

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: PO BOX 1294											
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 POST-PRIMARY	3. X	AMENDMENT REPORT?	Yes	No <input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	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
---	--------------

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

PAGE TOTAL	
\$	0.00

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)					

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							
Mailing Address 1177 6TH STREET				6	7	2014	\$ 6,000.00
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		
Full Name THOMAS SEVERINSON				MO	DAY	YEAR	\$ 6,000.00
Mailing Address 901 E WALNUT STREET				6	7	2014	
City PEN ARGYL	State PA	Zip Code (Plus 4) 18072					
Receipt Description REFUND OF SERVICES							

Full Name NATIONAL PENN BANK				MO	DAY	YEAR	\$ 11.44
Mailing Address BOX 547				5	31	2014	
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 1177 N. 6TH STREET					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 960 DEVONSHIRE RD				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 POSTMASTER GENERAL			MO	DAY	YEAR	\$ 8,370.99
Mailing Address 908 WOOD ST			5	7	2014	
City BETHLEHEM	State PA	Zip Code (Plus 4) 18018	Description of Expenditure POSTAGE COSTS			
To Whom Paid THOMAS SEVERINSON			MO	DAY	YEAR	\$ 2,500.00
Mailing Address 901 E WALNUT ST.			5	7	2014	
City PEN ARGYL	State PA	Zip Code (Plus 4) 18072	Description of Expenditure CONSULTING FEE			
To Whom Paid THOMAS SEVERINSON			MO	DAY	YEAR	\$ 7,369.00
Mailing Address 901 E WALNUT ST.			5	7	2014	
City PEN ARGYL	State PA	Zip Code (Plus 4) 18072	Description of Expenditure ROBO CALLS - ID			
To Whom Paid THOMAS SEVERINSON			MO	DAY	YEAR	\$ 11,682.00
Mailing Address 901 E WALNUT ST.			5	7	2014	
City PEN ARGYL	State PA	Zip Code (Plus 4) 18072	Description of Expenditure PRINTING COSTS			
To Whom Paid LEUKEMIA SOCIETY			MO	DAY	YEAR	\$ 1,125.00
Mailing Address 961 MARION BLVD			5	10	2014	
City ALLENTOWN	State PA	Zip Code (Plus 4) 18109	Description of Expenditure DINNER TICKETS & DONATION			

To Whom Paid ED O'BRIEN DINNER DANCE			MO	DAY	YEAR	\$ 195.00
Mailing Address 53 E LEHIGH ST			5	9	2014	
City BETHLEHEM	State PA	Zip Code (Plus 4) 18018	Description of Expenditure AD			

To Whom Paid LV LABOR COUNCIL			MO	DAY	YEAR	\$ 150.00
Mailing Address PO BOX 20226			5	12	2014	
City LEHIGH VALLEY	State PA	Zip Code (Plus 4) 18002	Description of Expenditure AD			

To Whom Paid AAUWDUES			MO	DAY	YEAR	\$ 75.00
Mailing Address C/O BETH CORRODA			5	10	2014	
City BETHLEHEM	State PA	Zip Code (Plus 4) 18017	Description of Expenditure DUES			

To Whom Paid LV SPORTS HALL OF FAME			MO	DAY	YEAR	\$ 60.00
Mailing Address 311 MULBERRY ST			5	10	2014	
City CATASAUQUA	State PA	Zip Code (Plus 4) 18032	Description of Expenditure AD			

To Whom Paid COPLAY DEMO. CLUB.			MO	DAY	YEAR	\$ 10.00
Mailing Address C/O BILL LEINER			5	10	2014	
City COPLAY	State PA	Zip Code (Plus 4) 18037	Description of Expenditure DUES			

To Whom Paid UNICO			MO	DAY	YEAR	\$ 100.00
Mailing Address C/O MARIO ANTFITEATRO			5	10	2014	
City BETHLEHEM	State PA	Zip Code (Plus 4) 18017	Description of Expenditure DUES			

To Whom Paid CETRONIA AMBULANCE			MO	DAY	YEAR	\$ 85.00
Mailing Address BROADWAY			5	14	2014	
City ALLENTON	State PA	Zip Code (Plus 4) 18104	Description of Expenditure AUCTION COST			

To Whom Paid FRIENDS OF LEANNA WASH.			MO	DAY	YEAR	\$ 2,500.00
Mailing Address BOX 27096			5	14	2014	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19118	Description of Expenditure DONATION			

To Whom Paid FRIENDS OF LISA BOSCOLA			MO	DAY	YEAR	\$ 145.00
Mailing Address BOX 1294			5	15	2014	
City BETHLEHEM	State PA	Zip Code (Plus 4) 18016	Description of Expenditure ELEC. DAY LUNCHES			

To Whom Paid POSTMASTER GENERAL			MO	DAY	YEAR	\$ 100.00
Mailing Address 908 WOOD STREET			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 BOX 283			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 1297 ADLER PLACE			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

