Campaign Finance Report

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

Filer Identificat	tion 9400	092			Repor Filed		CANDI	DATE	СОМ	MITTEE	✓	LOB	BYIST	
	Committee, Candid	ate or L	obbyist:		I	-	LISA BO	SCOLA						
Street Address	:													
City:	BETHLEHEM						State:	PA		Zip Co	de: 18	015		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	AY PRE	- 2.	30 D PRIM		POST-	3.	AMENDI REPORT		Yes	No	· 🗸
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA				CTION	POST-	5.	TERMIN REPORT		Yes	No	· 🗸
report type)	ANNUAL REPORT	7.	Year 2022	2			FILING METHOD () CHECK ONE					\checkmark	DISKE	TTE
Name of Office	 Sought by Candida	te:					DATE C	OF ELEC	TION	District Number		Par	ty Code	County Code
	,						мо	DAY	YEAR	Number	coue			coue
							11		1 2022		(SEE INS	TRUCTI	ONS FOR	CODES)
	Receipts and	мо	DAY	YEAF	2		мо	DAY	YEAR	FC	OR OFFIC	E USE	ONLY	
Expenditure	s from:		5 3	3 2	022	ГО	5	5 2	7 2022					
A. Amount Bro	ought Forward From	m Last R	eport			\$	þ	4	06,469.32					
B. Total Mone	tary Contributions	And Rec	eipts (From	m Sche	edule I)	\$	\$		500.00					
C. Total Funds	s Available (Sum Of	f Lines A	and B)			4	\$	4	06,969.32					
D. Total Expe	nditures (From Sch	edule II	I)			4	\$		2,630.00					
E. Ending Cas	h Balance (Subtrac	t Line D	From Line	C)			5	40	04,339.32					
F. Value Of In	-Kind Contribution	s Receiv	ed (From S	Schedu	le II)	4	\$		0.00	4				
G. Unpaid Deb	ots And Obligations	(From S	Schedule I	V)		4	\$		0.00					
				AFF	IDAV	IT SI	ECTION							
	is a Committee rep	-	_							-				
I swear (or affirn correct and comp	n) that this report, inc lete.	luding the	e attached so	chedule	s filed or	ı paper	r or by elect	tronic me	dium, are to	the best o	of my knov	vledge	and beli	ef , true
Sworn to and sub	oscribed before me this day of	S	20						Signatur	e of Perso	on Submitt	ing Rej	oort	
	Signatu	ire								Prir	nted Name			
My Commission I	Expires					_				Ema	ail			
	мо	D	AY	YR				Area	a Code	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	s a report of a can	didate's	authorized	d Comr	nittee, (Candio	date shall	sign hei	re.					
I swear (or affirm No 320) as amend) that to the best of r led.	ny knowl	edge and be	lief this	s politica	l comn	nittee has r	ot violate	ed any provis	sions of th	e act of Ju	ine 3,1	937 (P.I	. 1333,
Sworn to and subscribed before me this day of 20									S	Signature	of Candida	ite		
						_				Printe	ed Name			
My Commission Ex	Signature					_				Ema	ail			
						_								
	мо	D	AY	YF	ł			Area C	ode	D	aytime Te	elephor	ne Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** FRIENDS OF LISA BOSCOLA From: <u>5/3/2022</u> **To:** 5/27/2022 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)** 0.00 500.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 500.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 500.00 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				Reporting Period						
				From:			То:			
					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 Candida	te			oorting P	eriod					
			Fro	From: T				0:		
					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	\$	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:			То:			
				DA	TE		A	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 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				Reporting Period						
FRIENDS OF LISA BOSCOLA					<u>5/3/2</u>	<u>022</u> То	To: <u>5/27/2022</u>			
				DA	TE			AMOUNT		
Full Name of Contributor HELLERTOWN X ROADS				мо	DAY	YEAR	\$	500.00		
Mailing Address				5	19	2022	,			
City HELLERTOWN	State	Zip Code (Plus	; 4)	5	19		•			
	PA	18055								
Employer Name SELF- OWNER SOLE P	ROP			Occupation						
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip C	ode (Plus 4)		
Enter Grand Total of Part C on Schee	dule I, Detailed Su	ummary Page,	Sectio	on 3.			\$	PAGE TOTAL 500.00		

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						
			From:			То:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (Plus 4)						
Receipt Description	·	•					•		
		_						PAGE TO	TAL
Enter Grand Total of Part 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 Period		
FRIENDS OF LISA BOSCOLA	From:	<u>5/3/2022</u> то:	<u>5/27/2022</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T 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 Re			Reporting Period					
F				From:			То:	
	DATE			AMOUNT				
Full Name of Contributor				DAY	YEAR			
Mailing Address		-				 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:						-		
				_	Г			
Enter Grand Total of Part F on Sched Section 2.	ailed Summary Page,			PAGE TOTAL				
						\$		0.00

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

Name of Filing Committee or Candidate				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 Plac	e of Business	City	State	e Zip	Code(Plus 4)	Descri	ption 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

Nam	Name of Filing Committee or Candidate				Reporting Period						
FRIENDS OF LISA BOSCOLA				From	<u>5/:</u>	<u>3/2022</u>	То:	<u>5/27/2022</u>			
					DATE	AMOUNT					
To Whom Paid				мо	DAY	YEAR					
DILLO	ON FOR SENATE										
Mailir	ng Address				5	13	2022	\$	2,500.00		
City	PHILADELPHIA	State		Zip Code (Plus 4)	Description of Expenditure						
		PA			DONAT	ION					
									PAGE TOTAL		
Ente	Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							\$	2,500.00		