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 :	on 92	100092				Rep File			CAN	DII	DATE		COM	1ITTEE	✓	LOB	BYIST		
Name of Filing C	ommittee, Can	didate or	Lob	obyist:		BOS	COI	_A, LI	SA FRI	ΕN	DS OF	=							
Street Address:	1546 BARI	NER COU	RT																
City:	BETHLEHE	М							State:		PA			Zip Cod	le: 18	015			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.		ND FRIDA' PRIMARY	Y PRE-	- 2	2. X	30 DA		P	OST-	3.		AMENDM REPORT?		Yes	١	0	√
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.		ND FRIDAY	Y PRE	- !	5.	30 DA		Р	OST-	6.		TERMINA REPORT?		Yes	١	0	\
report type)	ANNUAL REPO	RT 7.	Y	/ear 2000					NG MET CHECK		_			PAPER		\	DISK	ETTE	
Name of Office S	ought by Cand	idate:							DATE	0	F ELE	CTIC	N	District Number	Office Code	Pai	ty Cod	e Cour Code	
SENATOR IN TH	HE GENERAL A	SSEMBLY	1						МО		DAY		EAR		STS	DEN	1	48	
		110		DAY	VEAD					11		7	2000		(SEE INS)
Summary of Expenditures		МО	1	DAY 1	YEAR	1	Т	0	МО	3	DAY	20	EAR 2000	FO	R OFFIC	E USE	ONLY		
A. Amount Bro	ught Forward F	rom Last	Rep					\$			•		924.08						
B. Total Moneta	ary Contributio	ns And R	ecei	pts (From	Sche	dule	I)	\$					500.00						
C. Total Funds	Available (Sum	Of Lines	A a	ınd B)				\$				32,	424.08						
D. Total Expend	ditures (From S	Schedule	III))				\$				1,:	172.28						
E. Ending Cash	Balance (Subt	ract Line	D Fr	rom Line (C)			\$				31,2	251.80						
F. Value Of In-	Kind Contributi	ons Rece	ived	d (From So	chedul	le II)	\$					0.00						
G. Unpaid Debt	s And Obligation	ons (Fron	n Scl	hedule IV)			\$				Ģ	939.90						
					AFF	IDA	۱VI	T SE	CTIO	N									
PART I - If this is	a Committee i	report, tr	eası	urer sign l	nere. I	[f thi	is is	a Car	ndidate	re	port, c	candi	date sig	ın here.					
I swear (or affirm) correct and comple		including t	the a	ittached sch	nedules	filed	d on	paper	or by ele	ectr	onic m	edium	, are to t	he best o	f my knov	vledge	and be	lief , tr	ue
Sworn to and subs	cribed before me day of	this	2	20						•		\$	Signature	of Perso	n Submitt	ing Re _l	ort		
	Sign	ature						-		•				Prin	ted Name				
My Commission Ex	rpires							_						Emai	i				
	МО		DAY	r	YR						Are	ea Co	de	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a c	andidate	's au	uthorized	Comn	itte	e, C	andid	ate sha	ıll s	sign he	ere.							
I swear (or affirm) No 320) as amende		of my knov	wled	ge and beli	ef this	polit	ical	comm	ittee has	s no	ot viola	ted ar	ny provis	ions of the	e act of Ju	ine 3,1	937 (P	.L. 133	з,
Sworn to and subsc	ribed before me t day of	his		20									s	ignature o	of Candida	ite			-
				20				-						Printe	d Name				-
My Commission Exp	Signatu	ire						-		-				Ema	il				-
•								-											-
	МО		DAY	1	YR						Area	Code		Da	ytime Te	elephor	ie Num	ber	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period		
BOSCOLA, LISA FRIENDS OF	From:	To:	3/20/2000
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)		\$	500.00
All Other Contributions (Part D)		\$	0.00
TOTAL for the Reporting	Period (3)	\$	500.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)			
TOTAL for the Reporting	Period (4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page		\$	500.00

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 Commit	tee or Candidate			Reporting	Period			
				From:		То	•	
			•		DATE			AMOUNT
Full Name of Contributing	g Committee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	St	ate	Zip Code (Plus 4)					

PAGE TOTAL
0.00

Enter Grand Total of Part A on Schedule I, Detailed Summary Page, Section 2.

