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 9400	0092				port ed B		CANDI	ANDIDATE COMMITTEE V LOBBYIST								
Name of Filing C	ommittee, Candi	late or L	obbyist:		BOS	SCOL	A, LI	SA FRIEN	IDS OF	=							
Street Address:																	
City:	BETHLEHEM							State:	PA			Zip Cod	ie: 18	016-1	294		
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	- 2	2. X	30 DA PRIMA		POST-	3.		AMENDM REPORT		Yes	No	•	/
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- [5.	30 DA		POST-	6.		TERMINA REPORT		N Yes			/
report type)	ANNUAL REPORT	7.	Year 2024					IG METHO				PAPER		DISKETTE			
Name of Office S	ought by Candida	ite:	-		-			DATE O	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Coun	
								МО	DAY	YE	AR	18	STS	DEM	l	48	
SENATOR IN TH	HE GENERAL ASS	EMBLY						11		5	2024		(SEE IN	STRUCTIO	NS FOR C	ODES)	1
•	Receipts and	МО	DAY	YEAR				МО	DAY YEAR FOR OFFICE USE ONL					ONLY			
Expenditures	from:		1 1	20	024	T	0	4		8	2024						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$			445,9	30.33						
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 691.3							591.36										
C. Total Funds Available (Sum Of Lines A and B) \$ 446,621.6						521.69											
D. Total Expenditures (From Schedule III)					\$		20,995.00										
E. Ending Cash	Balance (Subtra	t Line D	From Line C)			\$		4	125,6	26.69]					
F. Value Of In-	Kind Contribution	s Receiv	ed (From Scl	hedul	le II	[)	\$				0.00						
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)	1			\$				0.00						
				AFF	IDA	٩VI	T SE	CTION									
PART I - If this is	a Committee rep	ort, trea	surer sign h	ere. 1	[f thi	is is	a Can	ndidate re	eport, c	andi	date sig	ın here.					
I swear (or affirm) correct and comple	that this report, incete.	luding the	attached sch	edules	filed	d on	paper (or by elect	ronic m	edium	, are to t	he best o	f my knov	wledge a	and belie	ef , tru	ıe
Sworn to and subs	cribed before me thi day of	s	20							S	ignature	of Perso	n Submitt	ing Rep	ort		_
	Signate	ıre					-					Prin	ted Name				_
My Commission Ex	rpires						_					Ema	il				
	МО	D	AY	YR					Are	ea Cod	le	Daytim	e Teleph	one Nu	nber		
Part II- If this is	a report of a can	didate's	authorized C	Comm	itte	e, C	andida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowle	edge and belie	f this	polit	tical	commi	ittee has n	ot viola	ted an	y provisi	ions of th	e act of Ju	une 3,19	937 (P.L	. 1333	3,
Sworn to and subsc	ribed before me this										Si	ignature o	of Candida	ate			-
	day of ————————————————————————————————————						-					Printe	d Name				-
	Signature						-										_
My Commission Exp	ires											Ema	il				
	МО	D	AY	YR			•		Area	Code		Da	aytime To	elephon	e Numb	er	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -						
Name of Filing Committee or Candidate	Reporting	J Period				
BOSCOLA, LISA FRIENDS OF	From: <u>1/1/2024</u> To: <u>4/8</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) \$						
All Other Contributions (Part B)	\$	0.00				
TOTAL for the Reporting) Period	(2)	\$	191.36		
3. Contributions Received Over \$250.00 (From Part C and Part D)						
Contributions Received From Political Committees (Part C)			\$	500.00		
All Other Contributions (Part D)			\$	0.00		
TOTAL for the Reporting) Period	(3)	\$	500.00		
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 an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	691.36		

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	eriod					
BOSCOLA, LISA FRIENDS OF	From:	1/1/2024	To:	<u>4/8/2024</u>				

DATE	AMOUNT

Full Name of Contributing Committee			мо	DAY	VEAD		
Women's Democratic Club of Bangor			МО	DAY	YEAR		
Mailing Address			3	13	2024	\$ 191.36	
City Bangor		State	Zip Code (Plus 4)		15	2024	
		PA	18013				

PAGE TOTAL191.36

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

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)

(EXCID	ue contributions noi	in pontical comm	iiiie	es re	por teu	III Pait	Α)		
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	

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 Per	iod		
BOSCOLA, LISA FRIENDS OF	From:	1/1/2024	То:	<u>4/8/2024</u>

DATE AMOUNT

Full N	Full Name of Contributing Committee			МО	DAY	YEAR	
Penns	Pennsyvania Motor Truck Assn			INO BAT		\$ 500.00	
Mailin	Mailing Address			3	13	2024	
City	Camp Hill	State	Zip Code (Plus 4)	5	15	2024	
		PA	17011				

