Campaign Finance Report

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

Filer Identification 9400092 Report Filed By :							СОМ	ITTEE	✓	LOBE	BYIST									
Name of Filing C	Committee, Ca	ndida	te or Lo	obbyist:		BOS	COI	LA, LI	SA FRIEN	IDS OF	=									
Street Address:	1546 BAR	RNER	COURT																	
City:	BETHLEH	EM							State:	PA			Zip Cod	de: 18	3015					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		1.	2ND FRIDA' PRIMARY	Y PRE	- 2	2.	30 DA		POST-	3. X		AMENDMENT REPORT?		Yes	No	•	/		
(place X to the right of	6TH TUESDAY PRE-ELECTION		4.	2ND FRIDA' ELECTION	y pre	- 5	5.	30 DA		POST-	6.		TERMINA REPORT		Yes	No	•	\		
report type)	ANNUAL REP	ORT	7.	Year 2008					NG METHO CHECK O				PAPER		/	DISKE	TTE			
Name of Office S	Sought by Can	didate	e:	-					DATE O	F ELE	CTIC	N	District Number	Office Code	Par	ty Code	Coun			
	,								МО	DAY	YI	EAR	ivanibei	STS	DEM	1	48			
SENATOR IN T	HE GENERAL /	ASSE	MBLY						11		4	2008		(SEE IN	STRUCTIO	ONS FOR C	ODES)			
Summary of		d	МО	DAY	YEAR	1			МО	DAY	YI	EAR	FO	R OFFI	CE USE	ONLY				
Expenditures	irom:			1 1	2	800	Т	0	5	:	12	2008								
A. Amount Bro	ught Forward	From	Last R	eport				\$			160,9	978.06	1							
B. Total Monetary Contributions And Receipts (From Schedule I) \$ 512.97																				
C. Total Funds Available (Sum Of Lines A and B) \$ 161,491.03																				
D. Total Expenditures (From Schedule III) \$ 10,783.47																				
E. Ending Cash	Balance (Sub	tract	Line D	From Line (C)			\$			150,7	707.56								
F. Value Of In-	Kind Contribu	tions	Receive	ed (From S	chedu	le II)	\$				0.00								
G. Unpaid Debt	ts And Obligat	ions (From S	chedule IV)			\$				0.00			•					
					AFF	IDA	VI	T SE	CTION											
PART I - If this is	s a Committee	repo	rt, trea	surer sign l	here. I	[f thi	is is	a Car	ndidate re	port, c	andi	date sig	jn here.							
I swear (or affirm) correct and comple		t, inclu	ding the	attached scl	nedules	filed	l on	paper	or by elect	ronic m	edium	, are to t	the best o	f my kno	wledge a	and belie	ef , tru	ıe,		
Sworn to and subs	cribed before me	e this		20							9	Signature	of Perso	n Submit	ting Rep	ort				
		ınatur						- -					Prin	ted Name	e			_		
My Commission Ex	-	jiiatui	5										Ema	il				-		
	мо		DA	ΛΥ	YR			_		Are	ea Coo	de	Daytim	ie Telepl	none Nu	mber		_		
Part II- If this is	a report of a	candi	date's	authorized	Comn	nitte	e, C	andid	ate shall	sign he	ere.									
I swear (or affirm) No 320) as amende		t of my	y knowle	dge and beli	ef this	polit	ical	comm	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,19	937 (P.L	. 1333	3,		
Sworn to and subso	ribed before me	this										S	ignature o	of Candid	ate			-		
	day of							_										_		
	Signat	ture						-					Printe	ed Name						
My Commission Exp	_	.ui E											Ema	il				-		
)	D#	ΛΥ	YR			-		Area	Code		Da	aytime T	elephon	e Numb	er	-		

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
BOSCOLA, LISA FRIENDS OF	From:	1/1/200	<u>8</u> To:	5/12/2008
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)			\$	500.00
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)	\$	12.97
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			\$	512.97

