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	092			Rep File			CANDI	DATE		СОММ	4ITTEE	✓	LOBE	YIST		
Name of Filing C	Committee, Candida	ate or Lo	obbyist:		BOS	COL	A, LI	SA FRIE	NDS OF	=							
Street Address:	1546 BARNER	COURT	-														
City:	BETHLEHEM							State:	PA			Zip Cod	ie: 18	3015			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2	2. X	30 DA		POST-	3.		AMENDM REPORT		Yes	No	•	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDATELECTION	y pre	Ē- 5	5.	30 DA		POST-	6.		TERMINA REPORT		Yes	No	`	
report type)	ANNUAL REPORT	7.	Year 2008					NG METHO				PAPER	TTE				
Name of Office S	Sought by Candidat	te:	-					DATE O	F ELE	CTIC	DN	District Number	ty Code	Count Code	у		
	,							МО	DAY	Υ	EAR	Number	STS	DEM	l	48	
SENATOR IN T	HE GENERAL ASSE	MBLY						11		4	2008		(SEE IN	STRUCTIO	ONS FOR C	ODES)	
	Receipts and	МО	DAY	YEAR	2			МО	DAY	Y	EAR	FC	R OFFI	CE USE	ONLY		
Expenditures	from:		1 1	2	800	Т	0	4		7	2008						
A. Amount Bro	ught Forward Fron	n Last R	eport \$ 171,594								594.40						
B. Total Monet	ary Contributions /	And Rec	eipts (From	Sche	dule	I)	\$				0.00						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			171,	594.40						
D. Total Expenditures (From Schedule III) \$ 10,616.3								616.34									
E. Ending Cash Balance (Subtract Line D From Line C) \$										160,9	978.06]					
F. Value Of In-	Kind Contributions	Receive	ed (From S	chedu	le II)	 \$				0.00						
G. Unpaid Debt	ts And Obligations	(From S	chedule IV)			\$				0.00			•			
				AFF	IDA	VI	T SE	CTION									
PART I - If this is	s a Committee rep	ort, trea	surer sign	here.	If thi	is is	a Car	ndidate re	eport, o	candi	date sig	ın here.					
I swear (or affirm) correct and complete) that this report, incl ete.	uding the	attached scl	nedule	s filed	l on	paper	or by elect	ronic m	ediun	ı, are to t	he best o	f my kno	wledge a	and belie	ef , tru	e,
Sworn to and subs	cribed before me this	i	20							;	Signature	of Perso	n Submit	ting Rep	ort		-
			-				-					Prin	ted Name	<u> </u>			-
My Commission Ex	Signatu kpires	re										Ema	il				-
	мо	DA	AY	YR			-		Are	ea Co	de		e Teleph	none Nu	mber		-
Part II- If this is	a report of a cand	lidate's	authorized	Comn	nitte	e, C	andid	ate shall	all sign here.								
I swear (or affirm) No 320) as amende	that to the best of med.	ny knowle	edge and beli	ef this	polit	ical	comm	ittee has n	ot viola	ted aı	ny provisi	ions of th	e act of J	une 3,19	937 (P.L	1333,	
Sworn to and subso	ribed before me this										Si	ignature o	of Candid	ate			-
	day of		_ 20				_										-
	C:						-					Printe	d Name				
My Commission Exp	Signature pires											Ema	il				⁻
	мо	D/	AY	YR	1		-		Area	Code		Da	aytime T	elephon	e Numb	er	

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>8</u> To:	4/7/2008
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)	\$	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			\$	0.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	this Part to itemize onl with an aggregate val								
Name of Filing Comm	nittee or Candidate		Re	porting	Period				
			From: To) :		
		•			DATE			AMOUNT	
Full Name of Contributi	ing Committee			МО	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus	4)						
	•	•		•	•	•	$\overline{}$	PAGE 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 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)	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 Candidate			Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scho	edule 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				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 Candid	ate		Report	ting Perio	od		
			From:			To:	
				D	ATE		AMOUNT
Full Name				МО	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code (Plus 4)				
Receipt Description		·					
Enter Grand Total of Part E on Sch	edule I. Detaile	d Summary Page	Section	4			PAGE TOTAL
The stand rotal of rare E on och	caale 1, betallet	a cammary rage,	5000001	••			\$ 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>1/1/2008</u> To:	<u>4/7/2008</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 Candid	Il Name of Contributor			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 Part F on S	chedule II, In-Kir	nd Contributions Deta	iled Sun	nmary Pag	je,		PAGE TOTAL			
Section 2.						\$	0.00			

