### **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 :	<b>on</b> 94	00092				Rep File			CAN	DII	DATE		COMM	IITTEE	<b>✓</b>	LOBI	BYIST		
Name of Filing C	committee, Can	didate or	Lobby	rist:	Ī	BOS	COI	A, LI	SA FRI	ΕN	DS OF	:							
Street Address:	PO BOX 12	94																	
City:	BETHLEHEN	1	_						State:		PA			Zip Cod	8016-1294		_		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1. <b>X</b>		FRIDAY MARY	PRE-	. 2	2.	30 DA		P	OST-			AMENDMENT REPORT?		Yes	<b>✓</b>	lo	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.		FRIDAY	/ PRE	- 5	5.		30 DAY F ELECTION			OST- 6.		TERMINA REPORT?		Yes	N	lo	<b>\</b>
report type)	ANNUAL REPO	<b>RT</b> 7.	Yea	r 2016					IG MET CHECK		_			PAPER		<b>√</b>	DISK	ETTE	
Name of Office S	- Sought by Candi	date:	-						DATE	OI	F ELE	CTIC	ON	District Number	Office Code	Par	ty Cod	e Cour	
SENATOR IN T	HE CENIEDAL AS	CEMBIV							МО		DAY	Y	EAR	18	STS	DEN	1	48	
SENATOR IN TI	IL GENERAL AS	JOLINDET								11		8	2016		(SEE INS	TRUCTI	ONS FO	CODES	6)
Summary of Expenditures		МО	D	PAY	YEAR				МО		DAY	Y	EAR	FO	R OFFIC	E USE	ONLY	•	
expenditures	irom:		1	1	20	016	Т	<u> </u>		3		7	2016						
A. Amount Brought Forward From Last Report  B. Total Monetary Contributions And Receipts (From Schedul								\$			:	206,	154.28						
, , , , , , , , , , , , , , , , , , ,					dule	I)	\$		27.44										
C. Total Funds Available (Sum Of Lines A and B)							\$			:	206,	181.72							
D. Total Expenditures (From Schedule III)							\$				12,	010.67							
E. Ending Cash Balance (Subtract Line D From Line C)				<u>;)</u>			\$			1	94,	171.05							
F. Value Of In-	Kind Contribution	ons Recei	ved (I	From Sc	hedul	e II)	)	\$	\$ 0.00										
G. Unpaid Debt	s And Obligatio	ns (From	Sche	dule IV	)			\$					0.00						
					AFF:	IDA	VI	ΓSE	CTIO	N									
PART I - If this is				_									_						
I swear (or affirm) correct and comple		ncluding ti	he atta	ched sch	edules	filed	on	paper	or by ele	ectr	onic me	edium	i, are to t	he best o	my knov	/ledge	and be	lief , tr	ue
Sworn to and subs	cribed before me	this	20							•		:	Signature	of Perso	n Submitt	ing Rep	ort		_
	Signa	ature						-		•				Prin	ted Name				_
My Commission Ex	xpires							_		-				Emai	il				
	МО		DAY		YR						Are	ea Co	de	Daytim	e Teleph	one Nu	mber		ᆜ
Part II- If this is	a report of a ca	andidate'	s auth	orized	Comm	ittee	e, C	andid	ate sha	all s	sign he	ere.							
I swear (or affirm) No 320) as amende		of my know	/ledge	and belie	f this	politi	ical	comm	ittee ha	s no	ot violat	ted a	ny provisi	ons of the	e act of Ju	ne 3,1	937 (P	.L. 133	3,
Sworn to and subsc	ribed before me tl day of	nis	20										Si	gnature o	of Candida	te			_
			20					-						Printe	d Name				- <b> </b>
	Signatu	re						-		-				Ema	il				_
My Commission Exp	ires													Ema					_
	мо		DAY		YR			-			Area	Code		Da	ytime Te	lephor	e Num	ber	_

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	g Period		
BOSCOLA, LISA FRIENDS OF	From:	1/1/201	<u>6</u> To:	<u>3/7/2016</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)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	) Period	(4)	\$	27.44
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			\$	27.44

