

# Campaign Finance Report

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

<b>Filer Identification Number :</b>		9400092		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>		
<b>Name of Filing Committee, Candidate or Lobbyist:</b> BOSCOLA, LISA FRIENDS OF												
<b>Street Address:</b> PO BOX 1294												
<b>City:</b> BETHLEHEM						<b>State:</b> PA			<b>Zip Code:</b> 18016-1294			
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6. X	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2016	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>				
<b>Name of Office Sought by Candidate:</b>						<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
SENATOR IN THE GENERAL ASSEMBLY						<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	18	STS	DEM	48
						11	8	2016	(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
		10	25	2016		11	28	2016				
<b>A. Amount Brought Forward From Last Report</b>						\$ 256,801.70						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>						\$ 7,754.47						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>						\$ 264,556.17						
<b>D. Total Expenditures (From Schedule III)</b>						\$ 28,652.60						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>						\$ 235,903.57						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>						\$ 0.00						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>						\$ 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**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
BOSCOLA, LISA FRIENDS OF	From: <u>10/25/2016</u> To: <u>11/28/2016</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 0.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 0.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 6,000.00
<b>All Other Contributions (Part D)</b>	\$ 1,000.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 7,000.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 754.47

<b>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.)</b>	\$ 7,754.47
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<div>PART B</div> <div>ALL OTHER CONTRIBUTIONS</div> <div>\$50.01 TO \$250.00</div> <div>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)</div>						
Name of Filing Committee or Candidate				Reporting Period		
				From:		To:
				DATE		AMOUNT
Full Name of Contributor				MO	DAY	YEAR
Mailing Address						
City	State	Zip Code (Plus 4)				\$ 0.00
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.**

<b>Name of Filing Committee or Candidate</b>  BOSCOLA, LISA FRIENDS OF	<b>Reporting Period</b>  <b>From:</b> <u>10/25/2016</u> <b>To:</b> <u>11/28/2016</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR	\$500.00
MALADY & WOOTEN PAC				11	11	2016	
City	HARRISBURG	State	PA				
Full Name of Contributing Committee				MO	DAY	YEAR	\$500.00
ABBOTT LABORATORIES EMPL PAC (AEPAC)				11	11	2016	
City	ABBOTT PARK	State	IL				
Full Name of Contributing Committee				MO	DAY	YEAR	\$1,000.00
COMCAST CORP & NBCUNIVERSAL PAC - USA				11	11	2016	
City	PHILADELPHIA	State	PA				
Full Name of Contributing Committee				MO	DAY	YEAR	\$1,000.00
TALEN ENERGY CORPORATION PAC				10	31	2016	
City	ALLENTOWN	State	PA				
Full Name of Contributing Committee				MO	DAY	YEAR	\$2,500.00
LAWPAC				10	31	2016	
City	Harrisburg	State	PA				
Full Name of Contributing Committee				MO	DAY	YEAR	\$500.00
UPSPAC				11	11	2016	
City	Atlanta	State	GA				

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

**PAGE TOTAL**

\$ 6,000.00

**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.)**

<b>Name of Filing Committee or Candidate</b>  BOSCOLA, LISA FRIENDS OF	<b>Reporting Period</b>  <b>From:</b> <u>10/25/2016</u> <b>To:</b> <u>11/28/2016</u>
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				DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR		
Murat Guzel	11	11	2016	\$	1,000.00
<b>Mailing Address</b> 1105 Claire St					
<b>City</b> Bethlehem					
<b>State</b> PA					
<b>Zip Code (Plus 4)</b> 18017					
<b>Employer Name</b> Nimeks, LLC	<b>Occupation</b> Self Employed				
<b>Employer Mailing Address/Principal Place of Business</b>	<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>		
Broad St	Bethlehem	PA	18015		

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

<b>PAGE TOTAL</b>
\$ 1,000.00

## 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.**

<b>Name of Filing Committee or Candidate</b>  BOSCOLA, LISA FRIENDS OF	<b>Reporting Period</b>  <b>From:</b> <u>10/25/2016</u> <b>To:</b> <u>11/28/2016</u>
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				DATE		AMOUNT	
<b>Full Name</b> Hilton Harrisburg				MO 11	DAY 11	YEAR 2016	\$ 745.05
<b>Mailing Address</b> 1 N 2nd st							
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101					
<b>Receipt Description</b> Refund of Event Overpayment							
<b>Full Name</b> BB&T Bank				MO 10	DAY 31	YEAR 2016	\$ 9.42
<b>Mailing Address</b> N/A							
<b>City</b> Bethlehem	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18017					
<b>Receipt Description</b> Interest Payment							

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

<b>PAGE TOTAL</b>
\$ 754.47



## 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
BOSCOLA, LISA FRIENDS OF		From: <u>10/25/2016</u> To: <u>11/28/2016</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)		\$	0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)		\$	0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period (3)		\$	0.00
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.)		\$	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:	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	Reporting Period
	From: To:

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
BOSCOLA, LISA FRIENDS OF	From <u>10/25/2016</u> To: <u>11/28/2016</u>

DATE				AMOUNT
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
Pennsylvania Capital Committee				
<b>Mailing Address</b> RM 630 Main Capital Bldg	11	15	2016	\$ 594.66
<b>City</b> Harrisburg	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 17101	<b>Description of Expenditure</b> Holiday Cards	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
Advantage PEP, LLC				
<b>Mailing Address</b> 2285 Schoenersville Rd	11	28	2016	\$ 1,000.00
<b>City</b> Bethlehem	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18017	<b>Description of Expenditure</b> December Retainer	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
Northampton Country Club				
<b>Mailing Address</b> 5049 William Penn Hwy	11	28	2016	\$ 18,695.96
<b>City</b> Easton	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18045	<b>Description of Expenditure</b> Golf Outing Payment In Full	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
Advantage PEP, LLC				
<b>Mailing Address</b> 2285 Schoenersville Rd	11	4	2016	\$ 2,000.00
<b>City</b> Bethlehem	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18017	<b>Description of Expenditure</b> Oct/Nov Fee	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
Personalized Books Given to Children, Inc				
<b>Mailing Address</b> 2334 S Church St	11	28	2016	\$ 375.00
<b>City</b> Allentown	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18103	<b>Description of Expenditure</b> Books	
<b>To Whom Paid</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
Twisted Olive				
<b>Mailing Address</b> 51 W Broad St	11	18	2016	\$ 428.74
<b>City</b> Bethlehem	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18018	<b>Description of Expenditure</b> Team Meal	

<b>To Whom Paid</b> Jess Buttner			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 100.00
<b>Mailing Address</b> Unknown			11	18	2016	
<b>City</b> Bethlehem	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18018	<b>Description of Expenditure</b> Office Assistance			

<b>To Whom Paid</b> The Granola Factory			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 458.24
<b>Mailing Address</b> 518 Long St			11	14	2016	
<b>City</b> Bethlehem	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18018	<b>Description of Expenditure</b> Holiday Gifts			

<b>To Whom Paid</b> Friends of Martin Molloy			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 2,500.00
<b>Mailing Address</b> PO Box 1148			11	2	2016	
<b>City</b> Brookhaven	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19015	<b>Description of Expenditure</b> Donation			

<b>To Whom Paid</b> Friends of Sean Wiley			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 2,500.00
<b>Mailing Address</b> 4227 Hammocks Dr			10	26	2016	
<b>City</b> Erie	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 16506	<b>Description of Expenditure</b> Donation			

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						<b>\$</b> 28,652.60

