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 201	8C0256			Repo Filed		y :	CAND	IDATE	١	/ [COM	MITTEE		LOB	BYIST	•	
Name of Filing C	Committee, Candi	date or L	obbyist:		BAKE	R, I	ELISA	ABETH J										
Street Address:																		
City:								State:					Zip Code	e: 18	627			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.		30 DA PRIMA		POST- 3. X AMENDMENT REPORT?					NT	Yes	١	lo	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.		30 DA ELECT		POST-	6.			ERMINAT	TION	Yes	١	lo	\
report type)	ANNUAL REPOR	7.	Year 2018					IG METH CHECK (F	PAPER		\	DISK	ETTE	
Name of Office S	Sought by Candid	ate:	•		•			DATE	OF EL	ECT	ION		District Number	Office Code	Pai	ty Cod	e Cou	
CENIATOR IN TI	UE CENEDAL ACC	CMDLV						МО	DAY		YEAR		20	STS	REF)	40	
SENATOR IN TR	HE GENERAL ASS	DEMIDE						1	1	6	20	18		(SEE IN	STRUCTI	ONS FO	R CODES	5)
Summary of Expenditures	Receipts and	МО	DAY	YEAR		_	_	МО	DAY	•	YEAR		FOR	OFFIC	E USE	ONL	1	
			5 1	2	018	T) 		5	4	20	18						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$				1,218.							
B. Total Moneta	ary Contributions	And Rec	eipts (Fron	Sche	dule 1	[)	\$				506.	44						
C. Total Funds	Available (Sum C	f Lines A	and B)				\$				1,725.	37						
D. Total Expend	ditures (From Sc	nedule II	I)				\$				0.	00						
E. Ending Cash	Balance (Subtra	ct Line D	From Line	C)			\$				1,725.3	37						
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	le II)		\$				0.0	00						
G. Unpaid Debt	ts And Obligation	s (From S	Schedule IV	')			\$				0.	00						
				AFF	IDΑ\	۷IT	SE	CTION										
PART I - If this is	s a Committee re	port, trea	surer sign	here. 1	If this	is is	a Car	ndidate ı	eport,	, car	ndidate	sign	here.					
I swear (or affirm) correct and comple) that this report, in ete.	cluding the	e attached sc	hedules	filed	on p	aper	or by elec	tronic i	medi	um, are	to th	e best of	my knov	vledge	and be	lief , tı	rue
Sworn to and subs	cribed before me th day of	is	20								Signa	ture (of Person	Submit	ing Re	ort		
	Signat	ure					•						Printe	d Name	1			_
My Commission Ex	cpires						_						Email					
	МО	D	AY	YR						rea	Code		Daytime	Teleph	one Nu	mber		
Part II- If this is	a report of a car	ididate's	authorized	Comn	nittee	, Ca	ndid	ate shal	l sign l	here	∍.							
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowl	edge and beli	ef this	politic	cal o	comm	ittee has	not vio	lated	l any pro	ovisio	ns of the	act of J	ıne 3,1	937 (P	.L. 133	з,
Sworn to and subsc	ribed before me this	5	20									Sig	nature of	Candida	ate			_
													Printed	Name				-
My Commission Exp	Signature												Email					_
, commission exp																		_
	МО	D	AY	YR					Are	a Co	de		Day	time T	elephor	e Nun	ber	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
BAKER, ELISABETH J	From:	5/1/201	<u>8</u> To:	6/4/2018
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)	\$	506.44
Total Monetary Contributions and Receipts During this Reporting Period (Add ar totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	506.44

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize on with an aggregate val							
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			Fr	om:		То	:	
					DATE			AMOUNT
Full Name of Contribution	ng Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
	•					-	Г	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 Fining Committee of Candidate					Reporting Period From: To:					
					DATE			AMOUNT		
Full Name of Contributor				МО	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4))							

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

PAGE TOTAL \$0.00

PART C

Contributions Received From Political Committees

OVER \$250.00

Use this Part to itemize only contributions received from Political committees with an aggregate value from Over \$250.00 in the reporting period.

Name of Filing Committee or Candidate	ame of Filing Committee or Candidate Reporting					ng Period					
			From:			То:					
				DA	TE		А	MOUNT			
Full Name of Contributing Committee				мо	DAY	YEAR					
Mailing Address							\$	0.00			
City	State	Zip Cod	e (Plus 4)								
								PAGE TOTAL			
Enter Grand Total of Part C on Scho	edule I, Detailed Sun	nmary Pa	age, Sectio	n 3.			\$	0.00			

ALL OTHER CONTRIBUTIONS

OVER \$250.00

Use this Part to itemize all other contributions with an aggregate value of over \$250.00 in the reporting period.

(Exclude contributions from political committees reported in Part C.)

Name of Filing Committee or Candidate	Reporting Period								
			Fron	From: To:					
				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 Car	Name of Filing Committee or Candidate						
BAKER, ELISABETH J			From:		5/1/201	<u>8</u> To:	6/4/2018
				D	ATE		AMOUNT
Full Name Baker for Senate Committee				мо	DAY	YEAR	
Mailing Address PO Box 59							\$ 506.44
City Lehman	State PA	Zip Code (18627	Plus 4)	5	25	2018	
Receipt Description Mileage	/Postage	•					
Enter Grand Total of Part E on	Schedule I. Detailed	l Summary Page.	Section	4.			PAGE TOTAL
	Juliania I/ Detailed	· Janimary rage,	2220011				\$ 506.44

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		
BAKER, ELISABETH J	From:	<u>5/1/2018</u> To:	6/4/2018
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T F)		
TOTAL for the Reporting Pe	eriod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	eriod (3)	\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page,		\$	0.00

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candid	Name of Filing Committee or Candidate Re					Reporting Period					
	From:		To:):							
				DATE			AMOUNT				
Full Name of Contributor			МО	DAY	YEAR						
Mailing Address						\$	0.00				
City	State	Zip Code (Plus 4)									
Description of Contribution:											
Enter Grand Total of Part F on S	chedule II, In-Kir	nd Contributions Deta	iled 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 Candidat	lame of Filing Committee or Candidate					porting P	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor	•		•			Occupa	tion			
Employer Mailing Address/Principal Pla Business	ace of	City		State		Zip 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on Sc Summary Page, Section 3.	hedule II, i	In-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or	Reporti						
			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 Expe	naitures on Page 1, Re	port Cover Page, Item L).			\$	0.00