

# Campaign Finance Report

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

|                                                                              |                          |                   |                         |                             |                      |                                               |                     |                              |                                        |            |             |
|------------------------------------------------------------------------------|--------------------------|-------------------|-------------------------|-----------------------------|----------------------|-----------------------------------------------|---------------------|------------------------------|----------------------------------------|------------|-------------|
| Filer Identification Number : 2005279                                        |                          | Report Filed By : |                         | CANDIDATE                   |                      | COMMITTEE <input checked="" type="checkbox"/> |                     | LOBBYIST                     |                                        |            |             |
| Name of Filing Committee, Candidate or Lobbyist: BAKER, ELISABETH FOR SENATE |                          |                   |                         |                             |                      |                                               |                     |                              |                                        |            |             |
| Street Address: 1041 MOUNTAIN VIEW DR,PO BOX 59                              |                          |                   |                         |                             |                      |                                               |                     |                              |                                        |            |             |
| City: LEHMAN                                                                 |                          |                   |                         | State: PA                   |                      | Zip Code: 18627-0059                          |                     |                              |                                        |            |             |
| TYPE OF REPORT<br><br>(place X to the right of report type)                  | 6TH TUESDAY PRE-PRIMARY  | 1.                | 2ND FRIDAY PRE-PRIMARY  | 2.                          | 30 DAY POST-PRIMARY  | 3.                                            | AMENDMENT REPORT?   | Yes                          | No <input checked="" type="checkbox"/> |            |             |
|                                                                              | 6TH TUESDAY PRE-ELECTION | 4.                | 2ND FRIDAY PRE-ELECTION | 5.X                         | 30 DAY POST-ELECTION | 6.                                            | TERMINATION REPORT? | Yes                          | No <input checked="" type="checkbox"/> |            |             |
|                                                                              | ANNUAL REPORT            | 7.                | Year 2016               | FILING METHOD ( ) CHECK ONE |                      | PAPER <input checked="" type="checkbox"/>     |                     | DISKETTE                     |                                        |            |             |
| Name of Office Sought by Candidate:                                          |                          |                   |                         |                             | DATE OF ELECTION     |                                               |                     | District Number              | Office Code                            | Party Code | County Code |
|                                                                              |                          |                   |                         |                             | MO                   | DAY                                           | YEAR                |                              |                                        |            |             |
|                                                                              |                          |                   |                         |                             | 11                   | 8                                             | 2016                | (SEE INSTRUCTIONS FOR CODES) |                                        |            |             |
| Summary of Receipts and Expenditures from:                                   |                          | MO                | DAY                     | YEAR                        | TO                   | MO                                            | DAY                 | YEAR                         | FOR OFFICE USE ONLY                    |            |             |
|                                                                              |                          | 9                 | 20                      | 2016                        |                      | 10                                            | 24                  | 2016                         |                                        |            |             |
| A. Amount Brought Forward From Last Report                                   |                          |                   |                         |                             | \$ 80,131.01         |                                               |                     |                              |                                        |            |             |
| B. Total Monetary Contributions And Receipts (From Schedule I)               |                          |                   |                         |                             | \$ 2,250.00          |                                               |                     |                              |                                        |            |             |
| C. Total Funds Available (Sum Of Lines A and B)                              |                          |                   |                         |                             | \$ 82,381.01         |                                               |                     |                              |                                        |            |             |
| D. Total Expenditures (From Schedule III)                                    |                          |                   |                         |                             | \$ 11,213.36         |                                               |                     |                              |                                        |            |             |
| E. Ending Cash Balance (Subtract Line D From Line C)                         |                          |                   |                         |                             | \$ 71,167.65         |                                               |                     |                              |                                        |            |             |
| F. Value Of In-Kind Contributions Received (From Schedule II)                |                          |                   |                         |                             | \$ 0.00              |                                               |                     |                              |                                        |            |             |
| G. Unpaid Debts And Obligations (From Schedule IV)                           |                          |                   |                         |                             | \$ 0.00              |                                               |                     |                              |                                        |            |             |

## AFFIDAVIT SECTION

**PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.**

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.**

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3,1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
**Detailed Summary Page**

|                                              |                                              |
|----------------------------------------------|----------------------------------------------|
| <b>Name of Filing Committee or Candidate</b> | <b>Reporting Period</b>                      |
| BAKER, ELISABETH FOR SENATE                  | From: <u>9/20/2016</u> To: <u>10/24/2016</u> |

|                                                                                |         |
|--------------------------------------------------------------------------------|---------|
| <b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b> |         |
| <b>TOTAL for the Reporting Period (1)</b>                                      | \$ 0.00 |

|                                                                                  |           |
|----------------------------------------------------------------------------------|-----------|
| <b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b> |           |
| <b>Contributions Received From Political Committees (Part A)</b>                 | \$ 250.00 |
| <b>All Other Contributions (Part B)</b>                                          | \$ 0.00   |
| <b>TOTAL for the Reporting Period (2)</b>                                        | \$ 250.00 |

