

# 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> 1546 BARNER COURT   |                          |           |                         |                                    |                      |                         |  |  |                              |                                     |                   |                    |
| <b>City:</b> BETHLEHEM   |                          |           |                         |                                    |                      | <b>State:</b> PA        |  |  | <b>Zip Code:</b> 18015       |                                     |                   |                    |
| <b>TYPE OF REPORT</b><br><br>(place X to the right of report type)               | 6TH TUESDAY PRE-PRIMARY  | 1.        | 2ND FRIDAY PRE-PRIMARY  | 2.                                 | 30 DAY POST-PRIMARY  | 3. X                    | AMENDMENT REPORT?                                | Yes  | No                           | <input checked="" type="checkbox"/> |                   |                    |
|  | 6TH TUESDAY PRE-ELECTION | 4.        | 2ND FRIDAY PRE-ELECTION | 5.                                 | 30 DAY POST-ELECTION | 6.                      | TERMINATION REPORT?                              | Yes  | No                           | <input checked="" type="checkbox"/> |                   |                    |
|  | ANNUAL REPORT            | 7.        | Year 2004               | <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>  | STS DEM 48                   |                                     |                   |                    |
|  |                          |           |                         |                                    |                      | 11                      | 2  | 2004   | (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>   |                                     |                   |                    |
|  |                          | 1         | 1                       | 1                                  |                      | 5                       | 17   | 2004   |                              |                                     |                   |                    |
| <b>A. Amount Brought Forward From Last Report</b>                                |                          |           |                         |                                    |                      | \$ 76,748.10            |  |  |                              |                                     |                   |                    |
| <b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>            |                          |           |                         |                                    |                      | \$ 1,725.00             |  |  |                              |                                     |                   |                    |
| <b>C. Total Funds Available (Sum Of Lines A and B)</b>                           |                          |           |                         |                                    |                      | \$ 78,473.10            |  |  |                              |                                     |                   |                    |
| <b>D. Total Expenditures (From Schedule III)</b>                                 |                          |           |                         |                                    |                      | \$ 1,018.00             |  |  |                              |                                     |                   |                    |
| <b>E. Ending Cash Balance (Subtract Line D From Line C)</b>                      |                          |           |                         |                                    |                      | \$ 77,455.10            |  |  |                              |                                     |                   |                    |
| <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                     | <b>From:</b> <b>To:</b> <u>5/17/2004</u> |

|  |                 |
|--|-----------------|
| <b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b> |                 |
| <b>TOTAL for the Reporting Period (1)</b>                                      | <b>\$ 25.00</b> |

|  |                  |
|--|------------------|
| <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>                 | <b>\$ 0.00</b>   |
| <b>All Other Contributions (Part B)</b>  | <b>\$ 400.00</b> |
| <b>TOTAL for the Reporting Period (2)</b>  | <b>\$ 400.00</b> |

|   |                    |
|---|--------------------|
| <b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b> |                    |
| <b>Contributions Received From Political Committees (Part C)</b>        | <b>\$ 1,000.00</b> |
| <b>All Other Contributions (Part D)</b>                                 | <b>\$ 300.00</b>   |
| <b>TOTAL for the Reporting Period (3)</b>                               | <b>\$ 1,300.00</b> |

|  |                |
|--|----------------|
| <b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b> |                |
| <b>TOTAL for the Reporting Period (4)</b>  | <b>\$ 0.00</b> |

|   |                    |
|---|--------------------|
| <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> | <b>\$ 1,725.00</b> |
|---|--------------------|