#### **PART A**

### **CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES**

\$50.01 TO \$250.00

	his Part to itemize onl with an aggregate val	-			-			
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		1			DATE			AMOUNT
Full Name of Contribution	ng Committee			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

## 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 Filling Committee of Candidate			Reporting Period From: To:					
			l		DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
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:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00

### 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			Rep	orting Pe	riod			
			Fror	n:		То	:	
				D/	ATE		АМ	OUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page,	Section	on 3.			PA \$	<b>GE TOTAL</b> 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 Co	andidate		Report	ing Perio	d			
BOSCOLA, LISA FRIENDS OF			From:		1/1/201	<u>6</u> To:	<u>3/7</u>	<u>7/2016</u>
_				D	ATE		AMOU	NT
Full Name								
National Penn Bank				МО	DAY	YEAR		
Mailing Address PO box 54	7						\$	14.62
<b>City</b> Boyertown	State	Zip Code (F	Plus 4)	1	29	2016		
Boyertown	PA	19512						
Receipt Description Intere	est Payment	<b>,</b>						
Full Name								
National Penn Bank				МО	DAY	YEAR		
Mailing Address PO box 54	7						<b>\$</b>	12.82
<b>City</b> Boyertown	State	Zip Code (F	Plus 4)	2	29	2016		
,	PA	19512						
Receipt Description Interes	est Payment	<b>1</b>						
							PAGE 1	FOTAL

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

\$ 27.44

#### **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		
BOSCOLA, LISA FRIENDS OF	From:	<u>1/1/2016</u> <b>To:</b>	<u>3/7/2016</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,		\$	0.00

# SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OF \$50.01 TO \$250.00** 

Name of Filing Committee or Candid	late		Reportin	g Period			
			From:			To:	
				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 S	Schedule II. In-Kir	nd Contributions Deta	iled Sum	mary Pag	ae. F		PAGE TOTAL
Section 2.				,;	,-,	\$	
1						Ψ	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidat	e				Re	porting F	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									<b>\$</b>	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor	•		•			Occupa	tion		•	
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, I	In-Kind	Contributi	ons De	taile	ed				PAGE TOTAL 0.00

### STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting	Period		
BOSCOLA, LISA FRIENDS OF	From	1/1/2016	То:	<u>3/7/2016</u>
		DATE		AMOUNT

				DATE		AMOUNT
To Whom Paid Levin promotional Products			мо	DAY	YEAR	
Mailing Address 3301-C Hoffman St			1	5	2016	\$ 1,325.20
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17110		otion of Exp		
<b>To Whom Paid</b> Northampton County Democratic Comm	nittee		МО	DAY	YEAR	
Mailing Address 227 Mechanic St			2	10	2016	\$ 300.00
City Wind Gap PA State Zip Code (Plus 4) 18091				otion of Exp Gala Ticket		
<b>To Whom Paid</b> Northampton County Democratic Committee			МО	DAY	YEAR	
Mailing Address 227 Mechanic St			1	22	2016	\$ 1,500.00
<b>City</b> Wind Gap	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18091	<b>Descrip</b> Sponso	otion of Exp ership	penditure	
To Whom Paid Easton Area Democratic Committee			мо	DAY	YEAR	
Mailing Address 91 Larry Holmes Dri	ve Suite 120		1	22	2016	\$ 500.00
City Easton	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18042	<b>Descrip</b> Sponso	otion of Exp orship	penditure	
<b>To Whom Paid</b> Morganelli PAC			МО	DAY	YEAR	
Mailing Address 835 Barnsdale Rd			1	15	2016	\$ 3,000.00
<b>City</b> Bethlehem	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18018		otion of Exp ign Donation		

