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	20020	88				port		CANDI	DATE		COMN	1ITTEE	✓	LOB	BYIST		
Name of Filing C	Committee, Ca	andida	te or Lo	obbyist:		O'N	EILL	, BER	NIE FRIE	NDS C)F							
Street Address:	50 DORS	SETT C	CIR															
City:	WARMIN:	STER							State:	PA			Zip Cod	le: 18	3974			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		1.	2ND FRIDA' PRIMARY	Y PRE	-	2.	30 DA PRIMA		POST-	3. X		AMENDM REPORT?		Yes	No	•	/
(place X to the right of	6TH TUESDAY PRE-ELECTION		4.	2ND FRIDA' ELECTION	y pre	≣-	5.	30 DA ELECT		POST-	6.		TERMINA REPORT?		Yes	No	•	/
report type)	ANNUAL REP	PORT	7.	Year 2005					IG METHO				PAPER / DISKE					
Name of Office S	Sought by Can	ndidat	e:						DATE O	F ELE	District Office Number Code					Coun		
									МО	DAY	YE	AR	Number	Todac			couc	
									11		8	2005		(SEE IN	STRUCTI	ONS FOR (CODES)	1
Summary of Expenditures		nd	МО	DAY	YEAR	1		_	МО	DAY	YE	AR	FO	R OFFI	CE USE	ONLY		
				1 1		1	Т	0	6		6	2005						
A. Amount Bro	ught Forward	l From	Last Re	eport				\$			4,8	379.47						
B. Total Monet	ary Contribut	ions A	nd Rece	eipts (From	Sche	dule	· I)	\$.00.00						
C. Total Funds	Available (Su	ım Of I	Lines A	and B)				\$			4,9	79.47						
D. Total Expen	ditures (From	1 Sche	dule III	I)				\$			6	91.00						
E. Ending Cash	Balance (Sub	btract	Line D	From Line (C)			\$			4,2	88.47						
F. Value Of In-	Kind Contribu	utions	Receive	ed (From Se	chedu	le II	()	\$				0.00						
G. Unpaid Debt	ts And Obliga	tions ((From S	chedule IV)			\$				0.00			1			
					AFF	IDA	٩VI	T SE	CTION									
PART I - If this is		-	•							•								
I swear (or affirm) correct and comple		rt, inclu	iding the	attached sci	nedule	s file	d on	paper o	or by electi	ronic m	edium	, are to t	he best o	f my kno	wledge	and beli	ef , tru	1e
Sworn to and subs	cribed before m	ne this		20							S	ignature	of Perso	1 Submit	ting Re _l	oort		
								<u>-</u>					Prin	ted Name	e			_
My Commission Ex	,	ignature	е						•				Emai	il				-
	мо		DA	ΛΥ	YR			-		Are	ea Cod	e		e Telepi	none Nu	mber		-
Part II- If this is	a report of a	a candi	idate's a	authorized	Comn	nitte	e, C	andida	ate shall :	sign h	ere.							
I swear (or affirm) No 320) as amende		st of m	y knowle	dge and beli	ef this	polit	tical	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	e this										Si	ignature o	f Candid	ate			-
	day of							_										_
	C:	ature						_					Printe	d Name				
My Commission Exp	Signa pires	acui e											Ema	il				_
	M	0	DA	ΛΥ	YR	1		•		Area	Code		Da	nytime T	elephor	ne Numb	er	·

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period		
O'NEILL, BERNIE FRIENDS OF	From:	To:	6/6/2005
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)		\$	100.00
TOTAL for the Reporting	g Period (2)	\$	100.00
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		\$	100.00

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 Commit	tee or Candidate			Reporting	Period			
				From:		То	:	
			'		DATE			AMOUNT
Full Name of Contributin	g 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.

(Exclude contributions from political committees reported in Part A)

Name of Filing Committee or Candidate	Reporting Period		
O'NEILL, BERNIE FRIENDS OF	From:	То:	6/6/2005

				DATE		AMOUNT
Full Name of Contributor			МО	DAY	YEAR	
MALADY & WOOTEN. LLP			1410	DAI	ILAK	
Mailing Address 604N 3RD ST						\$ 100.00
City HARRISBURG	State	Zip Code (Plus 4)	5	20	2005	
	PA	17101				

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

PAGE TOTAL 100.00 \$

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		P	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			0.00
Mailing Address							- \$		0.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTA	AL
Enter Grand Total of Part C on Sche	dule I, Detailed Sun	nmary P	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 Candida	te			Rep	orting Pe	eriod			
				Fror	n:		Т	o:	
					D	ATE		А	MOUNT
Full Name of Contributor					МО	DAY	YEAR	\$	0.00
Mailing Address								7	
City	State	Zi	ip Code (Plus	s 4)					
Employer Name					Occupa	tion			
Employer Mailing Address/Principal F	lace of Business		City		•	State		Zip Cod	de (Plus 4)
Enter Grand Total of Part C on Sc	nedule I, Detaile	ed Sumn	nary Page,	Section	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:		
		'			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	'	1					<u> </u>	
	- C		. .:	_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	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		
O'NEILL, BERNIE FRIENDS OF	From:	То:	<u>6/6/2005</u>
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 Candi	idate		Reporting Period					
			From:			То:		
				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 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				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

691.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	andidate		Reportir	ng Period			
O'NEILL, BERNIE FRIENDS OF			From			То:	6/6/2005
				DATE			AMOUNT
To Whom Paid			МО	DAY	YEAR		
BERNIE O'NEILL			1-10				
Mailing Address 50 DORSET	T CIRCLE		5	7	2005	\$	691.00
City WARMINSTER	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure		
	PA	18974	THANK YOUS 86- HRCC 375- CRAUEL HALL 30- WARM REP COM 100- REP 4 SOUTHAMPTON 100				
							PAGE TOTAL

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