# **Campaign Finance Report**

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

Filer Identificat	ion 940(	092			Report		CANDI	DATE	СОМ	MITTEE	$\checkmark$	LOB	BYIST	
Number :					Filed B	-								
Name of Filing	Committee, Candic	late or L	obbyist:		FRIEND	SOF	LISA BOS	SCOLA						
Street Address:							_							
City:	BETHLEHEM						State:	PA		Zip Co	<b>de:</b> 18	016-1	294	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-		30 DA PRIM		POST- 3	3.	AMENDMENT REPORT?		Yes	Nc	$\checkmark$
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE		30 DA		POST- 6	5.	TERMIN REPORT		Yes	Nc	<ul> <li>Image: A start of the start of</li></ul>
report type)	ANNUAL REPORT	7. <b>X</b>	<b>Year</b> 2014				NG METHO			$\checkmark$	DISKE	TTE		
Name of Office	L Sought by Candida	te:					DATE O	F ELEC	TION	District Office Party Co Number Code				County Code
							мо	DAY	YEAR		<b>I</b>			•
							11	4	4 2014		(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAR			мо	DAY	YEAR	FC	OR OFFIC	E USE	ONLY	
Expenditures	s from:		11 25	20	014 <b>T</b>	0	12	3:	1 2014					
A. Amount Bro	ought Forward Fro	m Last R	leport			\$		1	71,001.85					
B. Total Monetary Contributions And Receipts (From Schedule					dule I)	\$		144.93						
C. Total Funds Available (Sum Of Lines A and B)						\$		1	71,146.78					
D. Total Expenditures (From Schedule III)					\$			6,331.32						
E. Ending Cash	n Balance (Subtrac	t Line D	From Line	C)		\$		16	54,815.46					
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedul	e II)	\$			0.00					
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	')		\$			0.00					
				AFF	IDAVI	Γ SE	CTION							
PART I - If this i	s a Committee rep	ort, trea	asurer sign	here. I	f this is	a Cai	ndidate re	eport, ca	ndidate si	gn here.				
I swear (or affirm correct and comp	) that this report, inc lete.	luding the	e attached sc	hedules	filed on	paper	or by elect	ronic mea	lium, are to	the best o	of my knov	vledge	and beli	ef , true
Sworn to and sub	scribed before me thi day of	s	20						Signatur	e of Perso	on Submitt	ing Rep	oort	
						-				Prin	nted Name			
My Commission E	Signatu	ire												
	MO	D	AY	YR		-		Area	Code	Ema Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report of a can	didate's	authorized	Comm	ittee, Ca	andid	ate shall	sign her	·e.	•				
I swear (or affirm No 320) as amend	) that to the best of r ed.	my knowl	edge and beli	ef this	political	comm	ittee has n	ot violate	d any provis	sions of th	e act of Ju	ine 3,1	937 (P.L	1333,
Sworn to and subs	cribed before me this									Signature	of Candida	ite		
	day of					-				Drint	ed Name			
	Signature					-				Frint				
My Commission Ex										Ema	ail			
	мо	D	AY	YR				Area C	ode	D	aytime Te	elephon	e Numb	er

### SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Detailed Summary Page										
Name of Filing Committee or Candidate	Reporting	g Period								
FRIENDS OF LISA BOSCOLA	From:	<u>11/25/201</u>	<u>4</u> To:	<u>12/31/2014</u>						
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)			\$	0.00						
TOTAL for the Reporting	g 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)			\$	0.00						
TOTAL for the Reporting	g Period	(3)	\$	0.00						
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)										
TOTAL for the Reporting	g Period	(4)	\$	144.93						
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			\$	144.93						
			Į							

# 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 Candidat	e		Re	porting	Period			
			Fro	om:				
		·			DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4	4)					
								PAGE TOTAL
Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.								0.00

Use this Part to it	emize all other 50.01 to \$250.0	1 TO \$250.00 contribution 00 in the repo	s wi ortin	ith an ng per	aggreg iod.			rom
Name of Filing Committee or Candida	te		Rep	orting P	eriod			
From: To					Тс	0:		
					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, Detail	ed Summary Pag	je, Se	ection 2	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					
			From:			То:		
				DA	TE		ļ	AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		0.00
Mailing Address							\$	0.00
City	State	Zip Code	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Sched	lule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	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			Rep	orting Pe	riod			
			Froi	n:		Т	):	
				D	ATE		АМ	IOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (Pl	ıs 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page	e, Sectio	on 3.			P#	<b>AGE TOTAL</b> 0.00