<b>To Whom Paid</b> The Brick	МО	DAY	YEAR			
Mailing Address 1 W. Broad #101	1	6	2016	\$		47.14
City Bethlehem PA Zip Code (Plus 4) 18018	Description of Expenditure Meeting food					
To Whom Paid Lisa Boscola	мо	DAY	YEAR			
Mailing Address 385 Palmetto Dr	1	16	2016	\$		376.27
City Easton State Zip Code (Plus 4) PA 18045	Description of Expenditure Phone Reimbursment					
To Whom Paid Joe Kelly	мо	DAY	YEAR			
Mailing Address 915 Linden	1	15	2016	\$		443.06
City Bethlehem State Zip Code (Plus 4) PA 18018	Description of Expenditure Reimbursement Office Luncheon					
			rinee Lan			
To Whom Paid Joe Kelly	МО	DAY	YEAR			
				\$		380.00
Joe Kelly	MO 1 Descrip	DAY	YEAR 2016	\$	unch	380.00
Joe Kelly  Mailing Address 915 Linden  City Bethlehem State Zip Code (Plus 4)	MO 1 Descrip	DAY 22	YEAR 2016	\$	unch	380.00
Joe Kelly  Mailing Address 915 Linden  City Bethlehem State Zip Code (Plus 4) PA 18018  To Whom Paid	MO 1 Descrip	DAY  22  Dition of Expursement F	YEAR 2016 Denditure	\$	unch	380.00
Joe Kelly  Mailing Address 915 Linden  City Bethlehem State Zip Code (Plus 4) 18018  To Whom Paid WS Group	MO  1  Descrip Reimbu  MO  2  Descrip	DAY  22  ption of Expursement F	YEAR  2016  Penditure Phone & D  YEAR  2016	\$ Ponor L	unch	
Mailing Address 915 Linden  City Bethlehem Paid WS Group  Mailing Address 219 State Street  City Harrisburg State Street	MO  1  Descrip Reimbu  MO  2  Descrip	DAY  22  ption of Expansion of	YEAR  2016  Penditure Phone & D  YEAR  2016	\$ Ponor L	unch	
Mailing Address 915 Linden  City Bethlehem Paid WS Group  Mailing Address 219 State Street  City Harrisburg PA 2ip Code (Plus 4) 18018  State PA 2ip Code (Plus 4) 18018  Zip Code (Plus 4) 18018  Zip Code (Plus 4) 17101	MO  1  Description And American Consulting C	DAY  22  ption of Expansion of	YEAR  2016  Phone & D  YEAR  2016  penditure	\$ Ponor L	unch	

						FAGL	- 13	
To Whom Paid NCYFDF, INC			мо	DAY	YEAR			
Mailing Address P.O. BOX 462			1	15	2016	\$	70.00	
<b>City</b> Stockertown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18083		escription of Expenditure /hitetail Deer ClassicFundraiser Donation				
To Whom Paid Northampton-Monroe County Farm Bureau			МО	DAY	YEAR			
Mailing Address 510 S. 31st Street P.O. Box 8736			2	4	2016	\$	75.00	
City Camp Hill	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17001		scription of Expenditure mbership Dues				
<b>To Whom Paid</b> Verizon			мо	DAY	YEAR			
Mailing Address 4773 Freemansburg Ave Ste D106			2	9	2016	\$	40.00	
<b>City</b> Bethlehem	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18045	Description of Expenditure Phone Upgrade Fee					
<b>To Whom Paid</b> Catholic Charities			МО	DAY	YEAR			
Mailing Address 900 S. Woodward St			2	4	2016	\$	450.00	
<b>City</b> Allentown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18103		<b>Description of Expenditure</b> Fundraising Gala Tickets				
<b>To Whom Paid</b> Bethlehem Food CO-OP			МО	DAY	YEAR			
Mailing Address P.O. BOX 5524			1	22	2016	\$	300.00	
<b>City</b> Bethlehem	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18015	Description of Expenditure Food co-op donation					
<b>To Whom Paid</b> National Penn Bank			МО	DAY	YEAR			
Mailing Address PO Box 547			1	l				
Mailing Address PO Box 547			1	29	2016	\$	2.00	

To Whom Paid National Penn Bank			MO DAY YEAR				
Mailing Address PO Box 547			2	29	2016	\$	2.00
<b>City</b> Boyertown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19512	<b>Descrip</b> Bank F				
Enter Grand Total of Expe	nditures on Page 1, Re	port Cover Page, Item D	•			\$	12,010.67
					'		