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 : | ion 9400 | 092 | | | Repor Filed I | | CANDI | DATE | co | OMMITTEE | √ | LOB | BYIST | |
|--|----------------------------------|-----------|-----------------------|----------|------------------|---------------|---------------------|-----------|------------|-------------------|-------------|--------------|-----------|----------------|
| | Committee, Candida | ate or Lo | obbyist: | | | - | LISA BOS | SCOLA | | | | | | |
| Street Address: | PO BOX 1294 | | | | | | | | | | | | | |
| City: | BETHLEHEM | | | | | | State: | PA | | Zip Co | ode: 18 | 3015 | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | 1. | 2ND FRIDA PRIMARY | Y PRE | - 2. | 30 DA PRIM | | POST- | 3. | AMEND REPOR | | Yes | No | \checkmark |
| (place X to the right of | 6TH TUESDAY PRE-ELECTION | 4. | 2ND FRIDA ELECTION | Y PRE | - 5. | 30 D/ ELEC | | POST- | 6. | TERMIN REPOR | | Yes | No | \checkmark |
| report type) | ANNUAL REPORT | 7. | Year 2022 | | | | NG METHO CHECK O | | | PAPER | | \checkmark | DISKE | TTE |
| Name of Office S | Sought by Candidat | te: | | | | | DATE O | F ELEC | TION | District Numbe | | Par | ty Code | County Code |
| | | | | | | | мо | DAY | YEAR | | | | | |
| | | | | | | | 11 | | 1 20 | 22 | (SEE IN | STRUCTI | ONS FOR (| CODES) |
| | Receipts and | мо | DAY | YEAR | 2 | | мо | DAY | YEAR | F | OR OFFI | CE USE | ONLY | |
| Expenditures | s from: | | 5 3 | 2 | 022 1 | 0 | 5 | 2 | .7 20 | 22 | | | | |
| A. Amount Bro | ught Forward Fron | n Last R | eport | | | \$ | | 4 | 106,469. | 32 | | | | |
| B. Total Monet | ary Contributions A | And Rec | eipts (Fron | n Sche | dule I) | \$ | | | 500. | 00 | | | | |
| C. Total Funds | Available (Sum Of | Lines A | and B) | | | \$ | | 4 | 106,969. | 32 | | | | |
| D. Total Expen | ditures (From Sche | edule II | I) | | | \$ | | | 2,630. | 00 | | | | |
| E. Ending Cash | Balance (Subtract | t Line D | From Line | C) | | \$ | | 4 | 04,339.3 | 32 | | | | |
| F. Value Of In- | Kind Contributions | Receiv | ed (From S | chedu | le II) | \$ | | | 0. | 00 | | | | |
| G. Unpaid Deb | ts And Obligations | (From S | Schedule I\ | /) | | \$ | | | 0. | 00 | | • | | |
| | | | | AFF | IDAVI | T SE | CTION | | | | | | | |
| | s a Committee repo | | - | | | | | • • | | - | | | | |
| I swear (or affirm correct and compl |) that this report, incl ete. | uding the | e attached sc | hedules | s filed on | paper | or by elect | ronic me | dium, are | to the best | of my knov | wledge | and beli | ef , true |
| Sworn to and subs | cribed before me this day of | • | 20 | | | | | | Signa | ture of Pers | on Submit | ting Rep | oort | |
| | Signatu | re | | | | _ | | | | Pri | nted Name | 9 | | |
| My Commission E | xpires | | | | | _ | | | | Em | ail | | | |
| | мо | D | AY | YR | | | | Are | a Code | Dayti | me Teleph | none Nu | mber | |
| Part II- If this is | a report of a cand | lidate's | authorized | Comn | nittee, C | Candid | ate shall | sign he | re. | | | | | |
| I swear (or affirm) No 320) as amende |) that to the best of m ed. | ıy knowle | edge and bel | ief this | political | comm | ittee has n | ot violat | ed any pro | ovisions of t | he act of J | une 3,1 | 937 (P.L | . 1333, |
| Sworn to and subso | cribed before me this day of | | 20 | | | | | | | Signature | of Candid | ate | | |
| | | | | | | _ | | | | Print | ed Name | | | |
| My Commission Exp | Signature | | | | | _ | | | | Em | ail | | | |
| | мо | D | AY | YR | 1 | - | | Area C | Code | | Daytime T | elephor | ie 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:** <u>5/27/2022</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)** 0.00 500.00 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.)