|                                                                         |             |
|-------------------------------------------------------------------------|-------------|
| <b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b> |             |
| <b>Contributions Received From Political Committees (Part C)</b>        | \$ 2,000.00 |
| <b>All Other Contributions (Part D)</b>                                 | \$ 0.00     |
| <b>TOTAL for the Reporting Period (3)</b>                               | \$ 2,000.00 |

|                                                                                          |         |
|------------------------------------------------------------------------------------------|---------|
| <b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b> |         |
| <b>TOTAL for the Reporting Period (4)</b>                                                | \$ 0.00 |

|                                                                                                                                                                                                 |             |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|
| <b>Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)</b> | \$ 2,250.00 |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------|

**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.**

|                                                                                                                                                                                |                                                                                           |             |               |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|-------------|---------------|
| <b>Name of Filing Committee or Candidate</b><br><br>BAKER, ELISABETH FOR SENATE                                                                                                | <b>Reporting Period</b><br><br><b>From:</b> <u>9/20/2016</u> <b>To:</b> <u>10/24/2016</u> |             |               |
| <table style="width: 100%; border: none;"> <tr> <td style="width: 60%; border: none;"><b>DATE</b></td> <td style="width: 40%; border: none;"><b>AMOUNT</b></td> </tr> </table> |                                                                                           | <b>DATE</b> | <b>AMOUNT</b> |
| <b>DATE</b>                                                                                                                                                                    | <b>AMOUNT</b>                                                                             |             |               |

|                                                                 |                        |                                           |           |            |             |           |
|-----------------------------------------------------------------|------------------------|-------------------------------------------|-----------|------------|-------------|-----------|
| <b>Full Name of Contributing Committee</b><br>WINDSTREAM PA PAC |                        |                                           | <b>MO</b> | <b>DAY</b> | <b>YEAR</b> | \$ 250.00 |
| <b>Mailing Address</b> 4792 OLD WILLIAM PENN HWY                |                        |                                           | 10        | 10         | 2016        |           |
| <b>City</b> EXPORT                                              | <b>State</b><br><br>PA | <b>Zip Code (Plus 4)</b><br><br>156320000 |           |            |             |           |

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

|                   |
|-------------------|
| <b>PAGE TOTAL</b> |
| \$ 250.00         |

PART B

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 |  |       |  |                   | MO   | DAY | YEAR | \$0.00 |  |
| Mailing Address          |  |       |  |                   |      |     |      |        |  |
| 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.**

|                                                                             |                                                                         |
|-----------------------------------------------------------------------------|-------------------------------------------------------------------------|
| <b>Name of Filing Committee or Candidate</b><br>BAKER, ELISABETH FOR SENATE | <b>Reporting Period</b><br>From: <u>9/20/2016</u> To: <u>10/24/2016</u> |
|-----------------------------------------------------------------------------|-------------------------------------------------------------------------|

|                                                                       |          |                              |  | DATE |     |      | AMOUNT    |  |
|-----------------------------------------------------------------------|----------|------------------------------|--|------|-----|------|-----------|--|
| Full Name of Contributing Committee<br>FIRSTENERGY PAC                |          |                              |  | MO   | DAY | YEAR | \$ 500.00 |  |
| Mailing Address 76 S MAIN ST                                          |          |                              |  | 9    | 26  | 2016 |           |  |
| City AKRON                                                            | State OH | Zip Code (Plus 4) 443080000  |  |      |     |      |           |  |
| Full Name of Contributing Committee<br>CITIZENS FOR A GROWING ECONOMY |          |                              |  | MO   | DAY | YEAR | \$ 500.00 |  |
| Mailing Address 116 PINE ST, 5TH FL                                   |          |                              |  | 9    | 26  | 2016 |           |  |
| City HARRISBURG                                                       | State PA | Zip Code (Plus 4) 17101-0000 |  |      |     |      |           |  |
| Full Name of Contributing Committee<br>PFIZER PAC                     |          |                              |  | MO   | DAY | YEAR | \$ 500.00 |  |
| Mailing Address 235 E 42ND ST                                         |          |                              |  | 9    | 26  | 2016 |           |  |
| City NEW YORK                                                         | State NY | Zip Code (Plus 4) 100170000  |  |      |     |      |           |  |
| Full Name of Contributing Committee<br>INTERMOUNTAIN PAC              |          |                              |  | MO   | DAY | YEAR | \$ 500.00 |  |
| Mailing Address 610 WYOMING AVE                                       |          |                              |  | 10   | 10  | 2016 |           |  |
| City KINGSTON                                                         | State PA | Zip Code (Plus 4) 187040000  |  |      |     |      |           |  |

