Campaign Finance Report

(NOTE: This report must be clear and legible. It may be typed or printed in blue or black ink.)

Filer Identificatio	on 2002	.088			Report Filed B		CANDI	DATE		СОММ	IITTEE	✓	LOBI	BYIST	
Name of Filing C	ommittee, Candid	ate or Lo	bbyist:				NIE FRIE	NDS OI	F						
Street Address: 50 DORSETT CIR															
City:	WARMINSTER						State:	PA			Zip Co	de: 18	974		
	6TH TUESDAY PRE-PRIMARY	1.	2ND FRID PRIMARY	DAY PRE	- 2.	30 DA PRIMA		POST- 3.			AMENDN REPORT		Yes	No	\checkmark
/	6TH TUESDAY PRE-ELECTION	4.				30 DA ELECT		POST- 6. X			TERMIN REPORT		Yes	No	\checkmark
report type)	ANNUAL REPORT	7.	Year 200	5			IG METHO				PAPER		\checkmark	DISKE	TTE
Name of Office S	ought by Candida	te:					DATE O	F ELEC	CTION	N	District Number	Office Code	Par	ty Code	County Code
							мо	DAY	YEA	AR					
							11		8	2005		(SEE IN	STRUCTI	ONS FOR (CODES)
Summary of F		мо	DAY	YEAF	2		мо	DAY	YE/	AR	FC	OR OFFIC	CE USE	ONLY	
Expenditures	from:		1	1	1 T	0	11	2	8	2005					
A. Amount Brou	ught Forward From	n Last Re	eport			\$			8,04	46.87					
B. Total Moneta	ary Contributions	And Rece	eipts (Fro	om Sche	dule I)	\$			60	00.00					
C. Total Funds	Available (Sum Of	Lines A	and B)			\$			8,64	46.87					
D. Total Expend	litures (From Scho	edule III	:)			\$			40)1.46					
E. Ending Cash	Balance (Subtract	t Line D I	From Line	e C)		\$			8,24	15.41					
F. Value Of In-	Kind Contributions	s Receive	ed (From	Schedu	le II)	\$				0.00					
G. Unpaid Debt	s And Obligations	(From S	chedule 1	[V)		\$				0.00					
				AFF	IDAVI	Γ SE	CTION								
PART I - If this is	a Committee rep	ort, treas	surer sign	n here.	If this is	a Car	ndidate re	eport, ca	andida	ate sig	n here.				
I swear (or affirm) correct and comple	that this report, incl te.	uding the	attached s	schedule	s filed on	paper	or by elect	ronic me	dium,	are to t	he best o	f my knov	wledge	and beli	ef , true
Sworn to and subso	cribed before me this day of	5	20						Sig	gnature	of Perso	n Submitt	ting Rep	oort	
	Signatu	re				_					Prin	ted Name			
My Commission Ex	-					_					Ema	il			
	мо	DA	Y	YR				Area	a Code		Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a cand	didate's a	authorize	d Comr	nittee, C	andid	ate shall	sign he	re.						
I swear (or affirm) No 320) as amende	that to the best of n d.	ny knowle	dge and be	elief this	s political	comm	ittee has n	ot violate	ed any	provisi	ons of th	e act of J	une 3,1	937 (P.L	. 1333,
Sworn to and subscribed before me this day of 20										Si	gnature	of Candida	ate		
						-					Printe	ed Name			
Signature						-					Ema	il			
My Commission Expi															

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** O'NEILL, BERNIE FRIENDS OF From: To: 11/28/2005 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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)** 300.00 300.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 600.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 600.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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 Candidate				Reporting Period						
				From: To:			:			
		·			DATE			AMOUNT		
Full Name of Contributing Committee			м	10	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		

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 Candida	te		Rep	orting P	eriod					
			From: To):				
					DATE			AMOUNT		
Full Name of Contributor				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		

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:	<u>11</u> ,	<u>/28/2005</u>		
				DA	TE		A	MOUNT		
Full Name of Contributing Committee PA BANKERS PUBLIC AFFAIRS COMM				мо	DAY	YEAR	\$	300.00		
Mailing Address P O BOX 345				11	3	2005				
City HARRISBURG	State PA	Zip Cod 17108	e (Plus 4)							
								PAGE TOTAL		
ter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.								300.00		

PART D 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			Repo	orting Pe	riod				
O'NEILL, BERNIE FRIENDS OF	From:				0:	<u>11/28/2005</u>			
				DA	TE			AMOUNT	
Full Name of Contributor				мо	DAY	YEAR	\$	300.00	
JOHN C ERICKSON									
Mailing Address 100 HARBORVIEW [DR PH 4A			11	3	2005			
City BALTIMORE	State	Zip Code (Plus	54)	11	J	200.			
	MD	21230							
Employer Name ERICKSON RETIREME	NT COMMUNITIES			Occupation PRINCIPAL					
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip Code (Plus 4)		
11000 ANNA CHOICE		WARMINS	TER		PA		1897	4	
Enter Grand Total of Part C on Schee	dule I, Detailed Su	ımmary Page,	Sectio	on 3.			\$	PAGE TOTAL 300.00	

PART E **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			Reporting Period						
			From:			То:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (Plus 4)						
Receipt Description	·	•					•		
		_						PAGE TO	TAL
Enter Grand Total of Part E on Schedule I, Detailed 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 Period		
O'NEILL, BERNIE FRIENDS OF	From:	То:	<u>11/28/2005</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	riod (2)	\$	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 R				Reporting Period						
F						То:				
· · · ·				DATE		AMOUNT				
Full Name of Contributor				DAY	YEAR					
Mailing Address		_				 \$		0.00		
City	State	Zip Code (Plus 4)								
Description of Contribution:										
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.							PAGE TOTAL			
						\$		0.00		

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate				Reporting Period						
				From:						
					DATE		AMOUNT			
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address			-				\$ 0.00			
City	State	Zip Code(Plus 4)								
Employer of Contributor			Occupation							
Employer Mailing Address/Principal Plac	e of Business	City	State	e Zip	Code(Plus 4)	Descri	ption of Contribution			
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.					PAGE TOTAL 0.00					

SCHEDULE III STATEMENT OF EXPENDITURES

Nam	Name of Filing Committee or Candidate				Reporting Period					
O'NEILL, BERNIE FRIENDS OF							То:	<u>11/28/2005</u>		
					DATE	AMOUNT				
To Whom Paid				мо	DAY	YEAR				
HILTO	ON HOTEL									
Mailir	ng Address			11	3	2005	\$	401.46		
City	HARRISBURG	State	Zip Code (Plus 4)	Descrip						
		РА		BREAK	AST BUFF					
Ente	Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							401.46		