGE TOTAL Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.	Mailing Address 50 DORSETT CIRCLE			4	26	2014	\$	79.43
PAGE TOTAL Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.	City WARMINSTER	State	Zip Code (Plus 4)	Description of Expenditure				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.		PA	18974	REIMBURSEMENT STAPLES - OFFICE SUP				
								PAGE TOTAL
I .	Enter Grand Total of Expenditure	s on Page 1, Re	eport Cover Page, Item D	•			\$	13,285.20