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 | 94000 |)92 | | | Rep File | port | | CANDI | DATE | | СОМ | 4ITTEE | ✓ | LOBE | BYIST | | |
|---|----------------------------|------------|-------------|------------------------|---------|-------------|-------|----------------|-------------|----------|--------|------------|--------------------|----------------|--------------|-----------|-----------|----|
| Name of Filing C | Committee, C | andida | te or Lo | obbyist: | | BOS | COI | A, LI | SA FRIEN | NDS OF | = | | | _ | | | | |
| Street Address: | 1546 BA | ARNER | COURT | - | | | | | | | | | | | | | | |
| City: | BETHLEH | HEM | | | | | | | State: | PA | | | Zip Cod | de: 18 | 3015 | | | |
| TYPE OF REPORT | 6TH TUESDAY PRE-PRIMARY | | 1. | 2ND FRIDA' PRIMARY | Y PRE | - [| 2. | 30 DA PRIMA | | POST- | T- 3. | | AMENDMENT REPORT? | | Yes | No | Y | |
| (place X to the right of | 6TH TUESDAY PRE-ELECTIO | | 4. | 2ND FRIDA' ELECTION | Y PRE | ≣- ! | 5. | 30 DA | | POST- | 6. | | TERMINA REPORT | | Yes | No | ~ | |
| report type) | ANNUAL REI | PORT | 7. X | Year 2009 | | | | | NG METHO | | | | PAPER | | \checkmark | DISKE | TTE | |
| Name of Office S | Sought by Car | ndidate | e: | | | | | | DATE 0 | F ELE | СТІО | N | District Number | Office Code | Par | ty Code | County | , |
| | , | | | | | | | | МО | DAY | YE | AR | Number | STS | DEM | 1 | 48 | |
| SENATOR IN TI | HE GENERAL | ASSE | MBLY | | | | | | 11 | | 3 | 2009 | | (SEE IN | STRUCTIO | ONS FOR C | ODES) | |
| Summary of | | nd | МО | DAY | YEAR | 2 | | | МО | DAY | YE | AR | FO | R OFFI | CE USE | ONLY | | |
| Expenditures | irom: | | | 1 1 | 2 | 009 | T | 0 | 12 | | 31 | 2009 | | | | | | |
| A. Amount Bro | ught Forward | d From | Last R | eport | | | | \$ | | | 172,1 | 153.31 | | | | | | |
| B. Total Monet | ary Contribut | tions A | nd Rec | eipts (From | Sche | dule | : I) | \$ | | | | 34.78 | | | | | | |
| C. Total Funds | Available (Su | um Of | Lines A | and B) | | | | \$ | | | 172,1 | 188.09 | | | | | | |
| D. Total Expend | ditures (Fron | n Sche | dule II | I) | | | | \$ | | | 2,5 | 49.06 | | | | | | |
| E. Ending Cash | Balance (Su | btract | Line D | From Line (| C) | | | \$ | | | 169,6 | 39.03 | | | | | | |
| F. Value Of In- | Kind Contrib | utions | Receive | ed (From S | chedu | le II | :) | \$ | | | | 0.00 | | | | | | |
| G. Unpaid Debt | ts And Obliga | ations (| (From S | Schedule IV |) | | | \$ | | | | 0.00 | | | • | | | |
| | | | | | AFF | IDA | \VI | T SE | CTION | | | | | | | | | |
| PART I - If this is | s a Committe | e repo | rt, trea | surer sign l | nere. I | If thi | is is | a Car | ndidate re | eport, o | andi | date sig | ın here. | | | | | ı |
| I swear (or affirm) correct and comple | | ort, inclu | iding the | attached scl | nedules | s filed | d on | paper | or by elect | ronic m | edium | , are to t | he best o | f my kno | wledge a | and belie | ef , true | ≥, |
| Sworn to and subs | cribed before r day of | me this | | 20 | | | | | | | S | ignature | of Perso | n Submit | ting Rep | ort | | • |
| | | ignatur | | | | | | - - | | | | | Prin | ted Name | e | | | - |
| My Commission Ex | | - J | | | | | | | | | | | Ema | il | | | | • |
| | мо | | D/ | λΥ | YR | | | _ | | Are | ea Cod | le | Daytim | e Telepi | none Nu | mber | | • |
| Part II- If this is | a report of a | a candi | idate's | authorized | Comn | nitte | e, C | andid | ate shall | sign he | ere. | | | | | | | |
| I swear (or affirm) No 320) as amende | | est of m | y knowle | edge and beli | ef this | polit | tical | comm | ittee has n | ot viola | ted an | y provisi | ions of th | e act of J | une 3,19 | 937 (P.L | . 1333, | |
| Sworn to and subsc | ribed before m | ne this | | | | | | | | | | Si | ignature o | of Candid | ate | | | ۱. |
| | day of | | | | | | | - | | | | | | d Name | | | | . |
| | Sign | ature | | | | | | - | | | | | riiite | .u 14a1116 | | | | |
| My Commission Exp | _ | acai C | | | | | | | | | | | Ema | il | | | | |
| | M | 10 | D/ | λΥ | 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 | g Period | | |
| BOSCOLA, LISA FRIENDS OF | From: | 1/1/200 | <u>9</u> To: | 12/31/2009 |
| 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) | \$ | 34.78 |
| | | | 1 | |
| 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 | | | \$ | 34.78 |

