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 94000)92			Repo		:	CAN	ונט	DATE		СОМ	MITTEE	~	LOBI	31131	
Name of Filing C	Committee, Candida	ite or Lo	obbyist:	·	BOSO	COLA	, LI	SA FRI	ΕN	IDS OF		1				•	
Street Address:																	
City:	BETHLEHEM							State:		PA			Zip Co	de: 1	8016-1	294	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.					0 DA RIMA		Р	OST- 3.		AMENDMENT REPORT?		Yes	No	~	
(place X to the right of	6TH TUESDAY PRE-ELECTION					0 DA					TERMIN REPORT		Yes	No	~		
report type)												PAPER		$\overline{}$	DISKET	TE	
Name of Office Sought by Candidate:								DATE	0	F ELEC	CTIC	N	District Number	Office Code	Par	ty Code	County Code
								МО		DAY	YI	EAR	18		DEN	1	48
								:	11		6	2018		(SEE I	NSTRUCTI	ONS FOR C	ODES)
	Receipts and	МО	DAY	YEAR				МО		DAY	Y	EAR	FC	R OFFI	CE USE	ONLY	
Expenditures	from:	1	10 23	20	018	TO)		11	2	26	2018					
A. Amount Bro	ught Forward From	Last R	eport				\$			2	287,	704.30					
B. Total Monet	ary Contributions A	nd Rec	eipts (From	1 Sched	dule 1	[)	\$				8,3	300.00					
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			2	296,0	004.30					
D. Total Expend	ditures (From Sche	dule II	I)				\$					0.00					
E. Ending Cash	Balance (Subtract	Line D	From Line (C)			\$			2	96,0	04.30					
F. Value Of In-	Kind Contributions	Receive	ed (From S	chedul	e II)		\$					0.00					
G. Unpaid Debt	ts And Obligations ((From S	Schedule IV	')			\$					0.00			1		
				AFF:	IDA'	VIT	SE	CTIO	N								
	s a Committee repo		_									_			wledge	and belie	f , true
correct and comple																	
Sworn to and subs	cribed before me this day of		20								9	Signature	of Perso	n Submi	tting Rep	ort	
	Signature	e							•				Prin	ted Nam	ie		
My Commission Ex	·											_	Ema				
	МО		AY	YR							a Coo	de	Daytin	ne Telep	hone Nu	mber	_
	a report of a candi					•				_			iama -£,.		l 2 **	127 /5 /	1222
No 320) as amende		y Knowie	euge and ben	er this	ponti	cai co	ommi	ittee na	s no	ot violat	eu ar	iy provis	ions or th	e act or .	June 3,1	937 (P.L.	1333,
Sworn to and subsc	ribed before me this day of		20									s	ignature	of Candi	date		
													Printe	ed Name			
My Commission Exp	Signature pires								-				Ema	nil			

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
BOSCOLA, LISA FRIENDS OF	From:	10/23/201	<u>8</u> To:	11/26/2018
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)			\$	500.00
TOTAL for the Reporting	Period	(2)	\$	500.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	7,500.00
All Other Contributions (Part D)			\$	300.00
TOTAL for the Reporting	Period	(3)	\$	7,800.00
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 Pa			\$	8,300.00

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 Committee or Ca	ndidate	te Reporting Per			Period				
		F	From:		То	•			
				DATE			AMOUNT		
Full Name of Contributing Commit	tee		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.

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

BOSCOLA, LISA FRIENDS OF

From:

10/23/2018 **To:**

11/26/2018

				DATE		AMOUNT
Full Name of Contributor	Full Name of Contributor				YEAR	
Paul Nolan			МО	DAY	ILAK	
Mailing Address						\$ 250.00
City Brielle	State	Zip Code (Plus 4)	11	1	2018	
	NJ	08730				
Full Name of Contributor			мо	DAY	YEAR	
James Priolo			1-10	DAI	ILAK	
Mailing Address						\$ 250.00
City Wall Township	State	Zip Code (Plus 4)	11	1	2018	
	NJ	07719				

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

PAGE TOTAL \$ 500.00

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				Period					
BOSCOLA, LISA FRIENDS OF			From:	10/2	3/2018	То:	11/26/2018		
		·		DA	TE		AMOUN	Т	
Full Name of Contributing Committee CARPENTERS' LEG PROG OF GREATER F	PΑ			МО	DAY	YEAR			
Mailing Address				10	30	2018	\$	2,500.00	
City PITTSBURGH	State PA	Zip Code 15205-0	(Plus 4)	10	30	2010			
Full Name of Contributing Committee MID-ATLANTIC LABORERS' POL LEAGUE	:			МО	DAY	YEAR	\$	5,000.00	
Mailing Address				11	8	2018		.,	
City RESTON	State VA	Zip Code 20191-0	(Plus 4)						

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

PAGE TOTAL \$ 7,500.00

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				Reporting Period						
BOSCOLA, LISA FRIENDS OF			F	From: 10/23/20			018 To: 11/26/2018			
					DATE AMOUNT					
Full Name of Contributor					мо	DAY	YEAR		\$ 300.00	
William White									300.00	
Mailing Address					10	31	201	R		
City Oceanport	State	Zip Co	de (Plus 4)		10	31	201			
	l _{NJ}	07757	7							
Employer Name Maser Consulting					Occupation Consultant					
Employer Mailing Address/Principal Plac	e of Business	Cit	ty			State		Zi	p Code (Plus 4)	
		All	lentown			PA		18	3109	
Enter Grand Total of Part C on Sche	dule T. Detailed Su	ımmarı	v Page Se	ction	n 3		Γ		PAGE TOTAL	
and stand total of Full Companies	auto 1, Dotanou ot		, . age, se					\$	300.00	

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 Period						
			From:			To:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$	0.00	
Mailing Address							\neg		
City	State	Zip Code (I	Plus 4)						
Receipt Description	•	•			1	•	•		
Futor Coand Total of Bank	Cabadula I Detailed	Commence De	Caatle					PAGE TOTAL	
Enter Grand Total of Part I	e on Schedule I, Detailed	Summary Page,	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 Pe	riod	
BOSCOLA, LISA FRIENDS OF	From:	<u>10/23/2018</u> To:	11/26/2018
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER 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 Candidate	Reporting Period							
	From: To:							
				DATE			AMOUNT	
Full Name of Contributor			мо	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 Detail			led Sum	mary Pag	ge,		PAGE TOT	AL
Section 2.						\$		0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate			Rep	orting	Period	Reporting Period				
					m:		То:			
						DATE		AMOUNT		
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address				-					\$	0.00
City	State	;	Zip Code(Plus 4)							
Employer of Contributor					Occupation					
Employer Mailing Address/Principal Plac	e of Business	City	′	State	e Zip	Code(Plus 4)	Descr	ript	ion of Contribution	on
Enter Grand Total of Part G on Scho	edule II, In-Kir	nd C	ontributions De	etaile	ed				PAGE TOT	ΓAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate				Reporting Period					
	From			То:					
				DATE			AMOUNT		
To Whom Paid				DAY	YEAR				
Mailing Address						\$	0.00		
City	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
Enter Grand Total of Expenditures	on Bogo 1 Bonort C	'over Page Item I	`				PAGE TOTAL		
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.			<i>.</i>			\$	0.00		