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	2014c	0300				eport		CAN	IIDI	DATE	√	СО	MMITTEE		LOB	BYIST		
Name of Filing C	Committee, C	andida	te or Lo	obbyist:		BA	AKER,	LISA	BETH	J									
Street Address:																			
City:									State	:				Zip Code	e: 18	627			
TYPE OF REPORT	6TH TUESDA' PRE-PRIMARY		1.	2ND FRI PRIMAR		PRE-	2.	30 DA PRIMA		Р	OST-	3.		AMENDME REPORT?	NT	Yes	١	0	\
(place X to	6TH TUESDA' PRE-ELECTIO		4.	2ND FRI		PRE-	5.	30 DA		Р	POST- 6. TERMINATI REPORT?					Yes	Ν	0	\
the right of report type)	ANNUAL RE	PORT	7. X	Year 20)14				IG ME CHECI			<u> </u>		PAPER		V	DISK	ETTE	
Name of Office S	Sought by Ca	ndidate	e:						DAT	E OI	F ELE	CTIC	ON	District Number	Office Code	Par	ty Cod	e Cour	
CENATOR IN T	IE CENEDAL	ACCE	MDLV						МО		DAY	Y	EAR	20	STS	REF)	40	
SENATOR IN THE GENERAL ASSEMBLY										11		4	2014		(SEE IN	STRUCTI	ONS FO	CODES	5)
Summary of Expenditures		nd	МО	DAY		YEAR			МО		DAY	Y	EAR	FOF	OFFI	E USE	ONLY	7	
			1	1	25	201	.4 T	0		12	:	31	2014						
A. Amount Bro	ught Forward	d From	Last R	eport				\$				1,	327.09						
B. Total Moneta	ary Contribu	tions A	nd Rec	eipts (Fi	rom s	Schedu	ıle I)	\$					32.99						
C. Total Funds	Available (S	um Of I	Lines A	and B)				\$				1,	360.08						
D. Total Expend	ditures (Fror	m Sche	dule III	[)				\$					0.00						
E. Ending Cash	Balance (Su	ıbtract	Line D	From Li	ne C))		\$				1,3	360.08						
F. Value Of In-	Kind Contrib	utions	Receive	ed (Fron	n Sch	nedule	II)	\$					0.00						
G. Unpaid Debt	s And Obliga	ations (From S	chedule	iV)			\$					0.00			'			
						AFFI	OAVI	ΓSE	CTIC	N									
PART I - If this is	s a Committe	e repo	rt, trea	surer si	gn he	ere. If	this is	a Car	ndidat	e re	port, c	candi	idate sig	ın here.					
I swear (or affirm) correct and comple		ort, inclu	ding the	attached	d sche	dules fi	iled on	paper	or by e	lectr	onic m	edium	ı, are to t	he best of	my knov	wledge	and be	lief , tr	rue
Sworn to and subs	cribed before i	me this		20						•			Signature	of Person	Submit	ing Re	oort		_
		Signature		<u> </u>				-						Printe	ed Name				_
My Commission Ex		ngilatur (-							-				Email					
	мо		DA	λY		YR		-		•	Are	ea Co	de	Daytime	Teleph	one Nu	mber		
Part II- If this is	a report of	a candi	date's	authoriz	zed C	ommit	tee, Ca	andid	ate sh	all s	sign he	ere.							
I swear (or affirm) No 320) as amende		est of my	y knowle	dge and	belief	this po	olitical	comm	ittee h	as no	ot viola	ted ar	ny provisi	ions of the	act of J	une 3,1	937 (P	.L. 133	з,
Sworn to and subsc		ne this											Si	ignature of	Candid	ate			-
	day of —			- ²⁰ —				-						Printed	Name				-
	Sign	nature						-		_									_
My Commission Exp	ires													Email					
		мо	DA	AY		YR					Area	Code		Day	time T	elephor	ne Num	ber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
BAKER,ELISABETH J	From:	11/25/201	<u>4</u> То:	12/31/2014
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	J Period	(4)	\$	32.99
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			\$	32.99

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	Name of Filing Committee or Candidate				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.

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 of Candidate			Rep	Reporting Period				
			Fro	m:		To):	
					DATE		АМ	OUNT
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	ne of Filing Committee or Candidate			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 Candidate	ame of Filing Committee or Candidate				Reporting Period						
			Fron	n:		То	То:				
				D	ATE		АМО	DUNT			
Full Name of Contributor				МО	DAY	YEAR					
Mailing Address							\$	0.00			
City	State	Zip Code (Plu	s 4)								
Employer Name				Occupat	tion						
Employer Mailing Address/Principal Plac Business	e of	City			State		Zip Code	(Plus 4)			
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ummary Page,	Section	on 3.			PAC	GE 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				ing Perio	od			
BAKER,ELISABETH J			From:		11/25/201	<u>.4</u> To:	12/31/201	<u>.4</u>
				D	ATE		AMOUNT	
Full Name Baker for Senate Committee				МО	DAY	YEAR		
Mailing Address P O Box 59							\$	32.99
City Lehman	State PA	Zip Code (1 18627	Plus 4)	12	4	2014		
Receipt Description Supplies	•	•						

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

PAGE TOTAL \$ 32.99

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 Per	od	
BAKER,ELISABETH J	From:	11/25/2014 To:	12/31/2014
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTO	R	
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	ame of Filing Committee or Candidate						
	Fr					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	ame of Filing Committee or Candidate				Reporting	Period				
					From:		То:	То:		
						DAT	E			AMOUNT
Full Name of Contributor					мо	DAY	,	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(Plus	4)						
Employer of Contributor					Оссир	ation				
Employer Mailing Address/Principal Plad Business	ce of	City	Sta	ite	Zi 4)	p Code(Pl)	us	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, I	n-Kind	Contributions	Deta	ailed					PAGE TOTAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or C	ame of Filing Committee or Candidate					Reporting Period					
	From			То:							
				DATE			AMOUNT				
To Whom Paid	мо	DAY	YEAR								
Mailing Address						\$	0.00				
City	State	Zip Code (Plus 4)	Descri	ption of Ex	penditure						
							PAGE TOTAL				
Enter Grand Total of Expen	nter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.					\$	0.00				