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.

Name of Filing Commi	ttee or Candidate		Rep	orting P	eriod			
			Fror	n:		To	o:	
					DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						

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		
BOSCOLA, LISA FRIENDS OF	From:	То:	3/20/2000

			DA	TE		AMOUNT	
Full Name of Contributing Committee			мо	DAY	YEAR		
PENNA RADIOLOGY PAC				5 A.	127110	\$	500.00
Mailing Address PO BOX 175			1	24	2000		
City LANDISVILLE	State	Zip Code (Plus 4)	_		2000		
	PA	17538					

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

PAGE TOTAL \$ 500.00

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:		To):	
				D	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	s 4)					
Employer Name		•		Occupa	tion			
Employer Mailing Address/Principal Pla	ce of Business	City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Scho	dule I, Detailed S	Summary Page,	, Sectio	on 3.		:	\$	PAGE TOTAL 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 Candidate		Report	ing Peri	od			
			From:			То:		
					ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address								
City	State	Zip Code (P	lus 4)					
Receipt Description	'	,		<u> </u>		_ !	•	
			· ··	_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule 1, Detailed	i Summary Page, S	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		
BOSCOLA, LISA FRIENDS OF	From:	To:	<u>3/20/2000</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 Car	ame of Filing Committee or Candidate Rep							
							:	
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	•		•	•		•		
					-			
Enter Grand Total of Part F o	n Schedule II, In-Ki	nd Contributions Detai	led Sun	mary Pa	ge,		PAGE TOTAL	•
Section 2.						\$	(0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								\$		0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zij	p Code(Plus 4)	Descr	iptio	n of Contribution	on
Enter Grand Total of Part G on Sch	edule II. In-K	ind	Contributions D	etaile	ed				PAGE TOT	ΓAL
Summary Page, Section 3.					-					0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period		
BOSCOLA, LISA FRIENDS OF	From	То:	<u>3/20/2000</u>

				DATE			AMOUNT	
To Whom Paid			МО	DAY	YEAR			
CONTINENTAL PRESS INC			М		I Z/IIX			
Mailing Address 520 E BAINBRIDGE ST			1	20	2000	\$	288.00	
City ELIZABETHTOWN State Zip Code (Plus 4)			Description of Expenditure					
	PA	17022	COSTS FOR ADDL CALENDARS					
To Whom Paid			мо	DAY	YEAR			
N C DEMOCRATIC COMMITTEE			МО		ILAK			
Mailing Address 40 SCHOENECK AVE			1	24	2000	\$	35.00	
City NAZARETH State Zip Code (Plus 4)			Description of Expenditure					
	PA	18064	DINNER TICKETS					
To Whom Paid			мо	DAY	YEAR			
AMERICAN CANCER SOCIETY			МО		ILAK			
Mailing Address 2121 CITY LINE RD			1	24	2000	\$	100.00	
City BETHLEHEM State Zip Code (Plus 4)			Description of Expenditure					
	PA	18017	POLITICAL AD					
To Whom Paid			мо	DAY	YEAR			
BETHLEHEM CHAMBER OF COMMERC	Е		М		IZAK			
Mailing Address 509 MAIN ST			1	31	2000	\$	12.00	
City BETHLEHEM	State	Zip Code (Plus 4)	Description of Expenditure					
	PA	18018	LUNCH TICKETS					
To Whom Paid			мо	DAY	YEAR			
MONROE CTY HONORARY SOCIETY			МО		ILAK			
Mailing Address PO BOX 523			1	31	2000	\$	100.00	
City KRESGEVILLE	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	18333	DUES					
To Whom Paid			МО	DAY	YEAR			
UNITE			MO		ILAK			
Mailing Address C/O NORMA STROUSE 1950 S HALL ST			2	1	2000	\$	50.00	
City ALLENTOWN	State	Zip Code (Plus 4)						
	PA	18103						
	TA 10103 DIMER HEREIS							