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

|                   |
|-------------------|
| <b>PAGE TOTAL</b> |
| \$ 2,000.00       |

**PART D**  
**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 | Reporting Period                             |
|                                       | From: <span style="float: right;">To:</span> |

|                                                      |       |                   |      | DATE       | AMOUNT            |      |         |
|------------------------------------------------------|-------|-------------------|------|------------|-------------------|------|---------|
| Full Name of Contributor                             |       |                   |      | MO         | DAY               | YEAR | \$ 0.00 |
| Mailing Address                                      |       |                   |      |            |                   |      |         |
| City                                                 | State | Zip Code (Plus 4) |      |            |                   |      |         |
| Employer Name                                        |       |                   |      | Occupation |                   |      |         |
| Employer Mailing Address/Principal Place of Business |       |                   | City | State      | Zip Code (Plus 4) |      |         |

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

|                   |
|-------------------|
| <b>PAGE TOTAL</b> |
| \$ 0.00           |

## PART E 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 | Reporting Period                                                                                        |
|                                       | <div style="display: flex; justify-content: space-between;"> <span>From:</span> <span>To:</span> </div> |

|                     |       |                   | DATE |     |      | AMOUNT  |
|---------------------|-------|-------------------|------|-----|------|---------|
| Full Name           |       |                   | MO   | DAY | YEAR | \$ 0.00 |
| Mailing Address     |       |                   |      |     |      |         |
| City                | State | Zip Code (Plus 4) |      |     |      |         |
| Receipt Description |       |                   |      |     |      |         |

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

|                   |
|-------------------|
| <b>PAGE TOTAL</b> |
| \$ 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**

|                                                                                                                                                                          |  |                                              |         |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------|---------|
| <b>Name of Filing Committee or Candidate</b>                                                                                                                             |  | <b>Reporting Period</b>                      |         |
| BAKER, ELISABETH FOR SENATE                                                                                                                                              |  | From: <u>9/20/2016</u> To: <u>10/24/2016</u> |         |
| <b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>                                                                           |  |                                              |         |
| TOTAL for the Reporting Period                                                                                                                                           |  | (1)                                          | \$ 0.00 |
| <b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>                                                                                    |  |                                              |         |
| TOTAL for the Reporting Period                                                                                                                                           |  | (2)                                          | \$ 0.00 |
| <b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>                                                                                              |  |                                              |         |
| TOTAL for the Reporting Period                                                                                                                                           |  | (3)                                          | \$ 0.00 |
| TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.) |  |                                              | \$ 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<br><br>From: <span style="float: right;">To:</span> |
|---------------------------------------|----------------------------------------------------------------------|

|                                                                                                     |       |                   | DATE |     |      | AMOUNT                           |
|-----------------------------------------------------------------------------------------------------|-------|-------------------|------|-----|------|----------------------------------|
| Full Name of Contributor                                                                            |       |                   | MO   | DAY | YEAR | \$ 0.00                          |
| Mailing Address                                                                                     |       |                   |      |     |      |                                  |
| City                                                                                                | State | Zip Code (Plus 4) |      |     |      |                                  |
| Description of Contribution:                                                                        |       |                   |      |     |      |                                  |
| Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2. |       |                   |      |     |      | <b>PAGE TOTAL</b><br><br>\$ 0.00 |

**SCHEDULE II**  
**PART G**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OVER \$250.00**

|                                       |                  |
|---------------------------------------|------------------|
| Name of Filing Committee or Candidate | Reporting Period |
|                                       | From: To:        |

|                                                                                                     |       |                  |       | DATE             |     | AMOUNT                      |         |
|-----------------------------------------------------------------------------------------------------|-------|------------------|-------|------------------|-----|-----------------------------|---------|
| Full Name of Contributor                                                                            |       |                  |       | MO               | DAY | YEAR                        | \$ 0.00 |
| Mailing Address                                                                                     |       |                  |       |                  |     |                             |         |
| City                                                                                                | State | Zip Code(Plus 4) |       |                  |     |                             |         |
| Employer of Contributor                                                                             |       |                  |       | Occupation       |     |                             |         |
| Employer Mailing Address/Principal Place of Business                                                |       | City             | State | Zip Code(Plus 4) |     | Description of Contribution |         |
| Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3. |       |                  |       |                  |     | PAGE TOTAL<br>0.00          |         |