PAGE 3

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 | | | | | | : | | | | |
| | | | | | DATE | | | AMOUNT | | |
| Full Name of Contributing Committee | | | | мо | DAY | YEAR | | | | |
| Mailing Address | | | | | | | \$ | 0.00 | | |
| City | State | Zip Code (Plus | 4) | | | | | | | |
| | | | | | | | Γ | 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 | | | | | | | | | |
| | | | From: 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 | | | | | | | |
|---------------------------------------|------------------|----------------|------------------|------|-----|------|----|------------|--|--|
| | | | From: | | | То: | | | | |
| | | | | DA | TE | | А | MOUNT | | |
| Full Name of Contributing Committee | 2 | | | мо | DAY | YEAR | | | | |
| Mailing Address | | | | | | | \$ | 0.00 | | |
| City | State | Zip Cod | e (Plus 4) | | | | | | | |
| | | | | | | ſ | | PAGE TOTAL | | |
| Enter Grand Total of Part C on Sc | hedule I, Detail | led Summary Pa | age, Sectio | n 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 Re | | | | Reporting Period | | | | | | |
|---|---------------------|----------------|--------|------------------|--------------|---------------|-------------------------------|--|--|--|
| FRIENDS OF LISA BOSCOLA From | | | | | <u>5/3/2</u> | <u>022</u> To | To: <u>5/27/2022</u> | | | |
| | | | | | ATE | | AMOUNT | | | |
| Full Name of Contributor HELLERTOWN X ROADS | | | | мо | DAY | YEAR | | | | |
| Mailing 1443 MAIN ST Address | | | | | | | \$ 500.00 | | | |
| City HELLERTOWN | State PA | Zip Code (Plus | 5 4) | 5 | 19 | 2022 | | | | |
| Employer Name SELF- OWNER SOLE | PROP | | | Occupation | | | | | | |
| Employer Mailing Address/Principal Plac Business | e of | City | | | State | | Zip Code (Plus 4) | | | |
| Enter Grand Total of Part C on Sche | dule I, Detailed Su | ummary Page, | Sectio | on 3. | | \$ | PAGE TOTAL 5 500.00 | | | |
| | | | | | | | | | | |

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 | Name of Filing Committee or Candidate | | | Reporting Period | | | | | | |
|-----------------------------|---------------------------------------|----------------------|---------|------------------|-----|------|----|----------|------|--|
| From | | | | n: To: | | | | | | |
| | | | | D | ATE | | | AMOUNT | | |
| Full Name | | | | мо | DAY | YEAR | | | | |
| Mailing Address | | | | | | | \$ | i | 0.00 | |
| City | State | Zip Code (| Plus 4) | | | | | | | |
| Receipt Description | | | | | 1 | 1 | | | | |
| Enter Grand Total of Part E | on Schodulo I. Dotailog | | Section | 4 | | | | PAGE TOT | AL | |
| | | i Suillillai y Page, | Section | | | | \$ | | 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 | | | | Reporting Period | | | | | | |
|--|-------|-------------------|----|------------------|------|------------|------|--|--|--|
| | From: | | | То: | | | | | | |
| | | | | DATE | | АМС | DUNT | | | |
| 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 Detai Section 2. | | | | mary Pag | je, | PAGE TOTAL | | | | |
| | | | | | 4 | 5 | 0.00 | | | |

0.00

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

| Name of Filing Committee or C | 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) | | | | | | | |
| Employer of Contributor | | | | | Occupation | | | | | | |
| Employer Mailing Address/Principal Place of City State Business | | | te | Zip 4) | Zip Code(Plus Descr 4) | | iption of Contribution | | | | |
| inter Grand Total of Part G on Schedule II. In-Kind Contributions Dot | | | | | iled | | | | PAGE TOTAL | | |

| Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3. | PA |
|--|----|
| | |

SCHEDULE III STATEMENT OF EXPENDITURES

| Name of Filing Committee or Candidate | Name of Filing Committee or Candidate | | | | Reporting Period | | | | | | |
|---|--|--|---|------------|------------------|------------------|----------|--|--|--|--|
| FRIENDS OF LISA BOSCOLA | | | | <u>5/3</u> | То: | <u>5/27/2022</u> | | | | | |
| | | | | DATE AMO | | | | | | | |
| To Whom Paid DILLON FOR SENATE | | | | DAY | YEAR | | | | | | |
| Mailing Address PO BOX | | | 5 | 13 | 2022 | \$ | 2,500.00 | | | | |
| City PHILADELPHIA | City PHILADELPHIA State Zip Code (Plus 4) Description of Expenditure PA DONATION | | | | | | | | | | |
| Fater Canad Tatal of Funanditures on Dana 1, Denort Course Dana Itana | | | | | | PAGE TOTAL | | | | | |
| Enter Grand Total of Expenditures | Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D | | | | | \$ | 2,500.00 | | | | |