### 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 Can	didate		Report	ing Perio	d			
FRIENDS OF LISA BOSCOLA			From:		11/25/201	<u>4</u> To:		<u>12/31/2014</u>
				D	ATE			AMOUNT
Full Name NATIONAL PENN BANK				мо	DAY	YEAR	\$	144.93
Mailing Address				12	31	201	4	
City BOYERTOWN	State	Zip Code (	Plus 4)		01			
	PA	19512						
Receipt Description INTEREST	Г							
			- ··	_				PAGE TOTAL
Enter Grand Total of Part E on S	chequie 1, Detailed	i Summary Page,	Section	4.			\$	144.93

# 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 Perio	od	
FRIENDS OF LISA BOSCOLA	From:	<u>11/25/2014</u> <b>To:</b>	<u>12/31/2014</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER 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, 1		\$	0.00

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

### VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporting	Period				
			From:			То:		
				DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address						<b> </b> \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•	-	- <b>!</b>					
Enter Grand Total of Part F on Sche Section 2.	dule II, In-Kind C	Contributions Deta	iled Sum	mary Pag	ie,		PAGE TOTAL	
						\$	(	0.00

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

Name of Filing Committee or Candidate			Rej	porting I	Period		
			Fro	om:		То:	
					DATE		AMOUNT
Full Name of Contributor				мо	DAY	YEAR	
Mailing Address			-				<b>\$</b> 0.00
City	State	Zip Code(Plus 4)					
Employer of Contributor	•	·		Occupa	ation		•
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 Scho Summary Page, Section 3.	edule II, In-Kin	d Contributions D	etaile	ed			<b>PAGE TOTAL</b> 0.00

# SCHEDULE III STATEMENT OF EXPENDITURES

Name	e of Filing Committee or Candidate			Reporti	ng Period				
FRIE	NDS OF LISA BOSCOLA			From	<u>11/2</u>	<u>5/2014</u>	То:	<u>12/31/2014</u>	
					DATE			AMOUNT	
To Wr	nom Paid			мо	DAY	YEAR			
JOSE	PH KELLY								
Mailin	g Address			12	15	2014	\$	1,500.00	
City	BETHLEHEM	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•		
		PA	18018	CAMPAI	GN REIMB	URSEME	NT		
-	iom Paid ICAN PRINTING UNLIMITED			мо	DAY	YEAR			
	g Address			12	19	2014	\$	1,284.72	
City	EASTON	State	Zip Code (Plus 4)	Descrip	 tion of Exp	enditure			
		PA	18042		MAS CARE				
To W	nom Paid			мо	DAY	YEAR			
WILLI	VILLIAMS FOR MAYOR								
Mailing Address				12	19	2014	\$	2,500.00	
City	PHILADELPHIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		PA	19101	CONTRI	BUTION				
To Wh	nom Paid			мо	DAY	YEAR			
EAST	ON BOYS BASKETBALL BOOSTERS	5							
Mailin	g Address			12	19	2014	\$	50.00	
City	EASTON	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		РА	18045	CONTRI	BUTION				
	nom Paid			мо	DAY	YEAR			
	DNALIZED BOOKS GIVEN TO CHIL	_DREN						375.00	
Mailin	g Address	1	•	12	19	2014	\$	375.00	
City	ALLENTOWN	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		РА	18103	CONTRI	BUTION				
	nom Paid			мо	DAY	YEAR			
	TED OLIVE							257.00	
Mailin	g Address			12	18	2014	\$	357.00	
City	BETHLEHEM	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
		PA	18018	CAMPAIGN EXPENSE					

To W	nom Paid			мо	DAY	YEAR		
US PC	OST MASTER			110	2	12/11		
Mailin	g Address			12	19	2014	\$	264.60
City	BETHLEHEM	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
	PA 18015 POSTAGE							
	nter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							PAGE TOTAL
Enter	Grand Total of Exper	iditures on Page 1, Re	eport Cover Page, Item D				\$	6,331.32