Campaign Finance Report

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

Filer Identification 9400092 Number :						Report CANDI Filed By :		IDATE		COMM	ITTEE	✓	LOB	BYIST			
Name of Filing C	Committee, Candid	ate or L	obbyist:		BOS	SCOL	A, LI	SA FRIE	NDS O	F							
Street Address:																	
City:	BETHLEHEM							State:	PA	PA			le: 18	3016-1	294		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.					30 DA PRIMA		POST- 3.			AMENDM REPORT?	Yes	✓ No)		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.					30 DA		POST- 6. X			TERMINATION REPORT?		Yes	No)	√
report type)	ANNUAL REPORT	7.	Year 20)17	FILING METHO () CHECK ON							PAPER		\	DISKI	TTE	
Name of Office S	Sought by Candida	te:						DATE ()F ELE	CTI	ON	District Number	Office Code	Pai	ty Code	Cour	
	,							МО	DAY	Y	/EAR	Number	Teore	DEI	1	48	
								11		7	2017		(SEE IN	STRUCTI	ONS FOR	CODES)
•	Receipts and	МО	DAY	YEAF	2			мо	DAY	١	YEAR	FO	R OFFI	CE USE	ONLY		
Expenditures	from:	-	10	24 2	017	, T	0	1:		27	2017						
A. Amount Bro	ught Forward Froi	n Last R	eport				\$	-		308	,243.81						
B. Total Moneta	ary Contributions	And Rec	eipts (Fr	rom Sche	dule	e I)	\$				94.97						
C. Total Funds Available (Sum Of Lines A and B) \$										308	,338.78						
D. Total Expend	ditures (From Sch	edule II	I)				\$			20,	,805.00						
E. Ending Cash	Balance (Subtrac	t Line D	From Lir	ne C)			\$			287,	533.78						
F. Value Of In-	Kind Contributions	s Receiv	ed (Fron	n Schedu	le I	I)	\$				0.00						
G. Unpaid Debt	ts And Obligations	(From S	Schedule	· IV)			\$				0.00						
				AFF	ID	AVI	ΓSE	CTION									
	s a Committee rep	•	_								_						
correct and comple) that this report, inc ete.	luding the	e attached	l schedule	s file	ed on	paper	or by elec	tronic n	1ediui	m, are to t	the best of	my kno	wledge	and bel	ief , tr	ue
Sworn to and subs	cribed before me this day of	5	20								Signature	of Perso	n Submit	ting Re _l	oort		
	Signatu	ire					-					Prin	ted Name	•			-
My Commission Ex	cpires						_					Emai	il				
	МО	D	AY	YR					A	rea Co	ode	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a can	didate's	authoriz	ed Comr	nitte	ee, C	andid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of r	ny knowle	edge and I	belief this	poli	itical	comm	ittee has	not viol	ated a	ny provis	ions of the	e act of J	une 3,1	937 (P.I	L. 133	3,
Sworn to and subsc	ribed before me this day of		20						-		s	ignature o	of Candid	ate			_
							-					Printe	d Name				-
My Commission Exp	Signature						-					Ema	il				-
	· 						-										_
	МО	D	AY	YF	ł				Area	Code	•	Da	ytime T	elephor	e Numl	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
BOSCOLA, LISA FRIENDS OF	From:	10/24/2017	<u>7</u> To:	11/27/2017
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)	\$	94.97
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 Pa			\$	94.97

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 C	andidate	R	eporting	Period			
		Fi	rom:		То	:	
		•		DATE			AMOUNT
Full Name of Contributing Comm	ittee		МО	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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.

(Exclu	de contributions fron	n political comm	itte	es re _l	oortea	in Part	A)	
Name of Filing Committe	e or Candidate		Rep	orting P	eriod			
			Froi	m:		To	o :	
		1			DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.0
City	State	Zip Code (Plus 4))					
	•	•	•		•	•		PAGE TOTAL

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

9/3/2025 5:17:58 AM

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		,	AMOUNT
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 Schee	dule 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:		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	Reporting Pe	eriod	
BOSCOLA, LISA FRIENDS OF	From:	10/24/2017 To:	11/27/2017

			D	ATE		AMOUNT	
Full Name			МО	DAY	VEAD		0407
BB&T Bank			МО	DAY	YEAR	\$	94.97
Mailing Address			11	1	2017		
City Wilson	State	Zip Code (Plus 4)		_	2017		
	NC	27894					
Receipt Description YTD Intere	est paid						

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

PAGE TOTAL \$ 94.97

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 Per	od	
BOSCOLA, LISA FRIENDS OF	From:	<u>10/24/2017</u> To:	11/27/2017
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTO	R	
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 Can	Reporting Period							
	From: To:							
				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 or	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	Reporting Period					
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	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 Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting	Period		
BOSCOLA, LISA FRIENDS OF	From	10/24/2017	То:	11/27/2017

			DATE		AMOUNT					
To Wh	nom Paid	МО	DAY	YEAR						
USPS				МО		ILAK				
Mailin	g Address	11	15	2017	\$	294.00				
City	Bethelhem	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
		PA	18016	Postage						
To Whom Paid					DAY	YEAR				
JOe T	occi	МО	DAI	ILAK						
Mailin	g Address	11	9	2017	\$	200.00				
City	Bethelehem State Zip Code (Plus 4)			Description of Expenditure						
	PA 18016				Election Night Event					
To Wh	nom Paid	МО	DAY	YEAR						
Sauco	on Valley Community Center	MO	DAT	TEAR						
Mailing Address					17	2017	\$	220.00		
City	Hellertown	State	Zip Code (Plus 4)	Description of Expenditure						
		PA	18055	Silent Auction Fundraiser						
To Wh	nom Paid			МО	DAY	YEAR				
Notre	Dame High School			МО	DAI	ILAK				
Mailing Address					30	2017	\$	250.00		
City	Easton	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
		PA	18045	Gala Fundraiser						
To Wh	nom Paid			мо	DAY	YEAR				
PA Ca	pital Preservation Committee			MO	DAI	ILAK				
Mailing Address					15	2017	\$	699.60		
City	Harrisburg	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
		PA	17120	Holiday	Holiday Cards					
To Whom Paid					DAY	YEAR				
Bethle	ehem Morning Star Rotary Club	МО	DAT	IEAR						
Mailing Address					1	2017	\$	70.00		
City	Wescoesville	State	Description of Expenditure							
		PA	18106	Salute 1	Troops Ad					
		•	•		· ·					

To Whom Paid									
Meghan Lago	МО	DAY	YEAR						
					200.00				
Mailing Address	11	3	2017	\$	300.00				
City Easton	State	Zip Code (Plus 4)	4) Description of Expenditure						
	PA	18042	Reimbursement for Expenses						
To Whom Paid	М0	DAY	YEAR						
Lisa Boscola	МО	DAY	YEAK						
Mailing Address	11	3	2017	\$	1,741.00				
City Easton	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
PA 18045 reimburse for various						s travel and meal expenses.			
To Whom Paid	МО	DAY	YEAR						
Northampton Country Club	MO		ILAK						
Mailing Address	11	22	2017	\$	17,022.40				
City Easton	Easton State Zip Code (Plus 4) D				Description of Expenditure				
	PA	18045	Spring (Golf Outing	Expense	es			
To Whom Paid	МО	DAY	YEAR						
BB&T Bank			MO	DAT	TEAR				
Mailing Address	11	1	2017	\$	8.00				
City Wilson	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
NC 27894 2 Months bank fees									
	PAGE TOTAL								
Enter Grand Total of Expenditures									