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 940	0092			Repo Filed		:	CANDI	DATE		СОМ	ITTEE	✓	LOB	BYIST			
Name of Filing C	Committee, Candi	date or L	obbyist:	İ	BOSC	OLA	, LIS	SA FRIEN	NDS OF	=								
Street Address:	PO BOX 129	4																
City:	BETHLEHEM -							State:	PA			Zip Cod	de: 18	8016-1294				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	2.		0 DA RIMA		POST-	3.		AMENDM REPORT		Yes	No			
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- 5.		0 DA LECT		POST-	6. X			TERMINATION Yes REPORT?					
report type)	ANNUAL REPOR	7.	Year 2022					IG METHO				PAPER	DISKE	TTE				
Name of Office S	Sought by Candid	ate:	-					DATE 0	F ELE	CTIC	ON	District Number	Office Code	ty Code	Coun			
SENATOD IN TH	HE GENERAL ASS	SEMBLY						МО	DAY	YI	EAR	18						
SLIVATOR IN TI	TIL GLIVLIVAL AS	DEMOET						11		8	2022		(SEE INSTRUCTIONS FO					
	Receipts and	МО	DAY Y	EAR				МО	DAY	Y	EAR	FO	R OFFI	CE USE	ONLY			
Expenditures	s from:		10 25	20)22	то)	11		28	2022							
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			291,	104.46							
B. Total Moneta	ary Contributions	And Rec	eipts (From S	Sche	dule I)	\$			21,	550.00							
C. Total Funds	Available (Sum 0	of Lines A	and B)				\$			312,	654.46							
D. Total Expend	ditures (From Sc	hedule II	I)				\$			24,2	263.65							
E. Ending Cash	Balance (Subtra	ct Line D	From Line C)				\$		2	288,3	390.81							
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	edul	e II)		\$				0.00							
G. Unpaid Debt	ts And Obligation	s (From S	Schedule IV)				\$				0.00							
			ļ	4FF	IDA۱	/IT	SE	CTION										
PART I - If this is	s a Committee re	port, trea	surer sign he	re. I	f this	is a	Can	didate re	eport, o	candi	date sig	jn here.						
I swear (or affirm) correct and comple) that this report, in ete.	cluding the	attached sche	dules	filed o	n pa	per o	or by elect	ronic m	edium	, are to t	the best o	f my knov	wledge	and beli	ef , tru	ue	
Sworn to and subs	cribed before me th day of	is	20							5	Signature	of Perso	n Submit	ting Re	oort		_	
	— — Signat	ure	_			_						Prin	ted Name	•			_	
My Commission Ex	cpires											Ema	il				-	
	мо	D	AY	YR					Ar	ea Co	de	Daytim	e Teleph	one Nu	mber			
Part II- If this is	a report of a car	ndidate's	authorized Co	omm	ittee,	Can	ndida	ate shall	sign h	ere.								
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowle	edge and belief	this	politic	al co	ommi	ittee has n	ot viola	ted ar	ny provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333	3,	
Sworn to and subsc		5									s	ignature o	of Candida	ate			-	
	day of					_						Printe	d Name				-	
	Signature	ı				_											_	
My Commission Exp	pires											Ema	II					
	мо	D	AY	YR		_			Area	Code		Da	aytime T	elephor	ne Numb	er	-	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
BOSCOLA, LISA FRIENDS OF	From:	10/25/202	<u>2</u> To:	11/28/2022
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)			\$	0.00
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
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting) Period	(4)	\$	21,550.00
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			\$	21,550.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize only with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		<u> </u>			DATE			AMOUNT
Full Name of Contributi	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
	•	·			•	•	$\overline{}$	DACE TOTAL

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

PAGE TOTAL \$0.00

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 of Canadate				Reporting Period From: To:				
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	1					

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

PAGE TOTAL \$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 Candi	date		Reporting	Period				
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.			\$	0.00

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				Rep	orting Pe	riod				
				Fror	n:		To	o:		
					D	ATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								\$		0.00
City	State	Zi	p Code (Plus	4)						
Employer Name		•			Occupa	tion	•	•		
Employer Mailing Address/Principal Pla Business	ce of		City			State		Zip C	ode (Plus	4)
Enter Grand Total of Part C on Scho	edule I, Detail	led Sumr	mary Page,	Section	on 3.			\$	PAGE TO	TAL 0.00

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 Pe	eriod	
BOSCOLA, LISA FRIENDS OF	From:	10/25/2022 To:	11/28/2022

			D	ATE		AMOUNT
Full Name Blue Dot (Todd Crebbs)			МО	DAY	YEAR	
Mailing Address 8065 Crea	mery Rd		11	10	2022	\$ 21,550.00
City Albertis	State PA	Zip Code (Plus 4) 18011	11	10	2022	
Receipt Description Refur	nd of overpayment.					

