Campaign Finance Report

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

					-					_						
Filer Identificat Number :	ion	94000	092			Repo Filed		CAND	IDAT	E	СОМІ	MITTEE	\checkmark	LOBI	BYIST	
Name of Filing O	Committee,	Candida	ate or L	obbyist:		BOSCO	OLA, L	ISA FRIE	NDS	OF						
Street Address:												_				
City:	BETHL	EHEM						State:	PA			Zip Co	de: 18	8015		
TYPE OF REPORT	6TH TUESD PRE-PRIMA		1.	2ND FRIDA PRIMARY	AY PRE	- 2.	30 D PRIN	DAY MARY	POST	Γ- 3.		AMENDI REPORT		Yes	No	\checkmark
(place X to the right of	6TH TUESD PRE-ELECT		4.	2ND FRIDA ELECTION	AY PRI	E- 5.	30 D ELEC	DAY CTION	POST	POST- 6. TERMINATION REPORT?				Yes	No	\checkmark
report type)	ANNUAL R	REPORT	7. X	Year 2003	}			ING METH) CHECK (PAPER	APER DISKET			TTE
Name of Office S	- Sought by C	Candidat	e:				-	DATE	DF E	LECTI	ON	District Number	Office Code	Par	ty Code	County Code
SENATOR IN THE GENERAL ASSEMBLY								мо	DA	Y Y	'EAR		STS	DEN	1	48
SEIWHORTH								1	L	4	2003		(SEE IN	STRUCTI	ONS FOR	CODES)
Summary of		and	мо	DAY	YEAF	2		мо	DA	ע א	/EAR	FC	OR OFFIC	CE USE	ONLY	
Expenditures	s from:			1 1	L	1	то	1	2	31	2003					
A. Amount Bro	ought Forwa	ard From	n Last R	eport			S	\$		74	,324.07					
B. Total Monet	ary Contrib	outions A	And Rec	eipts (Fror	n Sche	dule I)) !	\$			37.05	1				
C. Total Funds	Available (Sum Of	Lines A	and B)			9	\$		74	,361.12					
D. Total Expen	ditures (Fr	om Sche	edule II	I)				\$		2,	185.00					
E. Ending Cash	n Balance (S	Subtract	Line D	From Line	C)			\$		72,	176.12	4				
F. Value Of In-	Kind Contr	ibutions	Receiv	ed (From S	Schedu	le II)		\$			0.00					
G. Unpaid Deb	ts And Oblig	gations	(From S	Schedule I	V)		9	\$			0.00					
					AFF	IDAV	IT SI	ECTION								
PART I - If this i	s a Commit	tee repo	ort, trea	surer sign	here.	If this	is a Ca	andidate i	epor	t, cand	idate sig	gn here.				
I swear (or affirm correct and compl		port, inclu	uding the	attached so	chedule	s filed o	n pape	r or by elec	tronio	c mediu	n, are to t	the best o	of my know	wledge	and beli	ef , true
Sworn to and subs	scribed befor day of	e me this		20							Signature	e of Perso	on Submitt	ting Rep	oort	
		Signatur	e				_					Prin	ited Name	•		
My Commission E	xpires											Ema	nil			
	м	0	D	AY	YR					Area Co	de	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report o	of a cand	idate's	authorized	l Comr	nittee,	Candi	date shal	sigr	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 subso		me this									S	ignature	of Candida	ate		
	day of											Printe	ed Name			
	-	gnature										Ema	, il			
My Commission Exp	pires								_							
		мо	D	ΔY	YF	2			A	rea Code		D	aytime T	elephon	e Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** BOSCOLA, LISA FRIENDS OF From: To: 12/31/2003 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 37.05 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 37.05 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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	Name of Filing Committee or Candidate				Reporting Period					
				rom: To:						
		·			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		