# 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)**

|  |  |
|--|--|
| <b>Name of Filing Committee or Candidate</b> | <b>Reporting Period</b>                  |
| BOSCOLA, LISA FRIENDS OF                     | <b>From:</b> <b>To:</b> <u>5/17/2004</u> |

|             |               |
|-------------|---------------|
| <b>DATE</b> | <b>AMOUNT</b> |
|-------------|---------------|

|   |              |                          |             |           |
|---|--------------|--------------------------|-------------|-----------|
| <b>Full Name of Contributor</b>               | <b>MO</b>    | <b>DAY</b>               | <b>YEAR</b> |           |
| MATTHEW MCTISH                                |              |                          |             |           |
| <b>Mailing Address</b> 5728 RICKY RIDGE TRAIL |              |                          |             |           |
| <b>City</b> OREFIELD                          | <b>State</b> | <b>Zip Code (Plus 4)</b> |             |           |
|   | PA           | 18069                    | 4           | 20 2004   |
|   |              |                          |             | \$ 100.00 |

|                                       |              |                          |             |           |
|---------------------------------------|--------------|--------------------------|-------------|-----------|
| <b>Full Name of Contributor</b>       | <b>MO</b>    | <b>DAY</b>               | <b>YEAR</b> |           |
| STUART & JANE WELLS SCHOOLEY          |              |                          |             |           |
| <b>Mailing Address</b> 4655 FIR DRIVE |              |                          |             |           |
| <b>City</b> NAZARETH                  | <b>State</b> | <b>Zip Code (Plus 4)</b> |             |           |
|                                       | PA           | 18064                    | 4           | 20 2004   |
|                                       |              |                          |             | \$ 100.00 |

|                                      |              |                          |             |           |
|--------------------------------------|--------------|--------------------------|-------------|-----------|
| <b>Full Name of Contributor</b>      | <b>MO</b>    | <b>DAY</b>               | <b>YEAR</b> |           |
| EDWARD TOURJE                        |              |                          |             |           |
| <b>Mailing Address</b> RR #2 BOX 27B |              |                          |             |           |
| <b>City</b> UNIONDALE                | <b>State</b> | <b>Zip Code (Plus 4)</b> |             |           |
|                                      | PA           | 18470                    | 4           | 20 2004   |
|                                      |              |                          |             | \$ 100.00 |

|                                     |              |                          |             |           |
|-------------------------------------|--------------|--------------------------|-------------|-----------|
| <b>Full Name of Contributor</b>     | <b>MO</b>    | <b>DAY</b>               | <b>YEAR</b> |           |
| MARIAN ELIZABETH MIENTUS            |              |                          |             |           |
| <b>Mailing Address</b> RR 1 BOX 383 |              |                          |             |           |
| <b>City</b> MT PLEASANT             | <b>State</b> | <b>Zip Code (Plus 4)</b> |             |           |
|                                     | PA           | 15666                    | 4           | 30 2004   |
|                                     |              |                          |             | \$ 100.00 |

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

|                   |
|-------------------|
| <b>PAGE TOTAL</b> |
| \$ 400.00         |

## 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> | <b>Reporting Period</b>                  |
| BOSCOLA, LISA FRIENDS OF                     | <b>From:</b> <b>To:</b> <u>5/17/2004</u> |

|                                     |  |  |       | DATE |                   |     | AMOUNT |    |          |
|-------------------------------------|--|--|-------|------|-------------------|-----|--------|----|----------|
| Full Name of Contributing Committee |  |  |       |      | MO                | DAY | YEAR   | \$ | 1,000.00 |
| SRW & A PAC                         |  |  |       |      |                   |     |        |    |          |
| Mailing Address                     |  |  |       |      | 4                 | 30  | 2004   |    |          |
| 200 S. BROAD STE 850                |  |  |       |      |                   |     |        |    |          |
| City                                |  |  | State |      | Zip Code (Plus 4) |     |        |    |          |
| PHILADELPHIA                        |  |  | PA    |      | 19102             |     |        |    |          |

