Campaign Finance Report

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

Filer Identificat Number :	ion 2018	C0256			Repo Filed		•	CANDI	DATE	✓	CC	OMMITTE		LOB	BYIS	г	
	Committee, Candida	ate or Lo	obbyist:					L ABETH J									
Street Address:																	
City:							State: Zip Code: 186						627				
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.		0 DA RIMA		POST-	3.		AMENDM REPORT?	ENT	Yes	\checkmark	No]
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION					Y F TION	POST- 6. X			TERMINATION REPORT?		Yes		No	\checkmark
report type)	ANNUAL REPORT	7.	Year 2018					IG METHO				PAPER		\checkmark	DIS	KETTE	:
Name of Office	Sought by Candidat	te:	<u>.</u>					DATE O	FELE	CTIO	N	District Number	Office Code	Pai	rty Co	de Cou Cod	
CENATOR IN T								мо	DAY	YE	AR	20	STS	REF	þ	40	
SENATOR IN I	HE GENERAL ASSE	:MBLY						11		6	2018		(SEE INS	TRUCTI	ONS FO	OR CODE	S)
	Receipts and	мо	DAY	YEAF	۲			мо	DAY	YE	AR	FO	R OFFIC	e use	ONL	Y	
Expenditures	s from:	1	10 23	2	018	то)	11		26	2018						
A. Amount Bro	ought Forward Fron	n Last Re	eport				\$			1,7	25.37						
B. Total Monet	tary Contributions A	And Reco	eipts (From	1 Sche	dule I)	\$				0.00						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			1,7	25.37						
D. Total Expen	ditures (From Sche	adule II	()				\$				0.00						
E. Ending Cash	n Balance (Subtract	: Line D	From Line	C)			\$			1,72	25.37						
F. Value Of In-	-Kind Contributions	Receive	ed (From S	chedu	le II)		\$				0.00						
G. Unpaid Deb	ts And Obligations	(From S	chedule IV	')			\$				0.00		·				
				AFF	IDA\	/IT	SE	CTION									
	s a Committee repo	-	-									-		dadaa		aliaf 4	
correct and compl	i) that this report, inclu lete.	uting the	attached sci	lieuule	s meu c	лі ра	iper d	bi by elect	ionic m	eurum,		the best of	IIIY KIIOW	neuge		ener, t	.iue
Sworn to and sub	scribed before me this day of		20							Si	gnatur	e of Person	Submitti	ing Re	port		
	Signatur	re				_						Print	ed Name				-
My Commission E	-	-										Emai					
	мо	DA	λY	YR					Are	ea Code	9	Daytime	e Telepho	one Nu	mber		
Part II- If this is	a report of a cand	lidate's	authorized	Comr	nittee,	Car	ndida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amend) that to the best of m led.	ıy knowle	dge and beli	ef this	s politic	al co	ommi	ittee has n	ot viola	ted any	, provis	ions of the	act of Ju	ne 3,1	937 (P.L. 13	33,
Sworn to and subscribed before me this day of 20											S	ignature o	f Candida	te			—
												Printe	l Name				—
My Commission Ex	Signature											Emai	1				—
	· ·																_
	мо	D#	AY	YR	ł				Area	Code		Da	ytime Te	lephor	ne Nui	nber	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** BAKER, ELISABETH J From: <u>10/23/2018</u> **To:** 11/26/2018 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 0.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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.

Name of Filing Committee or Candidate				Reporting Period						
				From: To:			:			
		·			DATE			AMOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Code (Plus 4	4)							
								PAGE TOTAL		
Enter Grand Total of Part A on Sche	\$	0.00								

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 Candida	te			oorting P	eriod					
			Fro	m:		Тс):			
					DATE			AMOUNT		
Full Name of Contributor				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										

PART C Contributions Received From Political Committees

OVER \$250.00

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

Name of Filing Committee or Candidate			Reporting Period							
			From:			То:				
				DA	TE		A	MOUNT		
Full Name of Contributing Committee				мо	DAY	YEAR		0.0		
Mailing Address							- \$	0.0		
City	State	Zip Cod	e (Plus 4)							
								PAGE TOTAL		
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.							\$	0.00		

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 Re				Reporting Period					
From:				m: To:					
				D	ATE		АМ	IOUNT	
Full Name of Contributor				мо	DAY	YEAR	\$	0.00	
Mailing Address									
City	State	Zip Code (Pl	ıs 4)						
Employer Name				Occupation					
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Code	e (Plus 4)	
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Sectio							P#	AGE TOTAL 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			Report	ing Peric	d				
			From:			То:			
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR	\$		0.00
Mailing Address									
City	State	Zip Code (Plus 4)						
Receipt Description	·	•					•		
		_						PAGE TO	TAL
Enter Grand Total of Part E on Sched	ule 1, Detailed Sumn	nary Page,	Section	4.			\$		0.00

SCHEDULE II IN-KIND CONTRIBUTIONS AND VALUABLE THINGS RECEIVED USE THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THINGS

E THIS SCHEDULE TO REPORT ALL IN-KIND CONTRIBUTIONS OF VALUABLE THING DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Perio	d	
BAKER, ELISABETH J	From:	<u>10/23/2018</u> то:	<u>11/26/2018</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART	ſF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, 1		\$	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						
F						То:			
				DATE			AMOUNT		
Full Name of Contributor				DAY	YEAR				
Mailing Address] \$	0.0)0	
City	State	Zip Code (Plus 4)							
Description of Contribution:									
Enter Grand Total of Part F on Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	le,	P	AGE TOTAL	_	
						\$	0.0	0	

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

Name of Filing Committee or Candidate	Name of Filing Committee or Candidate				Reporting Period						
				From:							
					DATE		AMOUNT				
Full Name of Contributor				мо	DAY	YEAR					
Mailing Address							\$ 0.00				
City	State	Zip Code(Plus 4)									
Employer of Contributor		•		Occupa	ation						
Employer Mailing Address/Principal Plac	e of Business	City	State	e Zip	Code(Plus 4)	Descri	ption of Contribution				
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-Kind	d Contributions D	etaile	d			PAGE TOTAL 0.00				

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	1		Reporti	ng Period			
	From			То:			
		DATE		AMOUNT			
To Whom Paid	мо	DAY	YEAR				
Mailing Address						\$	0.00
City	Zip Code (Plus 4)	Description of Expenditure					
Enter Crand Tatal of Evnanditures					PAGE TOTAL		
Enter Grand Total of Expenditures of	on Page 1, Report C	lover Page, Item L				\$	0.00