

Campaign Finance Report

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

Filer Identification Number : 9400092		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: FRIENDS OF LISA BOSCOLA											
Street Address: P.O. BOX 1294											
City: BETHLEHEM					State: PA		Zip Code: 18016				
TYPE OF REPORT (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	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. X	Year 2023	FILING METHOD () CHECK ONE			PAPER <input checked="" type="checkbox"/>	DISKETTE			
Name of Office Sought by Candidate:					DATE OF ELECTION			District Number	Office Code	Party Code	County Code
					MO	DAY	YEAR				
					11	7	2023	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		11	28	2023		12	31	2023			
A. Amount Brought Forward From Last Report					\$ 448,991.27						
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 17,000.00						
C. Total Funds Available (Sum Of Lines A and B)					\$ 466,991.27						
D. Total Expenditures (From Schedule III)					\$ 21,060.94						
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 445,930.33						
F. Value Of In-Kind Contributions Received (From Schedule II)					\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)					\$ 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

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF LISA BOSCOLA	From: <u>11/28/2023</u> To: <u>12/31/2023</u>

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)	\$ 9,000.00
All Other Contributions (Part D)	\$ 8,000.00
TOTAL for the Reporting Period (3)	\$ 17,000.00

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

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.)	\$ 17,000.00
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

PAGE TOTAL	
\$	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					MO	DAY	YEAR	\$ 0.00	
Mailing Address									
City		State		Zip Code (Plus 4)					

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 Candidate FRIENDS OF LISA BOSCOLA	Reporting Period From: <u>11/28/2023</u> To: <u>12/31/2023</u>
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DATE				AMOUNT
Full Name of Contributing Committee	MO	DAY	YEAR	
UNITED AMERICA				
Mailing Address				
ADDRESSES WILL BE KEYED IN ONLINE				
City	11	10	2023	\$ 5,000.00
State				
Zip Code (Plus 4)				
Full Name of Contributing Committee	MO	DAY	YEAR	
COMCAST				
Mailing Address				
	12	23	2023	\$ 3,000.00
City				
State				
Zip Code (Plus 4)				
Full Name of Contributing Committee	MO	DAY	YEAR	
IRON MOUNTAIN EMPLOYEES PAC				
Mailing Address				
	12	23	2023	\$ 500.00
City				
State				
Zip Code (Plus 4)				
Full Name of Contributing Committee	MO	DAY	YEAR	
NORFORK SOUTHERN GOOD GOV'T FUND				
Mailing Address				
WASHINGTON DC	12	22	2023	\$ 500.00
City				
State				
Zip Code (Plus 4)				

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

PAGE TOTAL
\$ 9,000.00

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.)

Name of Filing Committee or Candidate FRIENDS OF LISA BOSCOLA	Reporting Period From: <u>11/28/2023</u> To: <u>12/31/2023</u>
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
RANDY GALIOTTO							
Mailing Address HEATHER LANE EASTON PA				12	21	2023	\$ 3,000.00
City	State	Zip Code (Plus 4)					
Employer Name ALLOY5				Occupation PRINCIPAL			
Employer Mailing Address/Principal Place of Business 530 W BROAD ST			City BETHLEHEM		State PA	Zip Code (Plus 4) 18018	

Full Name of Contributor				MO	DAY	YEAR	
KENT THIRY							
Mailing Address 2 CANTITOE LANE CHERRY HILLS VILLAGE CO 180113				11	10	2023	\$ 5,000.00
City	State	Zip Code (Plus 4)					
Employer Name SELF				Occupation PHILANTHROPIST			
Employer Mailing Address/Principal Place of Business SAME AS ABOVE			City		State	Zip Code (Plus 4)	

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

PAGE TOTAL
\$ 8,000.00

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: To:
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			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.

PAGE TOTAL	
\$	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>11/28/2023</u> To: <u>12/31/2023</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period		(1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period		(2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
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 From: To:
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			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.						PAGE TOTAL \$ 0.00

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SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period
FRIENDS OF LISA BOSCOLA	From <u>11/28/2023</u> To: <u>12/31/2023</u>

DATE				AMOUNT		
To Whom Paid MEGHAN LAGO			MO	DAY	YEAR	\$ 545.67
Mailing Address			11	23	2023	
City EASTON	State PA	Zip Code (Plus 4)	Description of Expenditure EXPENSE REIMBURSEMENT			
To Whom Paid NORTHAMPTON COUNTRY CLUB			MO	DAY	YEAR	\$ 2,617.38
Mailing Address WILLIAM PENN HWY			12	22	2023	
City EASTON	State PA	Zip Code (Plus 4) 18954	Description of Expenditure GOLF OUTING COSTS			
To Whom Paid CAROLYN COMITTA, FRIENDS OF			MO	DAY	YEAR	\$ 3,000.00
Mailing Address			12	22	2023	
City HARRISBURG	State PA	Zip Code (Plus 4) 17120	Description of Expenditure CONTRIBUTION			
To Whom Paid POST OFFICE			MO	DAY	YEAR	\$ 167.56
Mailing Address 535 WOOD ST			12	18	2023	
City BETHLEHEM	State PA	Zip Code (Plus 4) 18016	Description of Expenditure POSTAGE			
To Whom Paid ANDY'S & PENNEWELL'S			MO	DAY	YEAR	\$ 77.33
Mailing Address 1135 MAIN ST			12	4	2023	
City HELLERTOWN	State PA	Zip Code (Plus 4) 18055	Description of Expenditure SCHLOSSBERG FUNERAL FLOWERS			

To Whom Paid CITY & STATE PA			MO	DAY	YEAR	\$ 4,000.00
Mailing Address POBOX 526			12	4	2023	
City CHALFONT	State PA	Zip Code (Plus 4) 18914	Description of Expenditure ADVERTISEMENT			
To Whom Paid GRANOLA FACTORY			MO	DAY	YEAR	\$ 345.00
Mailing Address 518 LING ST			12	4	2023	
City BETHLEHEM	State PA	Zip Code (Plus 4) 18018	Description of Expenditure HOLIDAY GIFTS			
To Whom Paid BETHLEHEM CATHOLIC HIGH SCHOOL			MO	DAY	YEAR	\$ 150.00
Mailing Address 2133 MADISON AVE			11	27	2023	
City BETHLEHEM	State PA	Zip Code (Plus 4) 18017	Description of Expenditure GIRLS BB BOOSTER			
To Whom Paid PATTY KIM, FRIENDS OF			MO	DAY	YEAR	\$ 5,000.00
Mailing Address 2148 N 2ND ST			11	13	2023	
City HARRISBURG	State PA	Zip Code (Plus 4)	Description of Expenditure CONTRIBUTION			
To Whom Paid HONORARY FIRST DEFENDERS OF ALLENTOWN			MO	DAY	YEAR	\$ 50.00
Mailing Address 7643 CARLTON RD			11	16	2023	
City COOPERSBURG	State PA	Zip Code (Plus 4) 18036	Description of Expenditure DONATION			
To Whom Paid PA SDCC			MO	DAY	YEAR	\$ 5,000.00
Mailing Address 1635 MARKET ST			11	20	2023	
City PHILADELPHIA	State PA	Zip Code (Plus 4)	Description of Expenditure CONTRIBUTION			

To Whom Paid PNC BANK			MO	DAY	YEAR	\$ 108.00
Mailing Address			12	27	2023	
City	State	Zip Code (Plus 4)	Description of Expenditure BANKING FEES			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 21,060.94

