### **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 2	20020	88				oort		CANDI	ANDIDATE COMMITTEE V LOBBYIST							
Name of Filing C	Committee, Ca	andida	te or Lo	bbyist:		FRIE	END	S OF	BERNIE (	ONEILL	-			_			
Street Address:	50 DORS	SETT C	CIRCLE														
City:	WARMINS	STER							State:	PA			Zip Cod	le: 18	3974		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		1.	2ND FRIDA' PRIMARY	/ PRE	-	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT?		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION		4.	2ND FRIDAY ELECTION	/ PRE	≣-	5.	30 DA ELECT		POST-	6.		TERMINA REPORT?		Yes	No	<b>~</b>
report type)	ANNUAL REP	PORT	7. <b>X</b>	<b>Year</b> 2016					IG METHO				PAPER		<b>V</b>	DISKE	TTE
Name of Office S	Sought by Can	ndidate	e:						DATE 0	F ELE	CTIC	N	District Number	Office Code	Par	ty Code	County Code
									МО	DAY	YI	AR	Number	code			code
									11		8	2016		(SEE IN	STRUCTI	ONS FOR (	CODES)
Summary of Expenditures		nd	МО	DAY	YEAR	<b>L</b>			МО	DAY	ΥI	EAR	FO	R OFFI	CE USE	ONLY	
Expenditures			1	.1 29	2	016	Т	<u> </u>	12	:	31	2016					
A. Amount Bro	ught Forward	l From	Last Re	eport				\$			26,9	974.73					
B. Total Monet	ary Contributi	ions A	nd Rece	eipts (From	Sche	dule	<b>I</b> )	\$				0.00					
C. Total Funds	Available (Su	ım Of I	Lines A	and B)				\$			26,9	974.73					
D. Total Expen	ditures (From	1 Sche	dule III	<b>(</b> )				\$			8	375.43					
E. Ending Cash	Balance (Sub	btract	Line D I	From Line (	<b>C)</b>			\$			26,0	99.30					
F. Value Of In-	Kind Contribu	utions	Receive	ed (From So	hedu	le II	)	\$				0.00					
G. Unpaid Debt	s And Obligat	tions (	From S	chedule IV	)			\$				0.00	00				
					AFF	IDA	١٧٧	T SE	CTION								
PART I - If this is	s a Committee	e repo	rt, treas	surer sign l	nere.	If th	is is	a Can	ndidate re	eport, o	candi	date sig	ın here.				
I swear (or affirm) correct and comple		rt, inclu	iding the	attached sch	edule	s filed	d on	paper (	or by elect	ronic m	edium	, are to t	the best o	f my kno	wledge	and beli	ef , true
Sworn to and subs	cribed before m	ne this		20							S	ignature	of Perso	n Submit	ting Rep	oort	
								<b>-</b>					Prin	ted Name	e		
My Commission Ex	•	gnature	<b>e</b>										Ema	il			
	мо		DA	Υ	YR			-		Are	ea Cod	le		e Telepi	none Nu	mber	
Part II- If this is	a report of a	candi	idate's a	authorized	Comn	nitte	e, C	andida	ate shall	sign he	ere.						
I swear (or affirm) No 320) as amende		st of my	y knowle	dge and beli	ef 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,
Sworn to and subsc	ribed before me	e this										Si	ignature o	of Candid	ate		
	day of							_					Di	al Na :			
	Signa	ature						-					Printe	d Name			
My Commission Exp	_	acul C											Ema	il			
	МС	0	DA	ΛΥ	YR	1		-		Area	Code		Da	aytime T	elephor	ie Numb	er

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF BERNIE ONEILL	From:	11/29/20	<u>16</u> То:	12/31/2016
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	) 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	) 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	) Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	) 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 Committee	Name of Filing Committee or Candidate		Reporting Period						
				From:		То	:		
			<b>'</b>		DATE			AMOUNT	
Full Name of Contributing (	Committee			МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	S	State	Zip Code (Plus 4)						

PAGE TOTAL
0.00

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

### **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.

Name of Filing Comn	nittee or Candidate		Rep	orting P	eriod			
			Fro	m:		To	<b>)</b> :	
		•			DATE			AMOUNT
Full Name of Contribut	or			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	)					
								PAGE TOTAL
								PAGE TO

#### **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	me of Filing Committee or Candidate		Rep	orting Pe	riod			
			Fror	n:		To	):	
				D	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupa	tion			
Employer Mailing Address/Principal Pla	ce of Business	City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Scho	dule I, Detailed S	Summary Page,	, Sectio	on 3.		:	\$	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	ing Peri	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (	Plus 4)					
Receipt Description	•	•			•			
Forten Commit Tatal of Boot	F an Cabadala I Batallad	I C B	C					PAGE TOTAL
Enter Grand Total of Part	e on Schedule I, Detalled	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 Per	iod						
FRIENDS OF BERNIE ONEILL	From:	<u>11/29/2016</u> <b>To:</b>	<u>12/31/2016</u>					
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS 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 Candi	idate		Reportin	g Period			
			From:			To:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						<b>7</b> \$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:	•		•	•	•		
Enter Grand Total of Part F on	Schedule II, In-Ki	nd Contributions Detai	led Sum	mary Pag	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	e of Filing Committee or Candidate			Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

## STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	ndidate		Reporti	ng Period			
FRIENDS OF BERNIE ONEILL			From	11/29	9/2016	То:	12/31/2016
				DATE			AMOUNT
To Whom Paid			мо	DAY	YEAR		
USPS							
Mailing Address 1135 MEARN	NS RD		12	9	2016	\$	83.20
City WARMINSTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA	18974	POSTAC	GE .			
To Whom Paid B.B. & T			МО	DAY	YEAR		
Mailing Address STREET RD			12	27	2016	\$	677.65
City WARMINSTER	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	l	
	PA	18974	CAMPA1	GN VOLUN	ITEER RE	IMBURSE	MENT
To Whom Paid			мо	DAY	YEAR		
STUTZ			110				
Mailing Address 1345 EASTO	N RD		12	27	2016	\$	57.99
City WARRINGTON	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA	18976	CAMPA1	GN THANK	(-YOU		
To Whom Paid			мо	DAY	YEAR		
CONNIE MC CLURE							
Mailing Address 450 HEMLO	CK LANE		12	31	2016	\$	56.59
City ETTERS	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	PA	17319	SWEAR	ING-IN-EX	PENSES		

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

7/13	/2025	10.36	.11	ΔМ

**PAGE TOTAL** 

875.43