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

| | his Part to itemize onl with an aggregate val | - | | | - | | | |
|---------------------------|--|-------------------|-----|---------|--------|------|----|------------|
| Name of Filing Comm | ittee or Candidate | | Re | porting | Period | | | |
| | | | Fre | om: | | То | : | |
| | | 1 | | | DATE | | | AMOUNT |
| Full Name of Contribution | ng Committee | | | МО | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Code (Plus 4) |) | | | | | |
| | • | • | | | • | • | | 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 Candi | date | | Re _l Fro | 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 Candi | date | | Reporting | Period | | | | |
|-----------------------------------|--------------------|---------------|-------------|--------|-----|------|----|------------|
| | | | From: | | | То: | | |
| | | | | DA | TE | | Α | MOUNT |
| Full Name of Contributing Commit | tee | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 0.00 |
| City | State | Zip Cod | e (Plus 4) | | | | | |
| | | | | | | | | PAGE TOTAL |
| Enter Grand Total of Part C on S | Schedule I, Detail | ed Summary 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 Candida | ate | | | Rep | orting Pe | riod | | | |
|---|-----------------|-----------|--------------|------------|-----------|-------|------|----------|------------|
| | | | | Froi | n: | | То | : | |
| | | | | | D | ATE | | AN | MOUNT |
| 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 Business | Place of | | City | | | State | | Zip Code | e (Plus 4) |
| Enter Grand Total of Part C on So | chedule I, Deta | iled Sumr | mary 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 Ca | andidate | | Report | ing Perio | od | | | |
|--------------------------------|------------------------|------------------|---------|-----------|---------|----------------------|----|------------|
| BOSCOLA, LISA FRIENDS OF | | | From: | | 1/1/200 | <u>)9</u> To: | | 12/31/2009 |
| | | | | D | ATE | | | AMOUNT |
| Full Name | | | | мо | DAY | YEAR | | |
| Mailing Address | | | | | | | \$ | 34.78 |
| City | State | Zip Code (| Plus 4) | | | | | |
| Receipt Description | | | | | | | | |
| Enter Grand Total of Part E on | Schedule I. Detailed | d Summary Page | Section | 4 | | | ı | PAGE TOTAL |
| The Stand 1stand Turk E on | . Jenedale 1, Detailet | z cammary r age, | Section | | | | \$ | 34.78 |

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>1/1/2009</u> To: | 12/31/2009 |
| 1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P | ER CONTRIBUTOR | | |
| TOTAL for the Reporting Pe | eriod (1) | \$ | 44.00 |
| 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, | | \$ | 44.00 |