# SCHEDULE III STATEMENT OF EXPENDITURES

|                                              |                                             |
|----------------------------------------------|---------------------------------------------|
| <b>Name of Filing Committee or Candidate</b> | <b>Reporting Period</b>                     |
| BAKER, ELISABETH FOR SENATE                  | From <u>9/20/2016</u> To: <u>10/24/2016</u> |

| DATE                                                  |                 |                                |                                                 | AMOUNT    |
|-------------------------------------------------------|-----------------|--------------------------------|-------------------------------------------------|-----------|
| <b>To Whom Paid</b>                                   | <b>MO</b>       | <b>DAY</b>                     | <b>YEAR</b>                                     |           |
| The Chamber of the Northern Poconos                   |                 |                                |                                                 |           |
| <b>Mailing Address</b> 32 Commercial St               | 9               | 29                             | 2016                                            | \$ 100.00 |
| <b>City</b> Honesdale                                 | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 18431 | <b>Description of Expenditure</b> Advertisement |           |
| <b>To Whom Paid</b>                                   | <b>MO</b>       | <b>DAY</b>                     | <b>YEAR</b>                                     |           |
| 1st Lt. Michael J. Cleary Memorial Fund               |                 |                                |                                                 |           |
| <b>Mailing Address</b> 140 Main St., 2nd Floor        | 9               | 29                             | 2016                                            | \$ 100.00 |
| <b>City</b> Luzerne                                   | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 18709 | <b>Description of Expenditure</b> Advertisement |           |
| <b>To Whom Paid</b>                                   | <b>MO</b>       | <b>DAY</b>                     | <b>YEAR</b>                                     |           |
| Luzerne County Fair                                   |                 |                                |                                                 |           |
| <b>Mailing Address</b> Halloween PO Box 393           | 9               | 29                             | 2016                                            | \$ 50.00  |
| <b>City</b> Dallas                                    | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 18612 | <b>Description of Expenditure</b> Donation      |           |
| <b>To Whom Paid</b>                                   | <b>MO</b>       | <b>DAY</b>                     | <b>YEAR</b>                                     |           |
| Heather Kukosky                                       |                 |                                |                                                 |           |
| <b>Mailing Address</b> 1069 Mtn. View Drive           | 9               | 29                             | 2016                                            | \$ 53.80  |
| <b>City</b> Dallas                                    | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 18612 | <b>Description of Expenditure</b> Postage       |           |
| <b>To Whom Paid</b>                                   | <b>MO</b>       | <b>DAY</b>                     | <b>YEAR</b>                                     |           |
| Susquehanna County Recreation Center                  |                 |                                |                                                 |           |
| <b>Mailing Address</b> c/o Ashley Kilmer, 13763 SR 92 | 9               | 29                             | 2016                                            | \$ 250.00 |
| <b>City</b> South Gibson                              | <b>State</b> PA | <b>Zip Code (Plus 4)</b> 18842 | <b>Description of Expenditure</b> Sponsorship   |           |

|                                                           |          |                         |                                                  |     |      |           |
|-----------------------------------------------------------|----------|-------------------------|--------------------------------------------------|-----|------|-----------|
| To Whom Paid<br>WCHS                                      |          |                         | MO                                               | DAY | YEAR | \$ 40.00  |
| Mailing Address PO Box 309                                |          |                         | 9                                                | 29  | 2016 |           |
| City Tunkhannock                                          | State PA | Zip Code (Plus 4) 18657 | Description of Expenditure<br>Membership         |     |      |           |
| To Whom Paid<br>Verizon Wireless                          |          |                         | MO                                               | DAY | YEAR | \$ 174.06 |
| Mailing Address PO Box 4003                               |          |                         | 9                                                | 29  | 2016 |           |
| City Acworth                                              | State GA | Zip Code (Plus 4) 30101 | Description of Expenditure<br>Cell Phone Service |     |      |           |
| To Whom Paid<br>WCCRW                                     |          |                         | MO                                               | DAY | YEAR | \$ 60.00  |
| Mailing Address c/o Judy O'Connell, 51 O'Connell Drive    |          |                         | 9                                                | 29  | 2016 |           |
| City Honesdale                                            | State PA | Zip Code (Plus 4) 18431 | Description of Expenditure<br>Event Tickets      |     |      |           |
| To Whom Paid<br>Wayne County Community Foundation         |          |                         | MO                                               | DAY | YEAR | \$ 100.00 |
| Mailing Address 214 Ninth St.                             |          |                         | 9                                                | 29  | 2016 |           |
| City Honesdale                                            | State PA | Zip Code (Plus 4) 18431 | Description of Expenditure<br>Advertisement      |     |      |           |
| To Whom Paid<br>MCL #909                                  |          |                         | MO                                               | DAY | YEAR | \$ 50.00  |
| Mailing Address c/o Barbara Pastoriza, 3339 Hemlock Farms |          |                         | 10                                               | 5   | 2016 |           |
| City Lords Valley                                         | State PA | Zip Code (Plus 4) 18428 | Description of Expenditure<br>Advertisement      |     |      |           |
| To Whom Paid<br>Wyoming County Republican Committee       |          |                         | MO                                               | DAY | YEAR | \$ 40.00  |
| Mailing Address c/o Patti Mead, 32 Maple Ave              |          |                         | 10                                               | 5   | 2016 |           |
| City Tunkhannock                                          | State PA | Zip Code (Plus 4) 18657 | Description of Expenditure<br>Event Tickets      |     |      |           |

