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			Rep File			CAN	DII	DATE		COMN	1ITTEE	✓	LOBI	BYIST		
Name of Filing C	ommittee, Candi	date or L	obbyist:		BOS	COI	_A, LI	SA FRI	ΕN	DS OF	-							
Street Address:	1546 BARNE	R COUR	Γ															
City:	BETHLEHEM							State:		PA			Zip Code: 18015					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA' PRIMARY	Y PRE-	- 2	2.	30 DA		P	POST- 3. X		AMENDMENT REPORT?		Yes	✓	Ю		
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDATELECTION	Y PRE	- 5	5.	30 DA		P	OST-	6.		TERMINA REPORT?		Yes	1	lo	\
report type)	ANNUAL REPOR	Г 7.	Year 2007					NG MET CHECK		_			PAPER		\checkmark	DIS	ETTE	
Name of Office S	ought by Candid	ate:	-					DATE	O	F ELE	СТІС	N	District Number	Office Code	Par	ty Coo	e Cou Code	
SENATOR IN TH	HE GENERAL ASS	SEMBLY						МО		DAY		EAR		STS	DEN		48	
		мо	DAY	YEAR				мо	11	DAY	6 v	2007 EAR	EO	(SEE INS				5)
Summary of Expenditures			1 1		007	Т	0	1-10	6	DAI	4	2007		K OFFIC	L USL	ONL		
A. Amount Bro	ught Forward Fro	m Last R	<u> </u>	<u> </u>			\$!		168,	796.81						
B. Total Moneta	ary Contributions	And Rec	ceipts (From	Sche	dule	I)	\$					71.82						
C. Total Funds Available (Sum Of Lines A and B)							\$:	168,	868.63						
D. Total Expenditures (From Schedule III)							\$,	419.05						
E. Ending Cash	Balance (Subtra	ct Line D	From Line	C)			\$			1	68,4	149.58						
F. Value Of In-	Kind Contribution	ıs Receiv	ed (From S	chedul	le II)	\$					0.00						
G. Unpaid Debt	s And Obligation	s (From S	Schedule IV	')			\$				4,	00.00		,				
				AFF	IDA	١VI	T SE	CTIO	N									
PART I - If this is		-	_									_						
I swear (or affirm) correct and comple	that this report, in ete.	cluding the	e attached scl	hedules	filed	l on	paper	or by ele	ectr	onic me	ediun	ı, are to t	he best o	f my knov	/ledge	and be	elief , tr	rue
Sworn to and subs	cribed before me th day of	is	20						•		:	Signature	of Perso	n Submitt	ing Rep	ort		_
	Signat	ure					-		•				Prin	ted Name				
My Commission Ex	rpires						_		-				Emai	il				
	МО	D	AY	YR						Are	ea Co	de	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a car	ıdidate's	authorized	Comm	itte	e, C	andid	ate sha	ıll s	sign he	ere.							
I swear (or affirm) No 320) as amende		my knowl	edge and beli	ef this	politi	ical	comm	ittee has	s no	ot violat	ted a	ny provisi	ions of the	e act of Ju	ine 3,1	937 (F	.L. 133	з,
Sworn to and subsc	ribed before me thi day of	5	20									Si	ignature o	of Candida	te			- $ $
							-						Printe	d Name				-
My Commission Exp	Signature ires	l					-		-				Ema	il				-
		n	AY	YR			-			Area	Code		Da	aytime Te	lephor	ie Nun	nber	-
		_													-			- 1

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	Period		
BOSCOLA, LISA FRIENDS OF	From:	1/1/200	<u>7</u> To:	6/4/2007
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)	\$	71.82
Total Monetary Contributions and Receipts During this Reporting Period (Add and totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page 1			\$	71.82

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							
		F	rom:		То	!				
		•		DATE			AMOUNT			
Full Name of Contributing Com	mittee		МО	DAY	YEAR					
Mailing Address						\$	0.00			
City	State	Zip Code (Plus 4)								

PAGE TOTAL
0.00

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)

(Exclude co		om pontica	Commit	tees re	porteu	iii i dic	~ <i>,</i>	
Name of Filing Committee or Car	ndidate		R	eporting P	eriod			
			F	rom:		To) :	
			'		DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	de (Plus 4)					
								PAGE TOTAL

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

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	ame of Filing Committee or Candidate			Reporting Period						
			From:			То:				
				DA	TE		A	AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR			0.00	
Mailing Address							- \$		0.00	
City	State	Zip Cod	e (Plus 4)							
								PAGE TO	Γ AL	
Enter Grand Total of Part C on Scheo	dule I, Detailed Sun	nmary 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				Repo	orting Pe	riod					
				Fron	From:						
					D	ATE			А	MOUNT	
Full Name of Contributor					МО	DAY	YEAR	R	\$		0.00
Mailing Address											
City	State	Zip	Code (Plus	4)							
Employer Name					Occupa	tion					
Employer Mailing Address/Principal Plac	e of Business		City			State		z	ip Cod	de (Plus 4)	
Enter Grand Total of Part C on Sche	dule I, Detailed Sເ	umm	nary Page,	Section	on 3.			\$	F	PAGE TOTA	L .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 of Candidate		Report	ing Perio					
BOSCOLA, LISA FRIENDS OF			From:		1/1/200	<u>7</u> To:	6/4/2007	
				D.	ATE		АМ	IOUNT
Full Name				мо	DAY	VEAD		25.04
KNBT				МО	DAY	YEAR	\$	35.91
Mailing Address PO BOX 25012				5	1	2007		
City LEHIGH VALLEY	State	Zip Code (Plus 4)		_			
	PA	18002-50:	L					
Receipt Description INTEREST EARNE	ĒD .	•						
Full Name						W=45		
KNBT				МО	DAY	YEAR	\$	35.91
Mailing Address PO BOX 25012				5	31	2007		
City LEHIGH VALLEY	State	Zip Code (Plus 4)] 31	2007		
	PA	18002-50:	L					
Receipt Description INTEREST EARNE	D							