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

| Name of Filing Committee or Candid | ate | | Reporting | g 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 Sum | mary Pag | ge, | | PAGE TOTAL |
| Section 2. | | | | | | \$ | 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 Car | ndidate | | Reporti | ng Period | | | | |
|---|---------------------------|-----------------------------------|----------------------------|---|-----------|----------|------------|--|
| BOSCOLA, LISA FRIENDS OF | | | From | <u>1/</u> | 1/2009 | То: | 12/31/2009 | |
| | | | | DATE | | | AMOUNT | |
| To Whom Paid ARTS QUEST | | | мо | DAY | YEAR | | | |
| Mailing Address 25 W THIRD | ST STE 300 | | 12 | 3 | 2009 | \$ | 203.52 | |
| City BETHLEHEM | State | Zip Code (Plus 4) | Description of Expenditure | | | | | |
| | PA | 18015 | | HOLIDAY TINS | | | | |
| To Whom Paid LEVIN PROMOTION PRODUCTS | | | мо | DAY | YEAR | | | |
| Mailing Address 3301-C HOFFMAN ST | | | 12 | 3 | 2009 | \$ | 598.26 | |
| City HARRISBURG | State Zip Code (Plus 4) | | | | penditure | | | |
| | PA | 17110 | MAGNE | TIC CALE | NDARS | | | |
| To Whom Paid POSTMASTER GENERAL | | | МО | DAY | YEAR | | | |
| Mailing Address LV RETAIL U | NIT | | 12 | 3 | 2009 | \$ | 370.00 | |
| City BETHLEHEM | State PA | Zip Code (Plus 4) 18002 | | Description of Expenditure BULK PERMITS FEE | | | | |
| To Whom Paid TN (ILLEGIBLE) & HALL OF FAM | Ē | | МО | DAY | YEAR | | | |
| Mailing Address 20 FAIRVIEW | / AVENUE | | 12 | 14 | 2009 | \$ | 50.00 | |
| City WIND GAP | State | Zip Code (Plus 4) | Descrip | tion of Ex | penditure | | | |
| | PA | 18091 | AD | | | | | |
| To Whom Paid LWV NORTHAMPTON CTY | | | МО | DAY | YEAR | | | |
| Mailing Address PO BOX 523 | ailing Address PO BOX 523 | | | 14 | 2009 | \$ | 50.00 | |
| | T | 1 | | I | | <u> </u> | | |

Zip Code (Plus 4)

18016

Description of Expenditure

DUES

State

PΑ

City

BETHLEHEM

| | | | | | | P.A | AGE 12 |
|---|--------------------|-----------------------------------|----|---------------------------|------|-----|--------------|
| To Whom Paid MCDEM COMMITTEE | | | мо | DAY | YEAR | | |
| Mailing Address RR #4 BOX 48 | 376A | | 12 | 14 | 2009 | \$ | 100.00 |
| City EAST STROUDSBURG | State PA | Zip Code (Plus 4) 18302 | | otion of Exp | | | |
| To Whom Paid MEGHAN COURSEN | | | МО | DAY | YEAR | | |
| Mailing Address 325 E UNION | BLVD | | 12 | 16 | 2009 | \$ | 52.69 |
| City BETHLEHEM State Zip Code (Plus 4) PA 18018 | | | | otion of Exp | | | ⁄ & SUPPLIES |
| To Whom Paid POSTMASTER GENERAL | | | МО | DAY | YEAR | | |
| Mailing Address LV RETAIL UN | IT | | 12 | 16 | 2009 | \$ | 200.00 |
| City BETHLEHEM | State PA | Zip Code (Plus 4) 18002 | | otion of Exp GE-MAIL C | | | |
| To Whom Paid LISA BOSCOLA | | | МО | DAY | YEAR | | |
| Mailing Address 385 PALMETTA | A DR | | 12 | 16 | 2009 | \$ | 211.99 |
| City EASTON | State PA | Zip Code (Plus 4) 18042 | 1 | otion of Exp ASE FAX/C | | | EMENT |
| To Whom Paid THE MELTING POT | | | МО | DAY | YEAR | | |
| Mailing Address 1 EAST BROAD |) STREET | | 12 | 21 | 2009 | \$ | 712.60 |
| City BETHLEHEM | State PA | Zip Code (Plus 4) 18018 | | otion of Exp | | | |
| Enter Grand Total of Expendite | ires on Page 1 Re | enort Cover Page Item D | | | | | PAGE TOTAL |
| Lines Grand Total of Expendit | ares on raye 1, Re | .po.t cover rage, Item D | • | | | \$ | 2,549.06 |