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 :	i on 20	02088			Report Filed B		CANDI	DATE	COM	IMITTEE	✓	LOBE	BYIST	
Name of Filing C	Committee, Cano	lidate or L	obbyist:			-	BERNIE (D'NEILL						
Street Address:	50 DORSET	T CIRCLE												
City:	WARMINST	ER					State:	PA		Zip Co	de: 18	974		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2.	30 DA PRIMA		POST-	3.		AMENDMENT REPORT?		No	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION				AY F FION	POST-	6.		TERMINATION REPORT?		No	\checkmark
report type)	ANNUAL REPO	RT 7. X	Year 2014				NG METHO			PAPER		\checkmark	DISKE	TTE
Name of Office S	L Sought by Candi	date:					DATE O	F ELEC	TION	District Number		Par	ty Code	County Code
							мо	DAY	YEAR					
							11		4 201	4	(SEE INS	STRUCTIO	ONS FOR (CODES)
	Receipts and	мо	DAY	YEAR			мо	DAY	YEAR	F	OR OFFIC	E USE	ONLY	
Expenditures	s from:		11 25	20	014 T	0	12	3	1 201	4				
A. Amount Bro	ught Forward F	rom Last R	leport			\$			34,811.5	1				
B. Total Monet	ary Contributior	ns And Rec	eipts (Fron	n Schec	dule I)	\$			0.00					
C. Total Funds Available (Sum Of Lines A and B)						\$			34,811.5	1				
D. Total Expen	ditures (From S	chedule II	1)			\$			690.1	C				
E. Ending Cash	Balance (Subtr	act Line D	From Line	C)		\$			34,121.4					
F. Value Of In-	Kind Contributio	ons Receiv	ed (From S	chedul	e II)	\$			0.00)				
G. Unpaid Deb	ts And Obligatio	ns (From S	Schedule I\	/)		\$			0.0	כ				
				AFF]	IDAVI	T SE	CTION							
PART I - If this is		• •	-					•		-				
I swear (or affirm correct and complete		ncluding th	e attached sc	hedules	filed on	paper	or by elect	ronic me	dium, are to	o the best o	of my knov	vledge	and beli	ef , true
Sworn to and subs	cribed before met day of	this	20						Signatu	re of Perso	on Submitt	ing Rep	oort	
	Signa	ature				-				Prir	nted Name			
My Commission E	-					_				Ema	ail			
	мо	D	AY	YR		_		Area	a Code	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a ca	andidate's	authorized	Comm	ittee, Ca	andid	ate shall	sign he	re.					
I swear (or affirm) No 320) as amende		of my knowl	edge and bel	ief this	political	comm	ittee has n	ot violato	ed any prov	isions of th	e act of Ju	ıne 3,19	937 (P.L	. 1333,
Sworn to and subso	ribed before me th day of	nis	20							Signature	of Candida	ite		
			-~			-				Print	ed Name			
My Commission Exp	Signatu	re				-				Ema	ail			
												lach	- N 1	
	мо	D	AY	YR				Area C	ode	D	aytime Te	elephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Reportin	g Period					
From:	<u>11/25/2</u>	2 <u>014</u> То:	<u>12/31/2014</u>			
ng Period	(1)	\$	0.00			
		\$	0.00			
All Other Contributions (Part B)						
TOTAL for the Reporting Period (2)						
		\$	0.00			
		\$	0.00			
ng Period	(3)	\$	0.00			
E)						
ng Period	(4)	\$	0.00			
		\$	0.00			
	From: ing Period ing Period ing Period E) ing Period	ing Period (1)	From: 11/25/2014 To: ing Period (1) \$ ing Period (2) \$ ing Period (2) \$ ing Period (3) \$ E)			

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				Reporting Period						
F					From: To					
					DATE			AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus	4)							
							Γ	PAGE TOTAL		

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

\$

0.00

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 Candidat	e			orting P	eriod				
			Fro	m:		Тс):		
					DATE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus 4)							
PAGE TOTAL									
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2. \$ 0.00									

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		А	MOUNT	
Full Name of Contributing Comm	ittee			мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
						ſ		PAGE TOTAL	
Enter Grand Total of Part C or	n Schedule I, Detaile	ed Summary Pa	age, Sectio	n 3.			\$	0.00	

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	Reporting I		
	From:		То:
		DATE	AMOUNT

			D	ATE		АМС	DUNT
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
Employer Name			Occupat	tion			
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip Code ((Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detailed S	ummary Page, Sectio	on 3.		\$		бе тота L 0.00

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	Name of Filing Committee or Candidate			Reporting Period						
	From:					n: To:				
				D	ATE			AMOUNT		
Full Name				мо	DAY	YEAR				
Mailing Address							\$	i	0.00	
City	State	Zip Code (Plus 4)							
Receipt Description		1				1				
Enter Grand Total of Part E on Schedu	ule T. Detailed Summ	nary Page	Section	4				PAGE TO	TAL	
		, i uge,	2221011				\$		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 Perio	od							
FRIENDS OF BERNIE O'NEILL	From:	<u>11/25/2014</u> то:	<u>12/31/2014</u>						
I. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR									
TOTAL for the Reporting Pe	riod (1)	\$	0.00						
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)								
TOTAL for the Reporting Pe	riod (2)	\$	0.00						
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)									
TOTAL for the Reporting Pe	riod (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, 1		\$	0.00						

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate Re				Reporting Period					
	From:			То:					
				DATE		АМО	UNT		
Full Name of Contributor			мо	DAY	YEAR				
Mailing Address						\$	0.00		
City	State	Zip Code (Plus 4)	,						
Description of Contribution:									
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL		
					4	6	0.00		

0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate				Reporting Period					
					Fro	From: To:				
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address								\$	0.00	
City	State	Zip Code(Plus 4)								
Employer of Contributor			•			Occupat	tion			
Employer Mailing Address/Principal Pla Business	ce of	City		State		Zip 4)	Code(Plus	Descri	ption o	of Contribution
Enter Grand Total of Part G on Sch	nedule II, 1	In-Kind	Contributio	ons De	taile	ed				PAGE TOTAL

Summary Page, Section 3.	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period				
FRIENDS OF BERNIE O'NEILL			From <u>11/25/2014</u> To:			То:	<u>12/31/2014</u>
			DATE				AMOUNT
To Whom Paid USPS			мо	DAY	YEAR		
Mailing Address MEARNS RD			12	12	2014	\$	117.60
City WARMINSTER	State PA	Zip Code (Plus 4) 18974	Description of Expenditure POSTAGE				
To Whom Paid UPPER SOUTHAMPTON REP. CLUB			мо	DAY	YEAR		
Mailing Address P.O. BOX 1005			12	14	2014	\$	70.00
City SOUTHAMPTON	State PA	Zip Code (Plus 4)	Description of Expenditure DONATION				
To Whom Paid LINDA O'NEILL			мо	DAY	YEAR		
Mailing Address 50 DORSETT CIRCLE			12	26	2014	\$	133.16
City WARMINSTER	State PA	Zip Code (Plus 4) 18974	Description of Expenditure REIMBURSEMENT FOR STAFF APPRECIATION DINNER				
To Whom Paid LINDA O'NEILL			мо	DAY	YEAR		
Mailing Address 50 DORSETT CIRCLE			12	26	2014	\$	369.34
City WARMINSTER	State PA	Zip Code (Plus 4) 18974	Description of Expenditure REIMBURSEMENT FOR STAFF APPRECIATION				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	PAGE TOTAL 690.10