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candida	te				Re	porting	Period				
					Fro	m:		То	:		
							DATE				AMOUNT
Full Name of Contributor						мо	DAY	YEAR	1		
Mailing Address										\$	0.00
City	State		Zip Code(F	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

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Ca	ndidate		Reporti	ng Period			
BOSCOLA, LISA FRIENDS OF			From	1/	1/2008	То:	4/7/2008
				DATE			AMOUNT
To Whom Paid NORTHAMPTON CTY COUN. OF	DEM WOM		мо	DAY	YEAR		
Mailing Address 145 E BROA	D ST		3	5	2008	\$	5.00
City BETHLEHEM State Zip Code (Plus 4) PA 18018				otion of Exp	penditure		
To Whom Paid BLUE VALLEY FARM SHOW			мо	DAY	YEAR		
Mailing Address PO BOX 70			3	5	2008	\$	65.00
City BANGOR	State PA	Zip Code (Plus 4) 18103	Descrip AD	otion of Exp			
To Whom Paid RSVP OF MONROE COUNTY		•	мо	DAY	YEAR		
Mailing Address 411 MAIN S	T STE 102B		3	5	2008	\$	50.00
City STROUDSBURG	State PA	Zip Code (Plus 4) 18360	Descri	otion of Exp	penditure		
To Whom Paid UNITED STEEL WORKERS DINN	ER	•	мо	DAY	YEAR		
Mailing Address 53 E LEHIGH ST			3	5	2008	\$	125.00
City BETHLEHEM	City BETHLEHEM PA Zip Code (Plus 4) 18018			otion of Exp	penditure		
To Whom Paid	<u> </u>	<u> </u>		DAY			

City BETHLEHEM	State PA	Zip Code (Plus 4) 18018	Descrip AD	otion of Exp	penditure		
To Whom Paid CLUBMAN'S BANQUET	•		мо	DAY	YEAR		
Mailing Address 325 E UNION BLVD			3	6	2008	\$	25.00
City BETHLEHEM	State PA	Zip Code (Plus 4) 18018	Description of Expenditure AD				
	·						

						FAC	JL 12
To Whom Paid AMERICAN CANCER SOCIETY			мо	DAY	YEAR		
Mailing Address 3893 ADLER PLACE			3	6	2008	\$	50.00
City BETHLEHEM	State PA	Zip Code (Plus 4) 18017	Description of Expenditure DONATION				
To Whom Paid COMMITTEE TO ELECT MIKE STACK			МО	DAY	YEAR		
Mailing Address PO BOX 21114			3	10	2008	\$	5,000.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 1910	1	Description of Expenditure CONTRIBUTION			
To Whom Paid AMERICAN CANCER SOCIETY			МО	DAY	YEAR		
Mailing Address 3893 ADLER PALCE STE 170			3	11	2008	\$	50.00
City BETHLEHEM	State PA	Zip Code (Plus 4) 18017	Description of Expenditure AD				
To Whom Paid WEST END FAIR			МО	DAY	YEAR		
Mailing Address 3019 HAMILTON EAST			3	11	2008	\$	65.00
City STROUDSBURG	State PA	Zip Code (Plus 4) 18360	Description of Expenditure AD				
To Whom Paid DEL. RIVER SHAD ASSOC			МО	DAY	YEAR		
Mailing Address 3907 BOSWELL CT			3	11	2008	\$	5.00
City BETHLEHEM	State PA	Zip Code (Plus 4) 18020	Description of Expenditure RAFFLE TICKETS				
To Whom Paid GEBHARDT'S			мо	DAY	YEAR		
Mailing Address 1010 AIRPORT RD			3	24	2008	<u>.</u>	66.34
1010 AIR	OKT KD					\$	00.34

To Whom Paid DAY PAC			МО	DAY	YEAR		
Mailing Address PO BOX 246			3	27	2008	\$	5,000.00
City BRYN MAWR	State PA	Zip Code (Plus 4) 19010	Description of Expenditure DONATION				
To Whom Paid FRIENDS OF KRIS BUREK			МО	DAY	YEAR		
Mailing Address PO BOX 132			3	27	2008	\$	50.00
City SLATINGTON	State PA	Zip Code (Plus 4) 18080	Description of Expenditure DONATION				
To Whom Paid UNICO			МО	DAY	YEAR		
Mailing Address 1101 N NEW ST			3	27	2008	\$	60.00
City BETHLEHEM	State PA	Zip Code (Plus 4) 18015	Description of Expenditure DINNER TICKETS				
Enter Grand Total of Expend	litures on Page 1, Re	port Cover Page, Item D					PAGE TOTAL
						\$	10,616.34