|                                                          |                    |                                   |                                               |            |             |           |
|----------------------------------------------------------|--------------------|-----------------------------------|-----------------------------------------------|------------|-------------|-----------|
| <b>To Whom Paid</b><br>Wayne Memorial Hospital Auxiliary |                    |                                   | <b>MO</b>                                     | <b>DAY</b> | <b>YEAR</b> | \$ 100.00 |
| <b>Mailing Address</b> c/o Carol Sturm, 12 Summit Circle |                    |                                   | 10                                            | 5          | 2016        |           |
| <b>City</b> Lakeville                                    | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18438 | <b>Description of Expenditure</b><br>Donation |            |             |           |

|                                        |                    |                                   |                                               |            |             |           |
|----------------------------------------|--------------------|-----------------------------------|-----------------------------------------------|------------|-------------|-----------|
| <b>To Whom Paid</b><br>Jennifer Wilson |                    |                                   | <b>MO</b>                                     | <b>DAY</b> | <b>YEAR</b> | \$ 141.25 |
| <b>Mailing Address</b> 1456 Chase Rd   |                    |                                   | 9                                             | 29         | 2016        |           |
| <b>City</b> Shavertown                 | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18708 | <b>Description of Expenditure</b><br>Supplies |            |             |           |

|                                        |                    |                                   |                                                                    |            |             |           |
|----------------------------------------|--------------------|-----------------------------------|--------------------------------------------------------------------|------------|-------------|-----------|
| <b>To Whom Paid</b><br>Jennifer Wilson |                    |                                   | <b>MO</b>                                                          | <b>DAY</b> | <b>YEAR</b> | \$ 319.29 |
| <b>Mailing Address</b> 1456 Chase Rd   |                    |                                   | 9                                                                  | 29         | 2016        |           |
| <b>City</b> Shavertown                 | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18708 | <b>Description of Expenditure</b><br>cell phone service / meetings |            |             |           |

|                                                      |                    |                                   |                                                    |            |             |           |
|------------------------------------------------------|--------------------|-----------------------------------|----------------------------------------------------|------------|-------------|-----------|
| <b>To Whom Paid</b><br>Victim's Intervention Program |                    |                                   | <b>MO</b>                                          | <b>DAY</b> | <b>YEAR</b> | \$ 125.00 |
| <b>Mailing Address</b> PO Box 986                    |                    |                                   | 10                                                 | 5          | 2016        |           |
| <b>City</b> Honesdale                                | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18431 | <b>Description of Expenditure</b><br>Advertisement |            |             |           |

|                                                       |                    |                                   |                                                                |            |             |           |
|-------------------------------------------------------|--------------------|-----------------------------------|----------------------------------------------------------------|------------|-------------|-----------|
| <b>To Whom Paid</b><br>Elisabeth J. Baker             |                    |                                   | <b>MO</b>                                                      | <b>DAY</b> | <b>YEAR</b> | \$ 125.10 |
| <b>Mailing Address</b> PO Box 59, 1041 Mtn View Drive |                    |                                   | 10                                                             | 5          | 2016        |           |
| <b>City</b> Lehman                                    | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18627 | <b>Description of Expenditure</b><br>Event Expenses / Supplies |            |             |           |

|                                                           |                    |                                   |                                               |            |             |          |
|-----------------------------------------------------------|--------------------|-----------------------------------|-----------------------------------------------|------------|-------------|----------|
| <b>To Whom Paid</b><br>Dallas Kiwanis Club                |                    |                                   | <b>MO</b>                                     | <b>DAY</b> | <b>YEAR</b> | \$ 50.00 |
| <b>Mailing Address</b> c/o American Asphalt, 500 Chase Rd |                    |                                   | 10                                            | 5          | 2016        |          |
| <b>City</b> Shavertown                                    | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18708 | <b>Description of Expenditure</b><br>Donation |            |             |          |

|                                                       |                    |                                   |                                                    |            |             |             |
|-------------------------------------------------------|--------------------|-----------------------------------|----------------------------------------------------|------------|-------------|-------------|
| <b>To Whom Paid</b><br>Green Gables                   |                    |                                   | <b>MO</b>                                          | <b>DAY</b> | <b>YEAR</b> | \$ 1,000.00 |
| <b>Mailing Address</b> c/o Donna Cosmello, PO Box 697 |                    |                                   | 10                                                 | 14         | 2016        |             |
| <b>City</b> New Milford                               | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18834 | <b>Description of Expenditure</b><br>Event Expense |            |             |             |

|                                                            |                    |                                   |                                                    |            |             |          |
|------------------------------------------------------------|--------------------|-----------------------------------|----------------------------------------------------|------------|-------------|----------|
| <b>To Whom Paid</b><br>The Chamber of The Northern Poconos |                    |                                   | <b>MO</b>                                          | <b>DAY</b> | <b>YEAR</b> | \$ 65.00 |
| <b>Mailing Address</b> 32 Commercial St                    |                    |                                   | 10                                                 | 11         | 2016        |          |
| <b>City</b> Honesdale                                      | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18431 | <b>Description of Expenditure</b><br>Event Tickets |            |             |          |

