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 :			oort		CANDI	DATE		СОМ	4ITTEE	✓	LOBI	BYIST								
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	18974					
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?	TERMINATION Y REPORT?		No	~			
report type)	ANNUAL REP	PORT	7. X	Year 2016					IG METHO				PAPER	APER DISKET						
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	L			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	I)	\$				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	()				\$			8	375.43								
E. Ending Cash	Balance (Sub	btract	Line D I	From Line (C)			\$			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			1					
					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	ort				
								-					Prin	ted Name	e					
My Commission Ex	•	gnature	e										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							_					Du!4	d Nac-						
	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:	11/29/201	<u>б</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 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

	his Part to itemize onl with an aggregate val	-			•			
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		1			DATE			AMOUNT
Full Name of Contribution	ng Committee			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

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 o	r Candidate		Rep Fro	oorting P	eriod	To	o:	
			l		DATE			AMOUNT
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 Candidate			Rep	orting Pe	riod				
			Fron	n:		То	To:		
				D	ATE		АМО	DUNT	
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plu	s 4)						
Employer Name				Occupat	tion				
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	(Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page,	Section	on 3.			PAC	GE 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 Co	andidate		Report	ting Perio	bd			
			From:			То:		
				D	ATE		AM	10UNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	•						
Enter Grand Total of Part E or	Schedule T. Detailer	d Summary Page	Section	4			PA	GE TOTAL
Lines Grana Fotal of Fair 2 of	r benedule 1/ betanet	z Sammary r age,	Section	•			\$	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> To:	<u>12/31/2016</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER CONTRIBUTO	R	
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 Candidat	e				Re	porting P	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor	•		•			Occupa	tion			
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, i	In-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Co	andidate		Reporti	ng Period			
FRIENDS OF BERNIE ONEILL			From	11/2	9/2016	То:	12/31/2016
		I		DATE			AMOUNT
To Whom Paid USPS			мо	DAY	YEAR		
Mailing Address 1135 MEAR	NS RD		12	9	2016	\$	83.20
City WARMINSTER	State PA	Zip Code (Plus 4) 18974	Descrip POSTA	otion of Exp	penditure	3	
To Whom Paid B.B. & T			МО	DAY	YEAR		
Mailing Address STREET RD				27	2016	\$	677.65
City WARMINSTER	State PA	Zip Code (Plus 4) 18974		otion of Exp			EMENT
To Whom Paid STUTZ			МО	DAY	YEAR		
Mailing Address 1345 EASTO	ON RD		12	27	2016	\$	57.99
City WARRINGTON	State PA	Zip Code (Plus 4) 18976		otion of Exp			
To Whom Paid CONNIE MC CLURE			МО	DAY	YEAR		
Mailing Address 450 HEMLO	CK LANE		12	31	2016	\$	56.59
City ETTERS	State PA	Zip Code (Plus 4) 17319	ı	otion of Exp			
	<u> </u>	I	1				PAGE TOTAL

875.43