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 :	Report CANDII Filed By:			DATE		СОМ	ITTEE	✓	LOBB	YIST						
Name of Filing C	Committee, Cand	idate or L	obbyist:		BOS	SCOL	A, LI	SA FRIE	NDS OF	=			_			
Street Address: PO BOX 1294																
City:	BETHLEHEM -							State:	PA			Zip Cod	ie: 18	3016-12	294	
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	2ND FRIDAY PRE- PRIMARY					POST-	3.		AMENDM REPORT?		Yes	No	~
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.							POST-	6.		TERMINA REPORT		Yes	No	\
report type)	ANNUAL REPOR	T 7.						IG METHO				PAPER		\checkmark	DISKE	TE
Name of Office S	Sought by Candid	late:	•					DATE 0	F ELE	CTIC	DN	District Number	Office Code	Part	y Code	County Code
								МО	DAY	YI	EAR	18	STS	DEM		48
SENATOR IN THE GENERAL ASSEMBLY								11		5	2024		(SEE IN	STRUCTIO	NS FOR C	ODES)
Summary of Expenditures	Receipts and	МО	DAY	YEAR			_	МО	DAY	Y	EAR	FO	R OFFI	CE USE	ONLY	
			1 1	20	024	T	<u> </u>	4	-	8	2024					
A. Amount Bro	ught Forward Fr	om Last R	eport				\$			445,	930.33					
B. Total Moneta	ary Contribution	s And Rec	eipts (From	Sche	dule	e I)	\$	\$ 691.36								
C. Total Funds	Available (Sum	Of Lines A	and B)				\$			446,	621.69					
D. Total Expend	ditures (From So	hedule II	I)				\$			20,9	995.00					
E. Ending Cash	Balance (Subtra	ct Line D	From Line C)			\$		4	425,6	526.69					
F. Value Of In-	Kind Contributio	ns Receiv	ed (From Scl	hedu	le II	I)	\$				0.00					
G. Unpaid Debt	ts And Obligation	s (From S	Schedule IV)				\$	\$ 0.00								
				AFF	ID/	AVI	ΓSE	CTION								
PART I - If this is		- '	=													
I swear (or affirm) correct and complete		cluding the	e attached sche	edules	file	d on	paper (or by elect	ronic m	edium	ı, are to t	the best o	f my kno	wledge a	nd belie	f , true
Sworn to and subs	cribed before me t day of	nis	20							5	Signature	of Perso	n Submit	ting Repo	ort	
	Signa	ture					- -					Prin	ted Name	e		
My Commission Ex	_	cure										Ema	il			—
	мо	D	AY	YR					Are	ea Co	de	Daytim	e Telepl	none Nun	nber	
Part II- If this is	a report of a ca	ndidate's	authorized C	Comm	nitte	ee, C	andida	ate shall	sign h	ere.						
I swear (or affirm) No 320) as amende		my knowl	edge and belief	f this	polit	itical	commi	ittee has n	ot viola	ted ar	ny provis	ions of the	e act of J	une 3,19	37 (P.L.	1333,
Sworn to and subsc		is									s	ignature o	of Candid	ate		— I
	day of —— ———		_ 20				_					Do:1	d Nac			
	Signatur	<u> </u>					-					Printe	d Name			
My Commission Exp	_	-										Ema	il			
	МО	D	AY	YR			-		Area	Code		Da	aytime T	elephone	Numbe	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
BOSCOLA, LISA FRIENDS OF	From:	1/1/202	<u>4</u> To:	4/8/2024
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)			\$	191.36
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 ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa	d enter am ge, Item B.	ount)	\$	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		
BOSCOLA, LISA FRIENDS OF	From:	1/1/2024	То:	4/8/2024

DATE AMOUNT

Full Name of Contributing Committee Women's Democratic Club of Bangor	МО	DAY	YEAR		
Mailing Address 8541 Delaware Dr				\$ 191.36	
City Bangor	State PA	3	13	2024	

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

PAGE TOTAL \$ 191.36

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 Fining Committee of Candidate					Reporting Period From: To:						
			l		DATE			AMOUNT			
Full Name of Contributor				МО	DAY	YEAR					
Mailing Address							\$	0.00			
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	Reporting Per	Reporting Period					
BOSCOLA, LISA FRIENDS OF	From:	1/1/2024	То:	<u>4/8/2024</u>			

DATE AMOUNT

Full Name of Contributing Committee Pennsyvania Motor Truck Assn	МО	DAY	YEAR	
Mailing Address 910 Linda Lane	_			\$ 500.00
City Camp Hill	3	13	2024	