|                                               |                    |                                   |                                                  |            |             |          |
|-----------------------------------------------|--------------------|-----------------------------------|--------------------------------------------------|------------|-------------|----------|
| <b>To Whom Paid</b><br>Grace Episcopal Church |                    |                                   | <b>MO</b>                                        | <b>DAY</b> | <b>YEAR</b> | \$ 50.00 |
| <b>Mailing Address</b> 30 Butler Street       |                    |                                   | 10                                               | 14         | 2016        |          |
| <b>City</b> Kingston                          | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18704 | <b>Description of Expenditure</b><br>Sponsorship |            |             |          |

|                                        |                    |                                   |                                               |            |             |           |
|----------------------------------------|--------------------|-----------------------------------|-----------------------------------------------|------------|-------------|-----------|
| <b>To Whom Paid</b><br>Jennifer Wilson |                    |                                   | <b>MO</b>                                     | <b>DAY</b> | <b>YEAR</b> | \$ 372.26 |
| <b>Mailing Address</b> 1456 Chase Rd   |                    |                                   | 10                                            | 14         | 2016        |           |
| <b>City</b> Shavertown                 | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18708 | <b>Description of Expenditure</b><br>Supplies |            |             |           |

|                                                                 |                    |                                   |                                                   |            |             |          |
|-----------------------------------------------------------------|--------------------|-----------------------------------|---------------------------------------------------|------------|-------------|----------|
| <b>To Whom Paid</b><br>Susquehanna County Republicans Committee |                    |                                   | <b>MO</b>                                         | <b>DAY</b> | <b>YEAR</b> | \$ 20.00 |
| <b>Mailing Address</b> c/o Susan Gagnon, 2357 Creek Rd.         |                    |                                   | 10                                                | 14         | 2016        |          |
| <b>City</b> Susquehanna                                         | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18847 | <b>Description of Expenditure</b><br>Event Ticket |            |             |          |

|                                                            |                    |                                   |                                                    |            |             |           |
|------------------------------------------------------------|--------------------|-----------------------------------|----------------------------------------------------|------------|-------------|-----------|
| <b>To Whom Paid</b><br>Wyoming County Republican Committee |                    |                                   | <b>MO</b>                                          | <b>DAY</b> | <b>YEAR</b> | \$ 100.00 |
| <b>Mailing Address</b> c/o Thomas Henry, 22 Jayne Rd       |                    |                                   | 10                                                 | 14         | 2016        |           |
| <b>City</b> Tunkhannock                                    | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18657 | <b>Description of Expenditure</b><br>Advertisement |            |             |           |

|                                                   |                    |                                   |                                               |            |             |          |
|---------------------------------------------------|--------------------|-----------------------------------|-----------------------------------------------|------------|-------------|----------|
| <b>To Whom Paid</b><br>PA Breast Cancer Coalition |                    |                                   | <b>MO</b>                                     | <b>DAY</b> | <b>YEAR</b> | \$ 25.00 |
| <b>Mailing Address</b> 2397 Quentin Rd., Ste B    |                    |                                   | 10                                            | 14         | 2016        |          |
| <b>City</b> Lebanon                               | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>17042 | <b>Description of Expenditure</b><br>Donation |            |             |          |

|                                               |                    |                                   |                                               |            |             |             |
|-----------------------------------------------|--------------------|-----------------------------------|-----------------------------------------------|------------|-------------|-------------|
| <b>To Whom Paid</b><br>Jack London for Senate |                    |                                   | <b>MO</b>                                     | <b>DAY</b> | <b>YEAR</b> | \$ 1,000.00 |
| <b>Mailing Address</b> 15 South High St       |                    |                                   | 10                                            | 14         | 2016        |             |
| <b>City</b> West Chester                      | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>19382 | <b>Description of Expenditure</b><br>Donation |            |             |             |

|                                               |                    |                                   |                                                    |            |             |           |
|-----------------------------------------------|--------------------|-----------------------------------|----------------------------------------------------|------------|-------------|-----------|
| <b>To Whom Paid</b><br>Ballet Northeast, Inc. |                    |                                   | <b>MO</b>                                          | <b>DAY</b> | <b>YEAR</b> | \$ 150.00 |
| <b>Mailing Address</b> PO Box 1618            |                    |                                   | 10                                                 | 14         | 2016        |           |
| <b>City</b> Wilkes-Barre                      | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18703 | <b>Description of Expenditure</b><br>Advertisement |            |             |           |

|                                         |                    |                                   |                                                    |            |             |           |
|-----------------------------------------|--------------------|-----------------------------------|----------------------------------------------------|------------|-------------|-----------|
| <b>To Whom Paid</b><br>The Times Leader |                    |                                   | <b>MO</b>                                          | <b>DAY</b> | <b>YEAR</b> | \$ 102.50 |
| <b>Mailing Address</b> 15 N. Main St    |                    |                                   | 10                                                 | 14         | 2016        |           |
| <b>City</b> Wilkes-Barre                | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18711 | <b>Description of Expenditure</b><br>Advertisement |            |             |           |

