

Campaign Finance Report

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

| | | | | | | | | | | | | |
|---------------------------------------------------------------------------------|--------------------------|-----------|-------------------------|---------------------------------------|-----------------|--------------------------------------------------|------------|------------------------------------------------------|------------------------------|--------------------|-------------------------------------|--------------------|
| Filer Identification Number : | | 9400092 | | Report Filed By : | | CANDIDATE | | COMMITTEE <input checked="" type="checkbox"/> | | LOBBYIST | | |
| Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF LISA BOSCOLA | | | | | | | | | | | | |
| Street Address: | | | | | | | | | | | | |
| City: BETHLEHEM | | | | | | State: PA | | Zip Code: 18016-1294 | | | | |
| TYPE OF REPORT (place X to the right of report type) | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDAY PRE-PRIMARY | 2. | 30 DAY PRIMARY | POST- | 3. X | AMENDMENT REPORT? | Yes | No | <input checked="" type="checkbox"/> | |
| | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDAY PRE-ELECTION | 5. | 30 DAY ELECTION | POST- | 6. | TERMINATION REPORT? | Yes | No | <input checked="" type="checkbox"/> | |
| | ANNUAL REPORT | 7. | Year 2014 | FILING METHOD () CHECK ONE | | PAPER <input checked="" type="checkbox"/> | | DISKETTE | | | | |
| Name of Office Sought by Candidate: | | | | | | DATE OF ELECTION | | | District Number | Office Code | Party Code | County Code |
| | | | | | | MO | DAY | YEAR | | | | |
| | | | | | | 11 | 4 | 2014 | (SEE INSTRUCTIONS FOR CODES) | | | |
| Summary of Receipts and Expenditures from: | | MO | DAY | YEAR | TO | MO | DAY | YEAR | FOR OFFICE USE ONLY | | | |
| | | 5 | 6 | 2014 | | 6 | 9 | 2014 | | | | |
| A. Amount Brought Forward From Last Report | | | | | | \$ 185,906.98 | | | | | | |
| B. Total Monetary Contributions And Receipts (From Schedule I) | | | | | | \$ 12,011.44 | | | | | | |
| C. Total Funds Available (Sum Of Lines A and B) | | | | | | \$ 197,918.42 | | | | | | |
| D. Total Expenditures (From Schedule III) | | | | | | \$ 34,616.99 | | | | | | |
| E. Ending Cash Balance (Subtract Line D From Line C) | | | | | | \$ 163,301.43 | | | | | | |
| F. Value Of In-Kind Contributions Received (From Schedule II) | | | | | | \$ 1,220.00 | | | | | | |
| G. Unpaid Debts And Obligations (From Schedule IV) | | | | | | \$ 0.00 | | | | | | |

AFFIDAVIT SECTION

PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

| | |
|----------------------------------------------|-------------------------------------------|
| Name of Filing Committee or Candidate | Reporting Period |
| FRIENDS OF LISA BOSCOLA | From: <u>5/6/2014</u> To: <u>6/9/2014</u> |

| | |
|--------------------------------------------------------------------------------|---------|
| 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) | \$ 6,000.00 |
| TOTAL for the Reporting Period (3) | \$ 6,000.00 |

| | |
|------------------------------------------------------------------------------------------|-------------|
| 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) | |
| TOTAL for the Reporting Period (4) | \$ 6,011.44 |

| | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|
| Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.) | \$ 12,011.44 |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------|

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 | | | MO | DAY | YEAR | \$0.00 |
| Mailing Address | | | | | | |
| 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: | To: |

| | | | DATE | | | AMOUNT | |
|-------------------------------------|-------|-------------------|------|-----|------|--------|------|
| Full Name of Contributing Committee | | | MO | DAY | YEAR | \$ | 0.00 |
| Mailing Address | | | | | | | |
| City | State | Zip Code (Plus 4) | | | | | |

