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			Rep File			CANDI	DATE		СОМ	1ITTEE	✓	LOBI	BYIST		
Name of Filing C	Committee, Candid	ate or L	obbyist:		FRIE	ND	S OF	BERNIE (O'NEIL	L							
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	PRE	- 2	2.	30 DA PRIMA		POST-	3. X		AMENDM REPORT?		Yes	No		/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	' PRE	Ē- 5	5.	30 DA ELECT		POST-	6.		TERMINA REPORT?		Yes	No	•	/
report type)	ANNUAL REPORT	7.	Year 2016					NG METHO				PAPER		/	DISKE	TTE	
Name of Office S	- Sought by Candida	te:	-		_			DATE 0	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Coun	
								МО	DAY	YE	AR			REP			
								11		8	2016		(SEE IN	STRUCTIO	ONS FOR C	ODES)	1
	Receipts and	МО	DAY	YEAR	l			МО	DAY	YI	EAR	FO	R OFFIC	CE USE	ONLY		
Expenditures	i from:		4 12	2	016	Т	0	5	:	16	2016						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$			35,	141.48						
B. Total Moneta	ary Contributions	And Rec	eipts (From	Sche	dule	I)	\$				0.00						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			35,1	141.48						
D. Total Expend	ditures (From Sch	edule II	I)				\$			7	40.00						
E. Ending Cash	Balance (Subtract	Line D	From Line C	:)			\$			34,4	01.48						
F. Value Of In-	Kind Contributions	Receiv	ed (From Sc	hedu	le II)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$				0.00						
				AFF	IDA	١٧٧	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign h	ere. I	If thi	is is	a Can	ndidate re	eport, o	andi	date sig	ın here.					
I swear (or affirm) correct and complete) that this report, incl ete.	uding the	attached sch	edules	s filed	d on	paper (or by elect	ronic m	edium	, are to t	he best o	f my knov	wledge	and belie	ef , tru	ıe.
Sworn to and subs	cribed before me this	i	20							S	ignature	of Perso	n Submitt	ting Rep	ort		-
			-				- -					Prin	ted Name	<u> </u>			_
My Commission Ex	Signatu opires	re										Emai	il				-
	мо	D	AY	YR			_		Arc	ea Cod	le	Daytim	e Teleph	one Nu	mber		_
Part II- If this is	a report of a cand	lidate's	authorized (Comn	nitte	e, C	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and belie	f this	polit	ical	commi	ittee has n	ot viola	ted an	y provisi	ions of the	e act of J	une 3,1	937 (P.L.	. 1333	3,
Sworn to and subsc	ribed before me this										Si	ignature o	of Candida	ate			- [
	day of		_ 20				-					Printe	d Name				-
	Signature						-					Fillite	. Hanne				_
My Commission Exp	_											Ema	il				-
	МО	D	AY	YR			•		Area	Code		Da	aytime To	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:	4/12/201	<u>.6</u> To:	5/16/2016
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g 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	g 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	J 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 ar 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

Name of Filing Committe	e or Candidate		Reporting Period						
			From:		То	:			
		L		DATE			AMOUNT		
Full Name of Contributing	Committee		МО	DAY	YEAR				
Mailing Address						\$	0.00		
City	State	Zip Code (Plus 4))						

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

PAGE TOTAL \$ 0.00		
\$	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 or Cand	idate	Name of Fining Committee of Candidate					Reporting Period					
F):						
					DATE		АМ	OUNT				
Full Name of Contributor				МО	DAY	YEAR						
Mailing Address							\$	0.00				
City	State	Zip Code (Plus 4)									

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

PAGE TOTAL \$ 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 Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule 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 Candi	me of Filing Committee or Candidate					eriod			
				Fron	n:		To) :	
			_		D	ATE		А	MOUNT
Full Name of Contributor					МО	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus	4)					
Employer Name	•				Occupa	tion	•	•	
Employer Mailing Address/Principa Business	l Place of		City		•	State		Zip Cod	de (Plus 4)
Enter Grand Total of Part C on	Schedule I, Deta	iled Sumr	mary Page,	Section	on 3.			F \$	PAGE TOTAL 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	ting Perio	bd			
			From:			To:		
				D	ATE		AM	OUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	•	•		•	•	•	_	
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			PAG	E TOTAL
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	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	d	
FRIENDS OF BERNIE O'NEILL	From:	<u>4/12/2016</u> To:	5/16/2016
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER 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 Candidat	:e		Reporting	g Period			
			From:			То:	
				DATE			AMOUNT
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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Re	porting l	Period			
					Fro	om:		To:		
					•		DATE			AMOUNT
Full Name of Contributor						МО	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupa	ition		•	
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iption	of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, I	in-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	andidate		Reporti	ng Period			
FRIENDS OF BERNIE O'NEILL			From	4/1	2/2016	То:	<u>5/16/2016</u>
				DATE			AMOUNT
To Whom Paid VFW POST 6493			МО	DAY	YEAR		
Mailing Address LOUIS DRIV	/E		4	26	2016	\$ \$	90.00
City WARMINSTER	State	Zip Code (Plus 4)	Descri	ption of Exp	enditure		
	PA	18974	ELECTI	ON DAY E	KPENSES		
To Whom Paid COMMITTEE TO ELECT DOYLE F	HEFFLEY		МО	DAY	YEAR		
Mailing Address 140 IRONWOOD RD			4	28	2016	\$	200.00
City PALMERTON	State PA	Zip Code (Plus 4) 18071	Descri DONAT	ption of Exp	penditure		
To Whom Paid COMMITTEE TO ELECT TOM PAI	NZER		мо	DAY	YEAR		
Mailing Address 534 PARMEN	NTIER RD		5	7	2016	\$	100.00
City WARMINSTER	State	Zip Code (Plus 4)	Descri	ption of Ex	enditure		
	PA	18974	DONAT	TION			
To Whom Paid WILLIAM TENNENT ALUMNI AS:	SOC		мо	DAY	YEAR		
Mailing Address C/O BRETT	KEEBLE 424 AUBURN (CT.	5	15	2016	\$	350.00
City SOUDERTON	State	Zip Code (Plus 4)	Descri	ption of Exp	enditure		
	PA	18964	DONAT	TION			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL

740.00

\$