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				Reporting Period							
				Fror	From:				То:		
					D	ATE		AI	MOUNT		
Full Name of Contributor					мо	DAY	YEAR				
Mailing Address								\$	0.00		
City State Zip Code (Plus 4)											
Employer Name	•				Occupation						
Employer Mailing Address/Principal Pla Business	ice of	Ci	ty			State		Zip Cod	e (Plus 4)		
Enter Grand Total of Part C on Sch	edule I, Detailed S	Summary	Page,	Section	on 3.			P \$	AGE 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		Report	ting Perio	bd			
			From:			To:		
				D	ATE		AM	OUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	•	•		•	•	•	_	
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			PAG	GE TOTAL
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	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 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,		\$	0.00						

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candidat	Name of Filing Committee or Candidate							
	Fi					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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL	
Section 2.	iedule II, III-KII	ia contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL	
						\$	0.00	

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Re	porting	Period				
					Fro	m:		То	:		
					<u> </u>		DATE				AMOUNT
Full Name of Contributor						мо	DAY	YEAR	1		
Mailing Address										\$	0.00
City	State	Zip Code(Plus 4)									
Employer of Contributor	•		•			Occupa	ation				
Employer Mailing Address/Principal P Business	lace of	City		State		Zip 4)	Code(Plus	Desc	ripti	on of C	ontribution
Enter Grand Total of Part G on S	chedule II, I	In-Kind	Contributi	ons De	taile	ed					PAGE TOTAL
Summary Page, Section 3.											0.00

STATEMENT OF EXPENDITURES

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

			DATE				AMOUNT
To Whom Paid PA SDCC			мо	DAY	YEAR		
Mailing Address PO Box 59358			3	16	2024	\$	10,000.00
City Philadelphia	State PA	Zip Code (Plus 4) 19102	Description of Expenditure Donation				
To Whom Paid Celeste Dee			МО	DAY	YEAR		
Mailing Address 406 2nd Ave			1	24	2024	\$	5,000.00
City Bethlehem	State PA	Zip Code (Plus 4) 18018	Description of Expenditure Political/Finance Consulting				
To Whom Paid Celeste Dee			мо	DAY	YEAR		
Mailing Address 406 2nd Ave			3	27	2024	\$	2,000.00
City Bethlehem	State PA	Zip Code (Plus 4) 18018	Description of Expenditure Political/fiannce Consulting				
To Whom Paid Bethlehem IAFF Local 735			МО	DAY	YEAR		
Mailing Address 51 E Lehigh St			3	11	2024	\$	500.00
City Bethlehem	State PA	Zip Code (Plus 4) 18018	Description of Expenditure Fundraising Gala Sponsor				
To Whom Paid Bethlehem NAACP			МО	DAY	YEAR		
Mailing Address PO Box 1474			3	11	2024	\$	150.00
City Bethlehem	State PA	Zip Code (Plus 4) 18016	Description of Expenditure Freedom Fund Banquet Tickets				

To Whom Paid					DAY	VEAD		
Easton Area Dem Comm			МО	DAY	YEAR			
Mailing Address 902 Old Philadelphia Rd			3	11	2024	\$	1,000.00	
City Easton State Zip Code (Plus 4)			Descrir	tion of Exr	enditure			
Laston		PA	18042	Description of Expenditure Annual Sponsorship				
To Whom Paid				мо	DAY	YEAR		
The Granola Factory								
Mailing Address 5					24	2024		
5:	l8 Long St			1	24	2024	\$	345.00
City Bethlehem		State	Zip Code (Plus 4)	Description of Expenditure				
		PA	18018	Holiday				
							ı	
To Whom Paid				мо	DAY	YEAR		
Committee to Elect I	esse Monoski							
Mailing Address 339 Walton St		4	8	2024				
338 Walton St					2024	\$	1,000.00	
City Lemoyne State Zip Code (Plus 4)			Description of Expenditure					
		PA	17043	Donatio	on			
					ı		<u> </u>	
To Whom Paid				мо	DAY	YEAR		
Committee to Elect 3	esse Monoski							
Mailing Address	38 Walton St			2	27	2024	_	1 000 00
	o waiton st						\$	1,000.00
City Lemoyne		State	Zip Code (Plus 4)	Description of Expenditure				
		PA	17043	Donatio	on			
								PAGE TOTAL
Enter Grand Total o	of Expenditures o	n Page 1, Report	Cover Page, Item D					
							\$	20,995.00