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

PAGE TOTAL \$ 500.00

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	porting Period					
			Fror	n:		To):		
				D	ATE		AMOUNT		
Full Name of Contributor				мо	DAY	YEAR	\$	0.00	
Mailing Address							7		
City	State	Zip Code (Plu	s 4)						
Employer Name		•		Occupation					
Employer Mailing Address/Principal Pla	ce of Business	City		•	State		Zip Co	ode (Plus 4)	
Enter Grand Total of Part C on Scho	dule I, Detailed S	Summary Page,	, Sectio	on 3.		:	\$	PAGE TOTAL 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 Period						
			From:			To:		
		•		E	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	us 4)					
Receipt Description	•	'			•			
Futor Curred Total of Doub	F an Cabadula I Datailad	I Comment Dama Co		4			ı	PAGE TOTAL
Enter Grand Total of Part	e on Schedule I, Detalled	Summary Page, So	ection	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	I							
BOSCOLA, LISA FRIENDS OF	From:	<u>1/1/2024</u> To:	<u>4/8/2024</u>						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR									
TOTAL for the Reporting Pe	eriod (1)	\$	0.00						
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART 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,		\$	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:				
				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 Dart E	on Schodulo II. In Vi	nd Contributions Dotai	ilad Sum	mary Ba	ao [DACE TOTAL
Enter Grand Total of Part F Section 2.	on Schedule II, In-Ki	na contributions Detai	ileu Sun	шагу Ра	ge,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate			Reporting Period							
				Fro	m:		To:			
						DATE			AMOUN'	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi _l	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE TO	OTAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period					
BOSCOLA, LISA FRIENDS OF	From	1/1/2024	То:	<u>4/8/2024</u>		

					DATE		AMOUNT			
To Who	om Paid			мо	DAY	YEAR				
PA SD	CC									
Mailing Address					16	2024	\$	10,000.00		
City Philadelphia State Zip Code (Plus 4)				Description of Expenditure						
PA 19102					Donation					
To Whom Paid				мо	DAY	YEAR				
Celeste	e Dee			140		ILAK				
Mailing Address					24	2024	\$	5,000.00		
City Bethlehem State Zip Code (Plus 4)				Descrip	Description of Expenditure					
PA 18018					Political/Finance Consulting					
To Who	om Paid			мо	DAY	YEAR				
Celeste	e Dee			MO	DAI	ILAK				
Mailing	g Address			3	27	2024	\$	2,000.00		
City Bethlehem State Zip Code (Plus 4)			Description of Expenditure							
PA 18018					Political/fiannce Consulting					
To Who	om Paid			мо	DAY	YEAR				
				I MO						
Bethle	hem IAFF Local 735					12/11				
	hem IAFF Local 735 g Address			3	11	2024	\$	500.00		
		State	Zip Code (Plus 4)	3		2024	\$	500.00		
Mailing	g Address	State PA	Zip Code (Plus 4) 18018	3 Descript	11	2024 enditure	\$	500.00		
Mailing City	g Address			3 Descript Fundrais	11 tion of Exp	2024 enditure Sponsor	\$	500.00		
Mailing City To Who	g Address Bethlehem			3 Descript	11	2024 enditure	\$	500.00		
Mailing City To Who	g Address Bethlehem om Paid			3 Descript Fundrais	11 tion of Exp	2024 enditure Sponsor	\$	150.00		
Mailing City To Who	g Address Bethlehem om Paid hem NAACP			Descript Fundrais	11 tion of Exp sing Gala S	2024 enditure Eponsor YEAR 2024				
Mailing City To Who Bethlel Mailing	g Address Bethlehem om Paid hem NAACP g Address	PA	18018	Description 3 Description 3 Description 3	tion of Exp sing Gala S	2024 enditure Sponsor YEAR 2024 enditure	\$			
Mailing City To Who Bethlel Mailing City	g Address Bethlehem om Paid hem NAACP g Address	PA State	18018 Zip Code (Plus 4)	Descript Fundrais MO 3 Descript Freedon	tion of Exp sing Gala S DAY 11 tion of Exp	2024 enditure Sponsor YEAR 2024 enditure inquet Ticl	\$			
Mailing City To Who Bethlei Mailing City	g Address Bethlehem om Paid hem NAACP g Address Bethlehem	PA State	18018 Zip Code (Plus 4)	Description 3 Description 3 Description 3	tion of Exp sing Gala S DAY 11	2024 enditure Sponsor YEAR 2024 enditure	\$			
To Who Bethle Mailing City To Who Easton	g Address Bethlehem om Paid hem NAACP g Address Bethlehem om Paid	PA State	18018 Zip Code (Plus 4)	Descript Fundrais MO 3 Descript Freedon	tion of Exp sing Gala S DAY 11 tion of Exp	2024 enditure Sponsor YEAR 2024 enditure inquet Ticl	\$			
To Who Bethle Mailing City To Who Easton	g Address Bethlehem om Paid hem NAACP g Address Bethlehem om Paid n Area Dem Comm	PA State	18018 Zip Code (Plus 4)	Description 3 Description 3 Description Freedon MO 3	tion of Exp sing Gala S DAY 11 tion of Exp m Fund Bai	2024 enditure Sponsor YEAR 2024 enditure inquet Tick YEAR 2024	\$ Kets	150.00		

To Whom Paid	МО	DAY	YEAR					
The Granola Factory					ILAK			
Mailing Address				24	2024	\$	345.00	
City Bethlehem State Zip Code (Plus 4)			Descrip	Description of Expenditure				
	PA	18018	Holiday Gifts					
To Whom Paid			МО	DAY	YEAR			
Committee to Elect Jesse Monoski					ILAK			
Mailing Address				8	2024	\$	1,000.00	
City Lemoyne State Zip Code (Plus 4)				Description of Expenditure				
	PA	17043	Donation					
To Whom Paid			МО	DAY	YEAR			
Committee to Elect Jesse Monoski					ILAK			
Mailing Address				27	2024	\$	1,000.00	
City Lemoyne	State	Zip Code (Plus 4)	Descrip	tion of Exp				
	PA	17043	Donatio	n				
						PAGE TOTAL		
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	20,995.00	