|                                          |                    |                                   |                                               |            |             |             |
|------------------------------------------|--------------------|-----------------------------------|-----------------------------------------------|------------|-------------|-------------|
| <b>To Whom Paid</b><br>SRCC              |                    |                                   | <b>MO</b>                                     | <b>DAY</b> | <b>YEAR</b> | \$ 2,500.00 |
| <b>Mailing Address</b> 800 N. 3rd Street |                    |                                   | 10                                            | 21         | 2016        |             |
| <b>City</b> Harrisburg                   | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>17120 | <b>Description of Expenditure</b><br>Donation |            |             |             |

|                                          |                    |                                   |                                               |            |             |           |
|------------------------------------------|--------------------|-----------------------------------|-----------------------------------------------|------------|-------------|-----------|
| <b>To Whom Paid</b><br>Camp Orchard Hill |                    |                                   | <b>MO</b>                                     | <b>DAY</b> | <b>YEAR</b> | \$ 100.00 |
| <b>Mailing Address</b> 640 Orange Rd     |                    |                                   | 10                                            | 21         | 2016        |           |
| <b>City</b> Dallas                       | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18612 | <b>Description of Expenditure</b><br>Donation |            |             |           |

|                                                              |                    |                                   |                                                    |            |             |           |
|--------------------------------------------------------------|--------------------|-----------------------------------|----------------------------------------------------|------------|-------------|-----------|
| <b>To Whom Paid</b><br>Republican Party of Lackawanna County |                    |                                   | <b>MO</b>                                          | <b>DAY</b> | <b>YEAR</b> | \$ 400.00 |
| <b>Mailing Address</b> 400 Spruce St, Suite 400              |                    |                                   | 10                                                 | 14         | 2016        |           |
| <b>City</b> Scranton                                         | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18503 | <b>Description of Expenditure</b><br>Event Tickets |            |             |           |

|                                                      |                    |                                   |                                                   |            |             |          |
|------------------------------------------------------|--------------------|-----------------------------------|---------------------------------------------------|------------|-------------|----------|
| <b>To Whom Paid</b><br>Victim's Intervention Program |                    |                                   | <b>MO</b>                                         | <b>DAY</b> | <b>YEAR</b> | \$ 50.00 |
| <b>Mailing Address</b> PO Bix 986                    |                    |                                   | 10                                                | 14         | 2016        |          |
| <b>City</b> Honesdale                                | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18431 | <b>Description of Expenditure</b><br>Event Ticket |            |             |          |

|                                                              |                    |                                   |                                                   |            |             |          |
|--------------------------------------------------------------|--------------------|-----------------------------------|---------------------------------------------------|------------|-------------|----------|
| <b>To Whom Paid</b><br>The Wayne County Community Foundation |                    |                                   | <b>MO</b>                                         | <b>DAY</b> | <b>YEAR</b> | \$ 75.00 |
| <b>Mailing Address</b> 214 Ninth St                          |                    |                                   | 10                                                | 14         | 2016        |          |
| <b>City</b> Honesdale                                        | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18431 | <b>Description of Expenditure</b><br>Event Ticket |            |             |          |

|                                                 |                    |                                   |                                               |            |             |           |
|-------------------------------------------------|--------------------|-----------------------------------|-----------------------------------------------|------------|-------------|-----------|
| <b>To Whom Paid</b><br>Rogers' Children Account |                    |                                   | <b>MO</b>                                     | <b>DAY</b> | <b>YEAR</b> | \$ 500.00 |
| <b>Mailing Address</b> PO Box 509               |                    |                                   | 10                                            | 14         | 2016        |           |
| <b>City</b> Honesdale                           | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18431 | <b>Description of Expenditure</b><br>Donation |            |             |           |

|                                        |                    |                                   |                                               |            |             |           |
|----------------------------------------|--------------------|-----------------------------------|-----------------------------------------------|------------|-------------|-----------|
| <b>To Whom Paid</b><br>Jennifer Wilson |                    |                                   | <b>MO</b>                                     | <b>DAY</b> | <b>YEAR</b> | \$ 114.96 |
| <b>Mailing Address</b> 1456 Chase Rd   |                    |                                   | 10                                            | 20         | 2016        |           |
| <b>City</b> Shavertown                 | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18708 | <b>Description of Expenditure</b><br>Supplies |            |             |           |