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

| |
|-------------------|
| PAGE TOTAL |
| \$ 0.00 |

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 FRIENDS OF LISA BOSCOLA | Reporting Period From: <u>5/6/2014</u> To: <u>6/9/2014</u> |
|-----------------------------------------------------------------------------|----------------------------------------------------------------------------------------|

| | | | DATE | AMOUNT | |
|-------------------------------------------------------------|-----------------|--------------------------------|---------------------------------|--------------------------|----------|
| Full Name of Contributor | MO | DAY | YEAR | | |
| ABRAHAM ATIYEH | 6 | 7 | 2014 | \$ | 6,000.00 |
| Mailing Address | | | | | |
| City WHITEHALL | State PA | Zip Code (Plus 4) 18052 | | | |
| Employer Name | | | Occupation SELF-EMPLOYED | | |
| Employer Mailing Address/Principal Place of Business | | City | State | Zip Code (Plus 4) | |

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

| |
|-------------------|
| PAGE TOTAL |
| \$ 6,000.00 |

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 FRIENDS OF LISA BOSCOLA | Reporting Period From: <u>5/6/2014</u> To: <u>6/9/2014</u> |
|-----------------------------------------------------------------------------|--------------------------------------------------------------------------|

| | | | | DATE | AMOUNT | | |
|-----------------------------------------------|--------------------|-----------------------------------|--|------|--------|------|-------------|
| | | | | MO | DAY | YEAR | |
| Full Name THOMAS SEVERINSON | | | | 6 | 7 | 2014 | \$ 6,000.00 |
| Mailing Address | | | | | | | |
| City PEN ARGYL | State PA | Zip Code (Plus 4) 18072 | | | | | |
| Receipt Description REFUND OF SERVICES | | | | | | | |
| Full Name NATIONAL PENN BANK | | | | 5 | 31 | 2014 | \$ 11.44 |
| Mailing Address | | | | | | | |
| City BOYERTOWN | State PA | Zip Code (Plus 4) 19512 | | | | | |
| Receipt Description INTEREST EARNED | | | | | | | |

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

| |
|-------------------|
| PAGE TOTAL |
| \$ 6,011.44 |

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 | |
| FRIENDS OF LISA BOSCOLA | | From: <u>5/6/2014</u> To: <u>6/9/2014</u> | |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR | | | |
| TOTAL for the Reporting Period | | (1) | \$ 0.00 |
| 2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F) | | | |
| TOTAL for the Reporting Period | | (2) | \$ 0.00 |
| 3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G) | | | |
| TOTAL for the Reporting Period | | (3) | \$ 1,220.00 |
| TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.) | | | \$ 1,220.00 |

SCHEDULE II
PART F
IN-KIND CONTRIBUTIONS RECEIVED
VALUE OF \$50.01 TO \$250.00

| | |
|---------------------------------------|----------------------------------------------------------------------|
| Name of Filing Committee or Candidate | Reporting Period From: To: |
|---------------------------------------|----------------------------------------------------------------------|

| | | | DATE | | | AMOUNT |
|-----------------------------------------------------------------------------------------------------|-------|-------------------|------|-----|------|----------------------------------|
| Full Name of Contributor | | | MO | DAY | YEAR | \$ 0.00 |
| Mailing Address | | | | | | |
| 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 FRIENDS OF LISA BOSCOLA | Reporting Period From: <u>5/6/2014</u> To: <u>6/9/2014</u> |
|-----------------------------------------------------------------------------|--------------------------------------------------------------------------|

| | | | | DATE | | AMOUNT | |
|------------------------------------------------------|--|----------|------------------------|------------|------------------|-----------------------------------------------|-------------|
| Full Name of Contributor DIGIVIEW OUTDOOR LLC | | | | MO | DAY | YEAR | \$ 1,000.00 |
| Mailing Address | | | | 5 | 13 | 2014 | |
| City WHITEHALL | | State PA | Zip Code(Plus 4) 18052 | | | | |
| Employer of Contributor ABE ATIYEH | | | | Occupation | | OWNER | |
| Employer Mailing Address/Principal Place of Business | | | City | State | Zip Code(Plus 4) | Description of Contribution BILLBOARD ADS. | |