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	is Part to itemize only ith an aggregate valu						
Name of Filing Commit	tee or Candidate		Reporting	Period			
			From:		То	:	
		•		DATE			AMOUNT
Full Name of Contributing	g Committee		мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
	-	-	_				DAGE 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 Candi	date		Re _l	oorting P m:	eriod	To	o:	
					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	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 of Candidate	or rining committee or candidate					Reporting Period						
BOSCOLA, LISA FRIENDS OF				Fror	n:	<u>1/1/2</u>	<u>008</u> To	:	5/12/2008			
					DA	ATE		АМО	UNT			
Full Name of Contributor DAVID K. WEIKEL					МО	DAY	YEAR					
Mailing 3540 DRIFTWOOD P	LACE							\$	500.00			
City BETHLEHEM	State	Ziı	p Code (Plus	4)	4	10	2008					
	PA	18	3020									
Employer Name COORDINATED HEAL	_TH				Occupat	tion	RESIDE	NT				
Employer Mailing Address/Principal Pla Business	ce of		City		•	State		Zip Code (Plus 4)			
2310 HIGHLAND AVE			BETHLEH	EM		PA		18020				
Enter Grand Total of Part C on Scho	edule I, Detaile	ed Sumn	nary Page,	Section	on 3.			PAG	E TOTAL			
	,		, , ,				4	3	500.00			

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	late		Report	ting Period					
BOSCOLA, LISA FRIENDS OF			From:		1/1/200	<u>8</u> To:	<u>5/12/</u>	<u>/2008</u>	
				D.	ATE		AMOUN	NT	
Full Name KNBT BANK				МО	DAY	YEAR			
Mailing Address 60 E BROAD ST	REET						\$	12.97	
City BETHLEHEM	State PA	Zip Code (18018	Plus 4)	5	11	2008			

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

INTREST EARNED

Receipt Description

PAGE TOTAL12.97

\$

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		
BOSCOLA, LISA FRIENDS OF	From:	<u>1/1/2008</u> To:	<u>5/12/2008</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	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 Candid	Name of Contributor ing Address State Zip Code (Plus 4)				Reporting Period					
			From:			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 S	chedule II In-Kir	nd Contributions Deta	iled Sum	mary Pag	ле Г		PAGE TOTAL			
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	,		PAGE TOTAL			
						\$	0.00			

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Re	porting l	Period			
					Fro	om:		To:		
					•		DATE			AMOUNT
Full Name of Contributor						МО	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(I	Plus 4)						
Employer of Contributor						Occupa	ition		•	
Employer Mailing Address/Principal Plac Business	ce of	City		State		Zip 4)	Code(Plus	Descr	iption	of Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, I	in-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or C	andidate		Reporti	ng Period			
BOSCOLA, LISA FRIENDS OF			From	1/	1/2008	То:	5/12/2008
				DATE			AMOUNT
To Whom Paid CITIZENS FOR SEAN REMALY			мо	DAY	YEAR		
Mailing Address PO BOX 47			4	9	2008	\$	5,000.00
City FREEDOM	State	Zip Code (Plus 4)	Description of Expenditure				
	PA	15042	DONATION				
To Whom Paid FUMO FOR STATE SENATE			МО	DAY	YEAR		
Mailing Address 1208 TASKER STREET				10	2008	\$	5,500.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 19148		Description of Expenditure CONTRIBUTION			
To Whom Paid PHOEBE FLORAL			мо	DAY	YEAR		
Mailing Address HAMILTON	STREET		4	11	2008	\$	55.07
City ALLENTOWN	State PA	Zip Code (Plus 4) 18104	1	otion of Exp			
To Whom Paid PA FED OF DEMO WOMEN	·	·	МО	DAY	YEAR		
Mailing Address 1409 BROO	OK RUN DRIVE		4	11	2008	\$	50.00
City ALTOONA	State PA	Zip Code (Plus 4) 16601	1	otion of Exp	penditure		
To Whom Paid STATE BELT CORVETTE CLUB			МО	DAY	YEAR		
ailing Address PO BOX 283				11	2008	\$	50.00

Zip Code (Plus 4)

18343

Description of Expenditure

DONATION

State

PΑ

City

MT BETHEL

					•			TAGE 12
To Whom Pa	aid			МО	DAY	YEAR		
Mailing Add	ress DEPT	Γ OF TREASURY		5	5	2008	\$	128.40
City OGI	DEN	State	Zip Code (Plus 4)	Description of Expenditure				
UT 84201 TAX DUE ON INTEREST E.							RNED	
				•				PAGE TOTAL
Enter Gran	nd Total of E	Expenditures on Page 1, Rep	port Cover Page, Item D	•			\$	10,783.47