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

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

**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><br><br>BOSCOLA, LISA FRIENDS OF | <b>Reporting Period</b><br><br><b>From:</b> <b>To:</b> <u>5/17/2004</u> |
|--|---|

|  |          |                         |           | DATE               | AMOUNT            |      |           |
|--|----------|-------------------------|-----------|--------------------|-------------------|------|-----------|
| Full Name of Contributor                             |          |                         |           | MO                 | DAY               | YEAR |           |
| DRS. JOSEPH & ROSE MATTIOLI                          |          |                         |           |                    |                   |      | \$ 300.00 |
| Mailing Address PO BOX 500                           |          |                         |           | 4                  | 20                | 2004 |           |
| City LONG POND                                       | State PA | Zip Code (Plus 4) 18344 |           |                    |                   |      |           |
| Employer Name SELF EMPLOYED                          |          |                         |           | Occupation DOCTORS |                   |      |           |
| Employer Mailing Address/Principal Place of Business |          |                         | City      | State              | Zip Code (Plus 4) |      |           |
| PO BOX 500   |          |                         | LONG POND | PA                 | 18344             |      |           |

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

|                   |
|-------------------|
| <b>PAGE TOTAL</b> |
| \$ 300.00         |

## 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<br><br>From: <span style="float: right;">To:</span> |
|---------------------------------------|--|

|                     |       |                   |  | DATE | AMOUNT |      |         |
|---------------------|-------|-------------------|--|------|--------|------|---------|
| Full Name           |       |                   |  | MO   | DAY    | YEAR | \$ 0.00 |
| Mailing Address     |       |                   |  |      |        |      |         |
| City                | State | Zip Code (Plus 4) |  |      |        |      |         |
| Receipt Description |       |                   |  |      |        |      |         |

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

|                   |
|-------------------|
| <b>PAGE TOTAL</b> |
| \$ 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**

|  |  |                         |                             |
|--|--|-------------------------|-----------------------------|
| <b>Name of Filing Committee or Candidate</b>   |  | <b>Reporting Period</b> |                             |
| BOSCOLA, LISA FRIENDS OF   |  | <b>From:</b>            | <b>To:</b> <u>5/17/2004</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<br><br>From: <span style="float: right;">To:</span> |
|---------------------------------------|--|

|   |       |                   | 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. |       |                   |      |     |      | <b>PAGE TOTAL</b><br><br>\$ 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<br>0.00 |         |

# SCHEDULE III STATEMENT OF EXPENDITURES

|  |                           |
|--|---------------------------|
| <b>Name of Filing Committee or Candidate</b> | <b>Reporting Period</b>   |
| BOSCOLA, LISA FRIENDS OF                     | From To: <u>5/17/2004</u> |

| DATE   |                 |                                |  | AMOUNT    |
|--|-----------------|--------------------------------|--|-----------|
| <b>To Whom Paid</b>                          | <b>MO</b>       | <b>DAY</b>                     | <b>YEAR</b>                            |           |
| NC COUNCIL OF DEMO WOMEN                     |                 |                                |  |           |
| <b>Mailing Address</b> 1553 MONOCACY STREET  | 4               | 13                             | 2004                                   | \$ 5.00   |
| <b>City</b> BETHLEHEM                        | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 18018 | <b>Description of Expenditure</b> DUES |           |
| <b>To Whom Paid</b>                          | <b>MO</b>       | <b>DAY</b>                     | <b>YEAR</b>                            |           |
| MONROE CTY 4-H HORSE FUND                    |                 |                                |  |           |
| <b>Mailing Address</b> 770 CREEK RD          | 4               | 13                             | 2004                                   | \$ 30.00  |
| <b>City</b> EAST STROUDSBURG                 | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 18301 | <b>Description of Expenditure</b> AD   |           |
| <b>To Whom Paid</b>                          | <b>MO</b>       | <b>DAY</b>                     | <b>YEAR</b>                            |           |
| GREATER SLOVAK ASSOCIATION INC               |                 |                                |  |           |
| <b>Mailing Address</b> 1058 CATASAUQUA AVE   | 4               | 13                             | 2004                                   | \$ 60.00  |
| <b>City</b> ALLENTOWN                        | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 18102 | <b>Description of Expenditure</b> AD   |           |
| <b>To Whom Paid</b>                          | <b>MO</b>       | <b>DAY</b>                     | <b>YEAR</b>                            |           |
| AMERICAN ITALIAN CAUCUS                      |                 |                                |  |           |
| <b>Mailing Address</b> 115 IRVIS OFFICE BLDG | 4               | 13                             | 2004                                   | \$ 100.00 |
| <b>City</b> HARRISBURG                       | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 17120 | <b>Description of Expenditure</b> DUES |           |
| <b>To Whom Paid</b>                          | <b>MO</b>       | <b>DAY</b>                     | <b>YEAR</b>                            |           |
| PA FEDERATION OF DEM WOMEN                   |                 |                                |  |           |
| <b>Mailing Address</b> PO BOX 86             | 5               | 3                              | 2004                                   | \$ 100.00 |
| <b>City</b> YORK                             | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 17405 | <b>Description of Expenditure</b> DUES |           |
| <b>To Whom Paid</b>                          | <b>MO</b>       | <b>DAY</b>                     | <b>YEAR</b>                            |           |
| WHITEHALL DEMOCRATIC CLUB                    |                 |                                |  |           |
| <b>Mailing Address</b> 3218 S. 5TH ST.       | 5               | 3                              | 2004                                   | \$ 3.00   |
| <b>City</b> WHITEHALL                        | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 18052 | <b>Description of Expenditure</b> DUES |           |