| | | | | | | | |
|-----------------------------------------------------------------------------------------------------|----------|------------------------|-------|------------------|-----------------------------------------------------------|------|------------------------|
| Full Name of Contributor FRIENDS OF BOB DONCHEZ | | | | MO | DAY | YEAR | \$ 220.00 |
| Mailing Address | | | | 5 | 22 | 2014 | |
| City BETHLEHEM | State PA | Zip Code(Plus 4) 18017 | | | | | |
| Employer of Contributor | | | | Occupation | | | |
| Employer Mailing Address/Principal Place of Business | | City | State | Zip Code(Plus 4) | Description of Contribution USE OF BULK MAILING PERMIT | | |
| Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3. | | | | | | | PAGE TOTAL 1,220.00 |

SCHEDULE III STATEMENT OF EXPENDITURES

| | |
|----------------------------------------------|------------------------------------------|
| Name of Filing Committee or Candidate | Reporting Period |
| FRIENDS OF LISA BOSCOLA | From <u>5/6/2014</u> To: <u>6/9/2014</u> |

| DATE | | | | AMOUNT |
|-------------------------|-----------------|--------------------------------|-------------------------------------------------------------|--------------|
| To Whom Paid | MO | DAY | YEAR | |
| POSTMASTER GENERAL | | | | |
| Mailing Address | 5 | 7 | 2014 | \$ 8,370.99 |
| City BETHLEHEM | State PA | Zip Code (Plus 4) 18018 | Description of Expenditure POSTAGE COSTS | |
| To Whom Paid | MO | DAY | YEAR | |
| THOMAS SEVERINSON | | | | |
| Mailing Address | 5 | 7 | 2014 | \$ 2,500.00 |
| City PEN ARGYL | State PA | Zip Code (Plus 4) 18072 | Description of Expenditure CONSULTING FEE | |
| To Whom Paid | MO | DAY | YEAR | |
| THOMAS SEVERINSON | | | | |
| Mailing Address | 5 | 7 | 2014 | \$ 7,369.00 |
| City PEN ARGYL | State PA | Zip Code (Plus 4) 18072 | Description of Expenditure ROBO CALLS - ID | |
| To Whom Paid | MO | DAY | YEAR | |
| THOMAS SEVERINSON | | | | |
| Mailing Address | 5 | 7 | 2014 | \$ 11,682.00 |
| City PEN ARGYL | State PA | Zip Code (Plus 4) 18072 | Description of Expenditure PRINTING COSTS | |
| To Whom Paid | MO | DAY | YEAR | |
| LEUKEMIA SOCIETY | | | | |
| Mailing Address | 5 | 10 | 2014 | \$ 1,125.00 |
| City ALLENTOWN | State PA | Zip Code (Plus 4) 18109 | Description of Expenditure DINNER TICKETS & DONATION | |
| To Whom Paid | MO | DAY | YEAR | |
| ED O'BRIEN DINNER DANCE | | | | |
| Mailing Address | 5 | 9 | 2014 | \$ 195.00 |
| City BETHLEHEM | State PA | Zip Code (Plus 4) 18018 | Description of Expenditure AD | |

