Campaign Finance Report

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

Filer Identificat	ion 9400	092			Repor	t	CANDI	DATE	СОМ	MITTEE	\checkmark	LOB	BYIST	
Number :		<u> </u>			Filed I									
Name of Filing	Committee, Candid	ate or L	obbyist:		BOSCO	LA, L	ISA FRIEN	NDS OF						
Street Address:														
City:	BETHLEHEM						State:	PA		Zip Co	de: 18	015		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 D PRIN	DAY F MARY	POST-	3.	AMENDMENT REPORT?		Yes	No	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	≣- 5.	30 D ELEC	DAY F CTION	POST- 6.		TERMINATION REPORT?		Yes	No	\checkmark
report type)	ANNUAL REPORT	7. X	Year 2004				ING METHO			PAPER		\checkmark	DISKE	TTE
Name of Office	⊥ Sought by Candida	te:					DATE O	F ELEC	TION	District Number		Par	ty Code	County Code
							мо	DAY	YEAR					
					11		2 2004		(SEE INS	TRUCTI	ONS FOR	CODES)		
	Summary of Receipts and MO DAY YEAR MO DAY YEAR					YEAR	FC	OR OFFIC	E USE	ONLY				
Expenditure	s from:		1 1		1	Ο	12	3	1 2004	- II				
A. Amount Bro	ought Forward From	n Last F	Report			9	\$	1	29,119.18	1				
B. Total Monet	tary Contributions	And Red	eipts (Fron	n Sche	dule I)		\$		16.38					
C. Total Funds	Available (Sum Of	Lines A	and B)			9	\$	1	29,135.56					
D. Total Exper	nditures (From Sch	edule II	1)			9	\$		6,623.00					
E. Ending Cash Balance (Subtract Line D From Line C)						\$	12	22,512.56	4					
F. Value Of In-	-Kind Contributions	s Receiv	ed (From S	chedu	le II)		\$		0.00	4				
G. Unpaid Deb	ts And Obligations	(From	Schedule I\	/)		9	\$		0.00					
				AFF	IDAVI	T SI	ECTION							
	is a Committee rep													
I swear (or affirm correct and comp	i) that this report, incl lete.	uding th	e attached so	hedule	s filed on	pape	r or by elect	ronic mee	dium, are to	the best o	of my knov	vledge	and beli	ef , true
Sworn to and sub	scribed before me this dav of	5	20						Signatur	e of Perso	on Submitt	ing Rep	oort	
						_				Duin	nted Name			
	Signatu	re				_				Prir	iteu Name			
My Commission E	MO	n	AY	YR		_			a Code	Ema	ne Teleph	one Nu	mber	
Part II. If this is						Candi	data chall			Buyen				
I swear (or affirm	s a report of a cano) that to the best of n							-		sions of th	e act of Ju	ıne 3,1	937 (P.L	. 1333,
No 320) as amend Sworn to and subs	led. cribed before me this													
	day of		20						5	ognature	of Candida	ite		
						_				Print	ed Name			
My Commission Ex	Signature pires									Ema	ail			
	мо	D	AY	YR	1	-		Area C	ode	D	aytime Te	elephor	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: <u>12/31/2004</u> 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) 16.38 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 16.38 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 Candidate				orting I	Period						
			From	om: 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				
				om: 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 Schedule I, Detailed Summary Page, Section 2.								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		ļ	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR		0.00	
Mailing Address							\$	0.00	
City	State	Zip Code	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				eporting Period					
F			n:	То:					
				DATE AMOUNT					
Full Name of Contributor				DAY	YEAR	\$	0.00		
State	Zip Code (Plu	s 4)							
•			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			
	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 \$ State Zip Code (Plus 4) Occupation ce of Business City State Zip Code		

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 Ca	Name of Filing Committee or Candidate Report			ing Perio) Period				
BOSCOLA, LISA FRIENDS OF From			From:		То:			<u>12/31/2004</u>	
				D	ATE			AMOUNT	
Full Name KEYSTONE NAZARETH BANK & TRUST				мо	DAY	YEAR	\$	16.38	
Mailing Address				12	31	2004			
City BETHELEHEM	State	Zip Code (P	lus 4)	12	51	200			
	PA	18018							
Receipt Description INTERE	ST ON ACCOUNT DECEM	MBER							
				-]		PAGE TOTAL	
Enter Grand Total of Part E or	n Schedule I, Detailed	Summary Page,	Section	4.			\$	16.38	

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>12/31/2004</u>						
. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR									
TOTAL for the Reporting Pe	riod (1)	\$	0.00						
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)									
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 Candidate			Reporting Period					
			From:			То:		
	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 Detailed Summary Page, PAGE TOTAL Section 2.								
						\$	0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED VALUE OVER \$250.00

Name of Filing Committee or Candidate			Rej	Reporting Period					
				om:	То:				
					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 Place of Business		City	State	State Zip Code(Plus 4) Descri		iption of Contribution			
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	e of Filing Committee or Candidate			Reporting Period								
BOSC	COLA, LISA FRIENDS OF			From			То:	<u>12/31/2004</u>				
					DATE			AMOUNT				
To Wh	nom Paid			мо	DAY	YEAR						
CITIZ	ENS FOR GLEN REIBMAN											
Mailin	g Address			11	30	2004	\$	250.00				
City	EASTON	State	Zip Code (Plus 4)	Description of Expenditure								
		PA	18040	CONTRI	BUTION		-					
-	nom Paid M KIDS			мо	DAY	YEAR						
Mailin	g Address			11	30	2004	\$	25.00				
City	NAZARETH	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure	nditure					
PA 18004				DONATI	ON							
To Whom Paid TOM ACRI			мо	DAY	YEAR							
Mailing Address			12	13	2004	\$	203.00					
City HARRISBURG State Zip Code (Plus 4)			Descript	l tion of Exp	l enditure							
		РА	17104	OUTING	PRIZES							
To W	nom Paid			мо	DAY	YEAR						
BETH	LEHEM BREWWORKS			MO		TEAK						
Mailin	g Address			12	23	2004	\$	145.00				
City	BETHLEHEM	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure						
		PA	18018	CAMPAI	GN STRAT	EGY DIN	NER					
	hom Paid IDS OF JENNIFER MANN			мо	DAY	YEAR						
Mailin	g Address			12	23	2004	\$	5,000.00				
City	ALLENTOWN	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	1					
		РА	18105									
To W	nom Paid			мо	DAY	YEAR						
FRIEN	IDS OF JOHN SIPTROTH											
Mailing Address			12	28	2004	\$	1,000.00					
City EAST STROUDSBURG State Zip Code (Plus 4) PA 18301				Description of Expenditure								
		•	•					PAGE TOTAL				
Enter	Grand Total of Expenditures of	on Page 1, Report C	Cover Page, Item I) .			\$	6,623.00				