|   |                    |                                   |   |            |             |                 |
|---|--------------------|-----------------------------------|---|------------|-------------|-----------------|
| <b>To Whom Paid</b><br>NAZARETH FOOTBALL BOOSTERS |                    |                                   | <b>MO</b>                               | <b>DAY</b> | <b>YEAR</b> | <b>\$</b> 50.00 |
| <b>Mailing Address</b> 508 ROBERTS RD             |                    |                                   | 5                                       | 3          | 2004        |                 |
| <b>City</b> NAZARETH                              | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18064 | <b>Description of Expenditure</b><br>AD |            |             |                 |

  

|  |                    |                                   |   |            |             |                  |
|--|--------------------|-----------------------------------|---|------------|-------------|------------------|
| <b>To Whom Paid</b><br>MONROE CTY HONORARY SOCIETY |                    |                                   | <b>MO</b>                                 | <b>DAY</b> | <b>YEAR</b> | <b>\$</b> 125.00 |
| <b>Mailing Address</b> RR 4 BOX 4122               |                    |                                   | 5   | 3          | 2004        |                  |
| <b>City</b> STROUDSBURG                            | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18360 | <b>Description of Expenditure</b><br>DUES |            |             |                  |

  

|   |                    |                                   |   |            |             |                 |
|---|--------------------|-----------------------------------|---|------------|-------------|-----------------|
| <b>To Whom Paid</b><br>PEN ARGYL BOOSTERS |                    |                                   | <b>MO</b>                               | <b>DAY</b> | <b>YEAR</b> | <b>\$</b> 45.00 |
| <b>Mailing Address</b> 697 SANDT RD       |                    |                                   | 5                                       | 10         | 2004        |                 |
| <b>City</b> PEN ARGYL                     | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18072 | <b>Description of Expenditure</b><br>AD |            |             |                 |

  

|  |                    |                                   |   |            |             |                  |
|--|--------------------|-----------------------------------|---|------------|-------------|------------------|
| <b>To Whom Paid</b><br>DRISCOLL FOR CONGRESS |                    |                                   | <b>MO</b>   | <b>DAY</b> | <b>YEAR</b> | <b>\$</b> 500.00 |
| <b>Mailing Address</b> PO BOX 5341           |                    |                                   | 5   | 17         | 2004        |                  |
| <b>City</b> BETHLEHEM                        | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18015 | <b>Description of Expenditure</b><br>CONTRIBUTION |            |             |                  |

  

|  |  |  |  |  |  |                    |
|--|--|--|--|--|--|--------------------|
| <b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b> |  |  |  |  |  | <b>PAGE TOTAL</b>  |
|  |  |  |  |  |  | <b>\$</b> 1,018.00 |

