### **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 :		Report CANDIDA		IDATE		СОМІ	MITTEE	✓	LOBE	SYIST							
Name of Filing C	Committee, Candid	ate or L	obbyist:		O'N	EILL	, BER	NIE FRI	ENDS	OF							
Street Address:	50 DORSETT	CIR															
City:	WARMINSTER							State:	PA			Zip Co	<b>Zip Code:</b> 18974				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY								AMENDN REPORT	No	<b>~</b>				
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	y pre	≣-	5. <b>X</b>	30 DA		POST-	6.		TERMINA REPORT		Yes	No	<b>\</b>	
report type)	ANNUAL REPORT	7.	<b>Year</b> 2005					NG METH CHECK (				PAPER		<b>\</b>	DISKE	TTE	
Name of Office S	Sought by Candida	te:	-					DATE	OF EL	ECT:	ION	District Number	Office Code	Par	ty Code	County Code	
								МО	DAY	'	YEAR	Number	Code			Code	
								1	1	8	2005		(SEE IN	ISTRUCTIO	ONS FOR C	ODES)	
	Receipts and	МО	DAY	YEAR	ł			МО	DAY	,	YEAR	FC	R OFFI	CE USE	ONLY		
Expenditures	from:		1 1		1	Т	0	1	0	24	2005						
A. Amount Bro	ught Forward Fron	n Last R	eport				\$			4	4,288.47						
B. Total Monet	ary Contributions	And Rec	eipts (From	Sche	dule	ı)	\$				3,825.00						
C. Total Funds Available (Sum Of Lines A and B) \$ 8,113.47									8,113.47								
D. Total Expenditures (From Schedule III)									66.60								
E. Ending Cash Balance (Subtract Line D From Line C)							\$			8	3,046.87						
F. Value Of In-	Kind Contributions	Receiv	ed (From So	hedu	le II	[)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV	)			\$				401.46			1			
				AFF	IDA	٩VI	ΓSE	CTION									
	a Committee rep	•	_						-								
I swear (or affirm) correct and comple	) that this report, incl ete.	uding the	attached sch	nedule	s file	d on	paper	or by elec	tronic	mediu	ım, are to	the best o	f my kno	wledge a	and belie	ef , true	
Sworn to and subs	cribed before me this day of	;	20								Signatur	e of Perso	n Submit	ting Rep	ort		
							- -					Prin	ted Nam	e			
My Commission Ex	Signatu opires	re										Ema	il				
	мо	D	AY	YR						Area (	Code	Daytin	e Telepi	none Nu	mber		
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nitte	e, C	andid	ate shal	l sign	here							
I swear (or affirm) No 320) as amende	that to the best of n	ny knowle	edge and beli	ef this	polit	tical	comm	ittee has	not vio	lated	any provis	sions of th	e act of J	une 3,19	937 (P.L.	1333,	
Sworn to and subsc	ribed before me this										S	ignature (	of Candid	ate			
	day of ————————————————————————————————————						-					Printe	d Name				
	Signature						-										
My Commission Exp	ires											Ema	il				
	МО	D	AY	YR	l		•		Are	a Coc	le	D	aytime T	elephon	e Numbe	er	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting Period		
O'NEILL, BERNIE FRIENDS OF	From:	To:	10/24/2005
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)	-	\$	325.00
All Other Contributions (Part B)		\$	0.00
TOTAL for the Reporting	g Period (2)	\$	325.00
3. Contributions Received Over \$250.00 (From Part C and Part D)			
Contributions Received From Political Committees (Part C)		\$	3,500.00
All Other Contributions (Part D)		\$	0.00
TOTAL for the Reporting	Period (3)	\$	3,500.00
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		\$	3,825.00

#### **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 or Ca	ndidate		Reporting	Period			
O'NEILL, BERNIE FRIENDS OF			From:		То	:	10/24/2005
		1		DATE			AMOUNT
Full Name of Contributing Commi VERIZON COMMUNICATIONS	ttee		МО	DAY	YEAR		
Mailing Address			9	21	2005	\$	250.00
City HARRISBURG	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101					
Full Name of Contributing Commi SANTORO FOR SUPERVISOR	ttee		МО	DAY	YEAR		
Mailing Address			7	4	2005	\$	75.00
City DOYLESTOWN	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18901		·			

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

**PAGE TOTAL** 325.00

#### **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.

Name of Filing Comm	nittee or Candidate		Reportir	g Pe	eriod			
			From:			To	o:	
		L		0	DATE			AMOUNT
Full Name of Contribut	or		мс	,	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						
		•						
								PAGE TOTAL