|                                                       |                    |                                   |                                                    |            |             |           |
|-------------------------------------------------------|--------------------|-----------------------------------|----------------------------------------------------|------------|-------------|-----------|
| <b>To Whom Paid</b><br>Penn State Wilkes-Barre        |                    |                                   | <b>MO</b>                                          | <b>DAY</b> | <b>YEAR</b> | \$ 250.00 |
| <b>Mailing Address</b> Development Office, PO Box PSU |                    |                                   | 10                                                 | 20         | 2016        |           |
| <b>City</b> Lehman                                    | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18627 | <b>Description of Expenditure</b><br>Advertisement |            |             |           |



|                                           |          |                         |                                        |     |      |             |
|-------------------------------------------|----------|-------------------------|----------------------------------------|-----|------|-------------|
| To Whom Paid<br>Killion Victory Committee |          |                         | MO                                     | DAY | YEAR | \$ 1,000.00 |
| Mailing Address 115 W. State St           |          |                         | 10                                     | 20  | 2016 |             |
| City Media                                | State PA | Zip Code (Plus 4) 19063 | Description of Expenditure<br>Donation |     |      |             |

|                                 |          |                         |                                              |     |      |          |
|---------------------------------|----------|-------------------------|----------------------------------------------|-----|------|----------|
| To Whom Paid<br>Jennifer Wilson |          |                         | MO                                           | DAY | YEAR | \$ 54.67 |
| Mailing Address 1456 Chase Rd   |          |                         | 10                                           | 20  | 2016 |          |
| City Shavertown                 | State PA | Zip Code (Plus 4) 18708 | Description of Expenditure<br>Event Expenses |     |      |          |

|                                         |          |                         |                                            |     |      |           |
|-----------------------------------------|----------|-------------------------|--------------------------------------------|-----|------|-----------|
| To Whom Paid<br>Penn State Wilkes-Barre |          |                         | MO                                         | DAY | YEAR | \$ 100.00 |
| Mailing Address PO Box PSU              |          |                         | 10                                         | 20  | 2016 |           |
| City Lehman                             | State PA | Zip Code (Plus 4) 18627 | Description of Expenditure<br>Event Ticket |     |      |           |

|                               |          |                         |                                                    |     |      |           |
|-------------------------------|----------|-------------------------|----------------------------------------------------|-----|------|-----------|
| To Whom Paid<br>Diana Hoover  |          |                         | MO                                                 | DAY | YEAR | \$ 155.55 |
| Mailing Address 402 Orchard W |          |                         | 10                                                 | 20  | 2016 |           |
| City Dallas                   | State PA | Zip Code (Plus 4) 18612 | Description of Expenditure<br>Cell phone / mileage |     |      |           |

|                                   |          |                         |                                                   |     |      |             |
|-----------------------------------|----------|-------------------------|---------------------------------------------------|-----|------|-------------|
| To Whom Paid<br>DAA Consulting    |          |                         | MO                                                | DAY | YEAR | \$ 1,000.00 |
| Mailing Address 2024 Rock Fall Rd |          |                         | 9                                                 | 29  | 2016 |             |
| City Harrisburg                   | State PA | Zip Code (Plus 4) 17110 | Description of Expenditure<br>Consulting Services |     |      |             |

|                                    |          |                         |                                        |     |      |          |
|------------------------------------|----------|-------------------------|----------------------------------------|-----|------|----------|
| To Whom Paid<br>Susan Slocum       |          |                         | MO                                     | DAY | YEAR | \$ 40.00 |
| Mailing Address 542 Valley View Rd |          |                         | 10                                     | 14  | 2016 |          |
| City Dallas                        | State PA | Zip Code (Plus 4) 18612 | Description of Expenditure<br>Supplies |     |      |          |

|                                                                                |                    |                                   |                                               |            |             |                                   |
|--------------------------------------------------------------------------------|--------------------|-----------------------------------|-----------------------------------------------|------------|-------------|-----------------------------------|
| <b>To Whom Paid</b><br>Tom Yoniski                                             |                    |                                   | <b>MO</b>                                     | <b>DAY</b> | <b>YEAR</b> |                                   |
| <b>Mailing Address</b> 89 Oak Drive                                            |                    |                                   | 10                                            | 5          | 2016        |                                   |
| <b>City</b> Dallas                                                             | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18612 | <b>Description of Expenditure</b><br>Supplies |            |             |                                   |
|                                                                                |                    |                                   |                                               |            |             |                                   |
| <b>To Whom Paid</b><br>Tom Yoniski                                             |                    |                                   | <b>MO</b>                                     | <b>DAY</b> | <b>YEAR</b> |                                   |
| <b>Mailing Address</b> 89 Oak Drive                                            |                    |                                   | 10                                            | 14         | 2016        |                                   |
| <b>City</b> Dallas                                                             | <b>State</b><br>PA | <b>Zip Code (Plus 4)</b><br>18612 | <b>Description of Expenditure</b><br>Supplies |            |             |                                   |
|                                                                                |                    |                                   |                                               |            |             |                                   |
| <b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b> |                    |                                   |                                               |            |             | <b>PAGE TOTAL</b><br>\$ 11,213.36 |

