

Campaign Finance Report

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

Filer Identification Number : 9400092		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: BOSCOLA, LISA FRIENDS OF											
Street Address: PO BOX 1294											
City: BETHLEHEM					State: PA		Zip Code: 18016-1294				
TYPE OF REPORT (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	<input checked="" type="checkbox"/> No		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6. X	TERMINATION REPORT?	Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2017	FILING METHOD () CHECK ONE			PAPER	<input checked="" type="checkbox"/>	DISKETTE		
Name of Office Sought by Candidate:					DATE OF ELECTION			District Number	Office Code	Party Code	County Code
					MO	DAY	YEAR	DEM 48			
					11	7	2017	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		10	24	2017		11	27	2017			
A. Amount Brought Forward From Last Report					\$ 308,243.81						
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 94.97						
C. Total Funds Available (Sum Of Lines A and B)					\$ 308,338.78						
D. Total Expenditures (From Schedule III)					\$ 20,805.00						
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 287,533.78						
F. Value Of In-Kind Contributions Received (From Schedule II)					\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)					\$ 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

Signature

Printed Name

My Commission Expires

MO DAY YR

Email

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

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

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.)	\$ 94.97
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

PAGE TOTAL	
\$	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
	From: To:

					DATE			AMOUNT	
Full Name of Contributor					MO	DAY	YEAR	\$ 0.00	
Mailing Address									
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:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					

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

PAGE TOTAL
\$ 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
	From: To:

				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					
Employer Name				Occupation			
Employer Mailing Address/Principal Place 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

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 Candidate	Reporting Period
BOSCOLA, LISA FRIENDS OF	From: <u>10/24/2017</u> To: <u>11/27/2017</u>

				DATE			AMOUNT	
Full Name BB&T Bank				MO	DAY	YEAR	\$ 94.97	
Mailing Address PO Box 819				11	1	2017		
City Wilson		State NC	Zip Code (Plus 4) 27894					
Receipt Description YTD Interest 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 Period	
BOSCOLA, LISA FRIENDS OF		From: <u>10/24/2017</u> To: <u>11/27/2017</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period		(1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period		(2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
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:
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				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

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

DATE				AMOUNT
To Whom Paid USPS	MO	DAY	YEAR	
Mailing Address 535 WOOD ST	11	15	2017	\$ 294.00
City Bethelhem	State PA	Zip Code (Plus 4) 18016	Description of Expenditure Postage	
To Whom Paid JOe Tocci	MO	DAY	YEAR	
Mailing Address Center St	11	9	2017	\$ 200.00
City Bethelhem	State PA	Zip Code (Plus 4) 18016	Description of Expenditure Election Night Event	
To Whom Paid Saucon Valley Community Center	MO	DAY	YEAR	
Mailing Address 323 Northampton st	11	17	2017	\$ 220.00
City Hellertown	State PA	Zip Code (Plus 4) 18055	Description of Expenditure Silent Auction Fundraiser	
To Whom Paid Notre Dame High School	MO	DAY	YEAR	
Mailing Address 3417 Church Rd	10	30	2017	\$ 250.00
City Easton	State PA	Zip Code (Plus 4) 18045	Description of Expenditure Gala Fundraiser	
To Whom Paid PA Capital Preservation Committee	MO	DAY	YEAR	
Mailing Address Rm 630 main Capital Bldg	11	15	2017	\$ 699.60
City Harrisburg	State PA	Zip Code (Plus 4) 17120	Description of Expenditure Holiday Cards	

To Whom Paid Bethlehem Morning Star Rotary Club			MO	DAY	YEAR	\$ 70.00
Mailing Address 1409 Bogle Ave			11	1	2017	
City Wescoesville	State PA	Zip Code (Plus 4) 18106	Description of Expenditure Salute Troops Ad			

To Whom Paid Meghan Lago			MO	DAY	YEAR	\$ 300.00
Mailing Address 1864 Ferry St			11	3	2017	
City Easton	State PA	Zip Code (Plus 4) 18042	Description of Expenditure Reimbursement for Expenses			

To Whom Paid Lisa Boscola			MO	DAY	YEAR	\$ 1,741.00
Mailing Address 385 Palmetto Dr			11	3	2017	
City Easton	State PA	Zip Code (Plus 4) 18045	Description of Expenditure reimburse for various travel and meal expenses.			

To Whom Paid Northampton Country Club			MO	DAY	YEAR	\$ 17,022.40
Mailing Address 5049 William Penn Hwy			11	22	2017	
City Easton	State PA	Zip Code (Plus 4) 18045	Description of Expenditure Spring Golf Outing Expenses			

To Whom Paid BB&T Bank			MO	DAY	YEAR	\$ 8.00
Mailing Address PO Box 819			11	1	2017	
City Wilson	State NC	Zip Code (Plus 4) 27894	Description of Expenditure 2 Months bank fees			

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL
						\$ 20,805.00