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. (Exclude contributions from political committees reported in Part A)									
Name of Filing Committee or Candidate Reporting Period									
			Fro	From: To:					
					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	\$	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						
				То:					
				DA	TE		A	MOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR		0.00	
Mailing Address							- \$	0.00	
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTAL	
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 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				Reporting Period				
Fro					: To:			
				DATE AMOUNT				
Full Name of Contributor				DAY	YEAR	\$	0.00	
State	Zip Code (Plu	s 4)						
•			Occupation					
ce of Business	City			State		Zip Code	(Plus 4)	
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.						PAGE TOTAL \$ 0.00		
	State ce of Business	State Zip Code (Plus ce of Business City	State Zip Code (Plus 4) ce of Business City	From: DA DA From: DA MO State Zip Code (Plus 4) Coccupat ce of Business City	From: DATE DATE DATE State Zip Code (Plus 4) City Occupation Ce of Business City State	From: To DATE MO DAY YEAR State Zip Code (Plus 4) Image: Comparison of the second	From: To: DATE AM MO DAY YEAR \$ MO DAY YEAR State Zip Code (Plus 4) I I Occupation Occupation I ce of Business City State Zip Code edule I, Detailed Summary Page, Section 3. PA	

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 Candid	Name of Filing Committee or Candidate Rep				ting Period				
BOSCOLA, LISA FRIENDS OF			From:	: То:			<u>12/31/2003</u>		
				D	ATE		АМО	UNT	
Full Name NAZARETH NATIONAL BANK					DAY	YEAR	\$	37.05	
Mailing Address				12	31	2003	1		
City BETHLEHEM	State	Zip Code (I	Plus 4)	12	51	2005			
	PA	18018							
Receipt Description OCTOBER, N	OVEMBER & DECE	MBER INTEREST O	N ACCOU	NT			•		
						Γ	PAG	E TOTAL	
Enter Grand Total of Part E on Sch	edule I, Detailed	Summary Page,	Section	4.		4	5	37.05	

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:	То:	<u>12/31/2003</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	ſF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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 Candida	Name of Filing Committee or Candidate			Reporting Period					
	From:			То:					
				DATE			AMOUNT		
Full Name of Contributor				DAY	YEAR				
Mailing Address						 \$		0.00	
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	Name of Filing Committee or Candidate				Reporting Period					
			Fro	om:						
					DATE AMOUNT					
Full Name of Contributor				мо	DAY	YEAR				
Mailing Address							\$ 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)	e(Plus 4) Description of Contribu				
Enter Grand Total of Part G on Scho Summary Page, Section 3.	edule II, In-Kin	d Contributions D	etaile	ed			PAGE TOTAL 0.00			

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee of	or Candidate		Reporti	Reporting Period				
BOSCOLA, LISA FRIENDS (DF		From			То:	<u>12/31/2003</u>	
				DATE			AMOUNT	
To Whom Paid			мо	DAY	YEAR			
BIPARTISAN FRIENDS OF E	MIL GIORDANO					\$	50.00	
Mailing Address			12	3	2003	4	50.00	
City BETHLEHEM	State	Zip Code (Plus 4)	Description of Expenditure					
	РА	18017	CONTRI	IBUTION				
To Whom Paid	мо	DAY	YEAR					
DEM STATE SENATE CAMPA	AIGN COMM.							
Mailing Address				26	2003	\$	2,000.00	
City HARRISBURG State Zip Code (Plus 4)				tion of Exp	enditure			
	PA	17105	CONTRI	IBUTION				
To Whom Paid			мо	DAY	YEAR			
FRIENDS OF JOHN CALLAH	AN		MO					
Mailing Address			12	31	2003	\$	100.00	
City BETHLEHEM	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	18017	CONTRI	IBUTION				
To Whom Paid			мо	DAY	YEAR			
RSVP			no		12/40			
Mailing Address			11	14	2003	\$	35.00	
City STROUDSBURG	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure			
	PA	18360	CHECK	FINALLY C	ASHED			
							PAGE TOTAL	
Enter Grand Total of Exp	enditures on Page 1,	Report Cover Page, Item	D.			\$	2,185.00	