								PAGE 12	
To Whom Paid				МО	DAY	YEAR			
ST ANTHONYS YOUTH CENTER			М	DAT	ILAK				
Mailing Address	s 901 WASHINGTON	ST		2	4	2000	\$	25.00	
City EISTON I		State	Zip Code (Plus 4)	Description of Expenditure					
		PA	18042	POLITIC	CAL AD				
To Whom Paid				МО	DAY	YEAR			
CONTINENTAL PRESS INC			MO	DAT	IEAR				
Mailing Address 520 E BAINBRIDGE ST			2	7	2000	\$	17.28		
City ELIZABETHTOWN		State	Zip Code (Plus 4)	Descript	tion of Exp	enditure			
		PA	17022	ADDL SENATE CALENDARS BA			BALAN	CE DUE	
To Whom Paid				МО	DAY	YEAR			
CM CRAIG COMMUNITY MAPS			1-10	J					
Mailing Address	s 8 MACBRIDE DRIVE			2	11	2000	\$	195.00	
City SPRING	G CITY	State	Zip Code (Plus 4)	Description of Expenditure					
		PA	19475	PD					
To Whom Paid				мо	DAY	YEAR			
COMMITTEE TO ELECT JOHN MORGANELLI									
Mailing Address 935 BARNSDALE DR			2	28	2000	\$	100.00		
City BETHLE	HEM	State	Zip Code (Plus 4)	Description of Expenditure					
PA 18017				CONTRIBUTION					
To Whom Paid			МО	DAY	YEAR				
A O H DANIEL RICE FUND									
Mailing Address VAN BILTNER HALL 538 LEHIGH ST			3	7	2000	\$	50.00		
City BETHLE	HEM	State	Zip Code (Plus 4)	Description of Expenditure					
PA 18018				DINNER TICKETS					
To Whom Paid				МО	DAY	YEAR			
COMMITTEE TO ELECT ED OBRIEN									
Mailing Address CHAPEL AVE			2	9	2000	\$	100.00		
	CHAILLAVE								
City ALLENT		State	Zip Code (Plus 4)	-	tion of Exp				
		State PA	Zip Code (Plus 4) 18103	-	tion of Exp				
				Descript	tion of Exp				
City ALLENT	TOWN			Descript CONTRI	Lion of Exp	enditure			
City ALLENT	GENERAL			Descript CONTRI	Lion of Exp	enditure	\$	100.00	
City ALLENT To Whom Paid POSTMASTER (GENERAL S WOOD STREET			Descript CONTRI MO	BUTION DAY	YEAR 2000	\$	100.00	
City ALLENT To Whom Paid POSTMASTER (Mailing Address	GENERAL S WOOD STREET	PA	18103	Descript CONTRI MO	BUTION DAY 10 tion of Exp	YEAR 2000	\$	100.00	
City ALLENT To Whom Paid POSTMASTER (Mailing Address City BETHLE	GENERAL S WOOD STREET	PA State PA	Zip Code (Plus 4) 18018	MO 3 Descript POSTAGE	BUTION DAY 10 tion of Exp	YEAR 2000	\$	100.00	

STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate			Reporting Period					
BOSCOLA, LISA FRIENDS OF			From:			То:		3/20/2000
					DATE			itstanding lance of Debt
Name of Creditor JACK PHELPS				мо	DAY	YEAR		
Mailing Address 1547 BONNIE DRIVE					10	2000	\$	35.00
City BETHLEHEM	State PA	Zip Code (P 18017	lus 4)	Description of Debt POSTAGE COSTS				
Name of Creditor J ALAN FOWLER					DAY	YEAR		
Mailing Address 409 E BRIDLEPATH RD 9					10	2000	\$	200.00
City BETHLEHEM	State PA	Zip Code (P 18017	lus 4)	Description of Debt GRAPHIC DESIGN COSTS				
Name of Creditor GENERAL PRINTING					DAY	YEAR		
Mailing Address 2015 FREEMANSBURG AVE					10	2000	\$	704.90
City EASTON	State PA	Zip Code (P 18042	lus 4)	·	tion of Deb	·		
								PAGE TOTAL
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							\$	939.90