#### **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			
O'NEILL, BERNIE FRIENDS OF			From:			То:	10/24/2005
				DA	TE		AMOUNT
Full Name of Contributing Committee WARWICK TOWNSHIP REP CLUB				МО	DAY	YEAR	\$ 300.00
Mailing Address				10	8	2005	
City WARWICK	<b>State</b> PA	Zip Code	e (Plus 4)				
Full Name of Contributing Committee FIRST PAC				МО	DAY	YEAR	\$ 300.00
Mailing Address PO BOX 5319	<b>,</b>			9	22	2005	
City HARRISBURG	<b>State</b> PA	<b>Zip Cod</b> 171105	<b>e (Plus 4)</b> 319				
Full Name of Contributing Committee PA OPTOMETRIC				МО	DAY	YEAR	\$ 300.00
Mailing Address PO BOX 3406				9	20	2005	300.00
City HARRISBURG	<b>State</b> PA	<b>Zip Code</b> 17105	e (Plus 4)	-			
Full Name of Contributing Committee BLUE PAC				мо	DAY	YEAR	\$ 300.00
Mailing Address PO BOX 60710				9	29	2005	300.00
City HARRISBURG	<b>State</b> PA	<b>Zip Code</b> 171067	e (Plus 4)				
Full Name of Contributing Committee PA MEDICAL PAC				МО	DAY	YEAR	\$ 300.00
Mailing Address PO BOX 8820				9	29	2005	
City HARRISBURG	<b>State</b> PA	<b>Zip Cod</b> 171058	820				
Full Name of Contributing Committee PSC H2O				МО	DAY	YEAR	\$ 300.00
Mailing Address 762 W LANCASTER A	VE			10	17	2005	
City BRYN MAWR	<b>State</b> PA	<b>Zip Cod</b> 19010	e (Plus 4)				

Full Name of Contributing Committee						
PPL PEOPLE FOR GOOD GOV'T			МО	DAY	YEAR	
Mailing Address 2 N 9TH ST						\$ 300.00
City ALLENTOWN	State	Zip Code (Plus 4)	10	12	2005	
	PA	18101				
Full Name of Contributing Committee		-	мо	DAY	YEAR	
PFT COMM TO SUPPORT PUBLIC E						<b>\$</b> 300.00
Mailing Address 1816 CHESTNUT ST			9	22	2005	
City PHILADELPHIA	State	Zip Code (Plus 4)			2003	
	PA	19103				
Full Name of Contributing Committee			МО	DAY	YEAR	
PA INSURANCE PAC						<b>\$</b> 300.00
Mailing Address 1600 MARKET ST SU	ITE 1520		10	4	2005	
City PHILA	State	Zip Code (Plus 4)			2003	
	PA	19103				
Full Name of Contributing Committee			МО	DAY	YEAR	
PA BEER WHOLESALERS ASSOC						<b>\$</b> 300.00
Mailing Address PO BOX 12023			10	5	2005	
City HARRISBURG	State	Zip Code (Plus 4)				
	PA	17108				
Full Name of Contributing Committee			мо	DAY	YEAR	
PECOPAC			MO	DAT	TEAR	<b>\$</b> 500.00
Mailing Address 2301 MARKET ST			6	15	2005	, 330.00
City PHILADELPHIA	State	Zip Code (Plus 4)				
	PA	19103				
		1				

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

**PAGE TOTAL \$** 3,500.00

### 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	Name of Filing Committee or Candidate					riod				
	From:						То:			
					D	ATE			AMOUNT	
Full Name of Contributor					МО	DAY	YEAR	\$	0.00	
Mailing Address								7		
City	State	Zip Code (F	lus 4	1)						
Employer Name	•	I			Occupa	tion	•	•		
Employer Mailing Address/Principal Pla	ace of Business	City		,		State		Zip C	ode (Plus 4)	
Enter Grand Total of Part C on Scho	edule I, Detailed S	ummary Pag	age, Section 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:		
		•		C	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	us 4)					
Receipt Description	•	•			•	•	•	
Futor Curred Total of Bout	Fan Cabadula I. Datailad	Summer Base S	<b>!</b> !	4				PAGE TOTAL
Enter Grand Total of Part	E ON Schedule 1, Detalled	Summary Page, Se	ection	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:	10/24/2005
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	<b>\$</b>	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	eriod (2)	<b>\$</b>	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	Name of Filing Committee or Candidate Rep						Reporting Period				
	From: To:										
		<u>.</u>		DATE			AMOUNT				
Full Name of Contributor			мо	DAY	YEAR						
Mailing Address						<b> </b>		0.00			
City	State	Zip Code (Plus 4)									
Description of Contribution:		•	•	•		•					
					-						
	Enter Grand Total of Part F on Schedule II, In-Kind Contributions De				ge,		PAGE TOTA	AL			
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.	<b></b>									0.00

# SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period		
O'NEILL, BERNIE FRIENDS OF	From	То:	10/24/2005
	DATE		AMOUNT

			DATE			AMOUNT		
To Whom Paid			МО	DAY	YEAR			
HOUSE REP CAMP COMM					ILAK			
Mailing Address			10	21	2005	\$	66.60	
City HARRISBURG	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	17108	INVITA	ΓIONS				
							PAGE TOTAL	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	66.60	

## STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate			Reporting Period								
O'NEILL, BERNIE FRIENDS OF				From: To			То:		10/24/2005		
						DATE			Outstan Balance	ding of Debt	
Name of Creditor HILTON					мо	DAY	YEAR				
Mailing Address					10	18	200!	5 9	\$	401.46	
City	HARRISBURG	State	Zip Code (P	lus 4)	Descrip	Description of Debt					
PA BUFFET BREAKFAST											
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.									PAGE TOTAL		
								\$		401.46	