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

PAGE TOTAL
\$ 71.82

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	1	
BOSCOLA, LISA FRIENDS OF	From:	<u>1/1/2007</u> To:	<u>6/4/2007</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER 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 Candidate			Reporting Period					
			From:			To:		
				DATE			AMOUNT	
Full Name of Contributor			МО	DAY	YEAR			
Mailing Address						7 \$		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:	-	-	•	•	•			
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Det			iled Sum	mary Pag	ge,		PAGE TOTA	L
Section 2.						\$		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:		To:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								\$		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 Zij	p Code(Plus 4)	Descr	iptio	n of Contribution	on
Enter Grand Total of Part G on Sch	edule II. In-K	ind	Contributions D	etaile	ed				PAGE TOT	ΓAL
Summary Page, Section 3.					-					0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period				
BOSCOLA, LISA FRIENDS OF	From	1/1/2007	То:	<u>6/4/2007</u>	

				DATE		AMOUNT			
To Whom Paid			МО	DAY	YEAR				
BOROUGH OF CATASAUQUA									
Mailing Address 118 BRIDGE ST.			5	4	2007	\$	25.00		
City CATASUQUA	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	PA	18032	DONATION						
To Whom Paid			мо	DAY	YEAR				
GROVER CLEVELAND			140		ILAK				
Mailing Address 904 MAIN ST.			5	4	2007	\$	20.00		
City BETHLEHEM	State	Zip Code (Plus 4)	Description of Expenditure						
PA 18018			TICKETS						
To Whom Paid			мо	DAY	YEAR				
LAS VEGAS SANDS CORP			МО	DAI	ILAK				
Mailing Address C/O TAGGART AS	SSOC. 23 E 3RD ST		5	7	2007	\$	38.10		
City BETHLEHEM	State	Zip Code (Plus 4)	Description of Expenditure						
PA 18018			LUNCH TICKET						
To Whom Paid			мо	DAY	YEAR				
PA FED. OF DEM. WOMEN			МО	DAI	ILAK				
Mailing Address 1553 MONOCACY STREET			5	24	2007	\$	25.00		
City BETHLEHEM	State	Zip Code (Plus 4)	Description of Expenditure						
	PA 18018			DINNER TICKET					
To Whom Paid			мо	DAY	YEAR				
PEN ARGYL FOOTHBALL PARENTS			MO	DAT	TEAR				
Mailing Address 933 MOUNTAIN AVE			6	4	2007	\$	55.00		
City PEN ARGYL	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	PA	18072	AD						
To Whom Paid			МС	DAY	VEAD				
LV CHRISTIAN HIGH SCHOOL			МО	DAT	YEAR				
Mailing Address 1414 E. CEDAR STREET			6	4	2007	\$	50.00		
City ALLENTOWN	State	Zip Code (Plus 4)	Description of Expenditure						
	PA	18109	DONAT	•					
LW 10103									

To Whom Paid	MO 6 Descrip	DAY 4	YEAR 2007	\$		
Mailing Address 1002 HAMILTON ST. City ALLENTOWN State Zip Code (Plus 4) PA 18101	6				_	
CityALLENTOWNStateZip Code (Plus 4)PA18101		4	2007	٠	_	
PA 18101	Descrip			*	70.00	
		Description of Expenditure				
To Whom Paid	DINNER	TICKETS				
TO WHOM FAID	мо	DAY	YEAR			
LV YOUTH JAZZ ENSEMBLE	MO	DAI	ILAK			
Mailing Address 1631 W. BROAD ST 1ST FL.	6	4	2007	\$	25.00	
City BETHLEHEM State Zip Code (Plus 4)	Description of Expenditure					
PA 18018	DONATION					
To Whom Paid ALEX'S LEMONADE STAND	мо	DAY	YEAR			
Mailing Address 3835 TRENT COURT	6	4	2007	\$	25.00	
City BETHLEHEM State Zip Code (Plus 4)	Description of Expenditure					
PA 18020	DONATION					
To Whom Paid JORDAN ROMAN	МО	DAY	YEAR			
Mailing Address 3205 HARMON LANE	6	4	2007	\$	25.00	
City BETHLEHEM State Zip Code (Plus 4)	Description of Expenditure					
PA 18017	DONATION					
To Whom Paid ELYSIAN FIELDS	мо	DAY	YEAR			
Mailing Address 36 W. BROAD STREET	6	4	2007	\$	60.95	
City BETHLEHEM State Zip Code (Plus 4)	Description of Expenditure					
PA 18018	FLOWER	RS- FUNER	AL			
					PAGE TOTAL	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D			Ì	1		

STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate			Reporting Period					
BOSCOLA, LISA FRIENDS OF			From:	<u>1/1/2007</u> To:			<u>6/4/2007</u>	
					DATE			standing nce of Debt
Name of Creditor STARTERS RIVERPORT				мо	DAY	YEAR		
Mailing Address 17 W 2ND ST				11	7	2006	\$	4,000.00
City BETHLEHEM	State	Zip Code (P	lus 4)	Description of Debt				
	PA	18015	015 ELECTION NIGHT PART				EXPENSES	
								PAGE TOTAL
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							\$	4,000.00