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

PAGE TOTAL 21,550.00

\$

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 Peri	od	
BOSCOLA, LISA FRIENDS OF	From:	<u>10/25/2022</u> To:	11/28/2022
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR	ł	
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, 1		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candid	ate		Reporting	g 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 S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	те Г		PAGE TOTAL
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$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)					
Employer of Contributor					Occupa	ation			
Employer Mailing Address/Principal Plad Business	ce of	City	Sta	ite	Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, I	n-Kind	Contributions	Deta	ailed				PAGE TOTAL
Summary Page, Section 3.									0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or	Candidate		Reporti	ng Period			
BOSCOLA, LISA FRIENDS O	F		From	10/2	5/2022	То:	11/28/2022
				DATE			AMOUNT
To Whom Paid City & State			мо	DAY	YEAR		
Mailing Address Requeste	d		11	27	2022	\$	5,500.00
City Harrisburg	State PA	Zip Code (Plus 4) 17101	Descri Advert	otion of Exp			
To Whom Paid Thomas Severison			МО	DAY	YEAR		
Mailing Address 901 E Wa	lnut St		11	16	2022	\$	7,500.00
City Pen Argyl	State PA	Zip Code (Plus 4) 18072	Descrip Polling	otion of Exp	enditure	1	
To Whom Paid Jim S	·		МО	DAY	YEAR		
Mailing Address 323 E Un	ion Blvd		11	28	2022	\$	60.50
City Bethlehem	State PA	Zip Code (Plus 4) 18018		otion of Exp r Parade Ti			
To Whom Paid Meghan Lago			мо	DAY	YEAR		
Mailing Address 1864 Feri	ry St		11	14	2022	\$	41.95
City Easton	State PA	Zip Code (Plus 4) 18042	1	otion of Exp se Reimbur			
To Whom Paid Granola Factory			МО	DAY	YEAR		
Mailing Address 518 Long	St		11	14	2022	\$ \$	308.00

Zip Code (Plus 4)

18020

Description of Expenditure

Holiday Gifts

State

PΑ

City

Bethlehem

								PAGE	12
To Whom Paid Easton Candle				мо	DAY	YEAR			
Mailing Address 117 N 3rd St			11	14	2022	\$		466.40	
City Easton		State PA	Zip Code (Plus 4) 18042	Descrip Holiday	otion of Exp	penditure			
To Whom Paid USPS				МО	DAY	YEAR			
Mailing Address 650 S Greenwood Ave			11	14	2022	\$		120.00	
City Easton		State PA	Zip Code (Plus 4) 18042	Descrip Postage	otion of Exp	penditure			
To Whom Paid Friends of Mark Pinsley	у			МО	DAY	YEAR			
Mailing Address 1855 Valley Forge Rd			11	1	2022	\$		1,500.00	
City Allentown		State PA	Zip Code (Plus 4) 18104	Description of Expenditure Donation					
To Whom Paid									
City Center Wholesale				МО	DAY	YEAR			
Mailian Adduses	2 Hamilton St			MO	DAY 29	YEAR 2022	\$		766.80
Mailian Adduses	2 Hamilton St	State PA	Zip Code (Plus 4) 18105	10	29 otion of Exp	2022			766.80
Mailing Address 702	2 Hamilton St			10 Descrip	29 otion of Exp	2022			766.80
Mailing Address 702 City Allentown To Whom Paid David Donio	2 Hamilton St			10 Descrip Parade	29 Stion of Exp Candy	2022 penditure			766.80 500.00
Mailing Address 702 City Allentown To Whom Paid David Donio	2 Hamilton St 5 Edgeboro Blvd			Descrip Parade MO 11 Descrip	29 Ition of Exp Candy DAY	2022 penditure YEAR 2022 penditure	\$		
Mailing Address 702 City Allentown To Whom Paid David Donio Mailing Address 505	2 Hamilton St 5 Edgeboro Blvd	PA State	18105 Zip Code (Plus 4)	Descrip Parade MO 11 Descrip	29 Candy DAY 16	2022 penditure YEAR 2022 penditure	\$		
Mailing Address 702 City Allentown To Whom Paid David Donio Mailing Address 505 City Bethlehem To Whom Paid Friends of Jennifer Shu	2 Hamilton St 5 Edgeboro Blvd	PA State	18105 Zip Code (Plus 4)	10 Descrip Parade MO 11 Descrip Service	29 Ition of Exp Candy DAY 16 Ition of Exp s Rendere	2022 Penditure YEAR 2022 Penditure d	\$		

To Whom Paid Friends of Nick Miller Mailing Address 202 N 17th St			МО	DAY	YEAR		
			11	4	2022		
- 202 N 17th 3t			11	4	2022	\$	5,000.0
City Allentown	State PA	Zip Code (Plus 4) 18104	Description of Expenditure Donation				
Enter Grand Total of Expe	nditures on Page 1, Re	port Cover Page, Item D	<u> </u>				PAGE TOTAL
Enter Grand Total of Expe	nditures on Page 1, Re	eport Cover Page, Item D				\$	PAGE TOTAL 24,263.65
Enter Grand Total of Expe	nditures on Page 1, Re	eport Cover Page, Item D				\$	
Enter Grand Total of Expe	nditures on Page 1, Re	port Cover Page, Item D				\$	