| | | | | | | |
|-------------------------|---------------|-------|-------------------|-----|----------------------------|-------------|
| To Whom Paid | | | MO | DAY | YEAR | \$ 150.00 |
| LV LABOR COUNCIL | | | | | | |
| Mailing Address | | | 5 | 12 | 2014 | |
| City | LEHIGH VALLEY | State | Zip Code (Plus 4) | | Description of Expenditure | |
| | PA | | 18002 | | AD | |
| To Whom Paid | | | MO | DAY | YEAR | \$ 75.00 |
| AAUWDUES | | | | | | |
| Mailing Address | | | 5 | 10 | 2014 | |
| City | BETHLEHEM | State | Zip Code (Plus 4) | | Description of Expenditure | |
| | PA | | 18017 | | DUES | |
| To Whom Paid | | | MO | DAY | YEAR | \$ 60.00 |
| LV SPORTS HALL OF FAME | | | | | | |
| Mailing Address | | | 5 | 10 | 2014 | |
| City | CATASAUQUA | State | Zip Code (Plus 4) | | Description of Expenditure | |
| | PA | | 18032 | | AD | |
| To Whom Paid | | | MO | DAY | YEAR | \$ 10.00 |
| COPLAY DEMO. CLUB. | | | | | | |
| Mailing Address | | | 5 | 10 | 2014 | |
| City | COPLAY | State | Zip Code (Plus 4) | | Description of Expenditure | |
| | PA | | 18037 | | DUES | |
| To Whom Paid | | | MO | DAY | YEAR | \$ 100.00 |
| UNICO | | | | | | |
| Mailing Address | | | 5 | 10 | 2014 | |
| City | BETHLEHEM | State | Zip Code (Plus 4) | | Description of Expenditure | |
| | PA | | 18017 | | DUES | |
| To Whom Paid | | | MO | DAY | YEAR | \$ 85.00 |
| CETRONIA AMBULANCE | | | | | | |
| Mailing Address | | | 5 | 14 | 2014 | |
| City | ALLENTON | State | Zip Code (Plus 4) | | Description of Expenditure | |
| | PA | | 18104 | | AUCTION COST | |
| To Whom Paid | | | MO | DAY | YEAR | \$ 2,500.00 |
| FRIENDS OF LEANNA WASH. | | | | | | |
| Mailing Address | | | 5 | 14 | 2014 | |
| City | PHILADELPHIA | State | Zip Code (Plus 4) | | Description of Expenditure | |
| | PA | | 19118 | | DONATION | |
| To Whom Paid | | | MO | DAY | YEAR | \$ 145.00 |
| FRIENDS OF LISA BOSCOLA | | | | | | |
| Mailing Address | | | 5 | 15 | 2014 | |
| City | BETHLEHEM | State | Zip Code (Plus 4) | | Description of Expenditure | |
| | PA | | 18016 | | ELEC. DAY LUNCHES | |

| | | | | | | |
|-------------------------------------------|--------------------|-----------------------------------|-----------------------------------------------------|------------|-------------|------------------|
| To Whom Paid POSTMASTER GENERAL | | | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address | | | 5 | 15 | 2014 | |
| City BETHLEHEM | State PA | Zip Code (Plus 4) 18016 | Description of Expenditure POSTAGE PERMIT | | | |

| | | | | | | |
|-------------------------------------------------|--------------------|-----------------------------------|-----------------------------------------------|------------|-------------|-----------------|
| To Whom Paid SLATE BELT CORVETTE CLUB | | | MO | DAY | YEAR | \$ 50.00 |
| Mailing Address | | | 5 | 15 | 2014 | |
| City MT BETHEL | State PA | Zip Code (Plus 4) 18343 | Description of Expenditure DONATION | | | |

| | | | | | | |
|------------------------------------------|--------------------|-----------------------------------|-----------------------------------------------|------------|-------------|------------------|
| To Whom Paid YWCA OF BETHLEHEM | | | MO | DAY | YEAR | \$ 100.00 |
| Mailing Address | | | 5 | 30 | 2014 | |
| City BETHLEHEM | State PA | Zip Code (Plus 4) 18017 | Description of Expenditure DONATION | | | |

| | | | | | | |
|--------------------------------------------------------------------------------|--|--|--|--|--|---------------------|
| Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D. | | | | | | PAGE TOTAL |
| | | | | | | \$ 34,616.99 |

