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 :	ion 2020	C0656			Repor Filed		CANDI	DATE	✓	СС	OMMITTEI		LOBI	BYIST		
Name of Filing C	Committee, Candida	ate or Lo	bbyist:			-	ETTE C									
Street Address:	Street Address:															
City:							State:				Zip Code: 19540					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 DA PRIM		POST-	POST- 3. X		AMENDMENT REPORT?		Yes	No	, 🔨	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5.	30 D/ ELEC		POST-	POST- 6.		TERMINATION REPORT?		Yes	No	· 🗸	
report type)	report type) ANNUAL REPORT 7. Year 2020 FILING METHOD () CHECK ONE										DISKE	TTE				
Name of Office Sought by Candidate: DAT)F ELE	CTION		District Number	Office Code	Par	ty Code	County Code	
SENATOD IN T	HE GENERAL ASSE						мо	DAY	YEA	R	11	STS	REP	•	06	
SENATOR IN T	HE GENERAL ASSE	IMPLI					11		3	2020	 	(SEE INS	TRUCTI	ONS FOR	CODES)	
	Receipts and	мо	DAY	YEAR	2		мо	DAY	YEA	R	FO	R OFFIC	e use	ONLY		
Expenditures	s from:		5 19	2	020	ГО	6		22	2020						
A. Amount Bro	ught Forward Fron	n Last Re	eport			\$			(838	8.89)						
B. Total Monet	ary Contributions A	And Rece	eipts (From	1 Sche	dule I)	\$	\$ 0.00									
C. Total Funds	Available (Sum Of	Lines A	and B)			\$	5		(838	8.89)						
D. Total Expen	ditures (From Sche	edule III	:)			\$	5		9	3.74						
E. Ending Cash	Balance (Subtract	t Line D l	From Line	C)		\$	5		(932	.63)						
F. Value Of In-	Kind Contributions	Receive	ed (From S	chedu	le II)	\$	5			0.00	1					
G. Unpaid Deb	ts And Obligations	(From S	chedule IV	')		\$	5			0.00						
				AFF	IDAV	IT SE	CTION									
PART I - If this is	s a Committee repo	ort, treas	surer sign	here. I	If this i	s a Ca	ndidate r	eport, o	candida	te sig	gn here.					
I swear (or affirm correct and compl) that this report, incl ete.	uding the	attached sc	hedules	s filed or	n paper	or by elect	ronic m	edium, a	re to	the best of	my know	ledge	and beli	ef , true	
Sworn to and subs	cribed before me this day of	5	20						Sig	natur	e of Person	Submitt	ing Rep	oort		
	Signatu	re				_					Print	ed Name				
My Commission E	xpires										Email	l				
	мо	DA	Y	YR		_		Ar	ea Code		Daytime	e Teleph	one Nu	mber		
Part II- If this is	a report of a cand	lidate's a	authorized	Comn	nittee, (Candid	late shall	sign h	ere.							
I swear (or affirm) No 320) as amendo	that to the best of med.	ıy knowle	dge and beli	ef this	politica	l comm	nittee has n	iot viola	ted any	provis	ions of the	act of Ju	ne 3,1	937 (P.I	1333,	
Sworn to and subscribed before me this Signature of Candidate							te									
day of 20							Printeo	l Name								
My Commission Exp	Signature					_					Emai	1				
, =/						_										
	мо	DA	Y	YR				Area	Code		Da	ytime Te	lephon	e Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** From: <u>5/19/2020</u> To: 6/22/2020 BAKER, ANNETTE C 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.)

PAGE 3

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:		То	:		
				DATE			AMOUNT	
Full Name of Contributing Committe	e		мс	DAY	YEAR			
Mailing Address						\$	0.00	
City State Zip Code (Plus 4)			4)					
			-			Γ	PAGE TOTAL	

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

0.00

\$

5/8/2024 8:36:01 AM

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 Candidat	e		Rep	orting P	eriod			
From: To:								
					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		А	MOUNT	
Full Name of Contributing Comm	ittee			мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Cod	e (Plus 4)						
						ſ		PAGE TOTAL	
Enter Grand Total of Part C or	n Schedule I, Detaile	ed Summary Pa	age, Sectio	n 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	Reporting Period	
	From:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal Place of City Business				State		Zip Code	(Plus 4)	
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

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	Name of Filing Committee or Candidate			ing Perio	od				
From				From: To:					
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$	i	0.00
City	State	Zip Code (Plus 4)						
Receipt Description						•			
Enter Grand Total of Part E on Schedu	le T. Detailed Sumn	nary Page	Section	4				PAGE TO	ΓAL
		iaiy raye,	Section	7.			\$		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

Name of Filing Committee or Candidate	Reporting Period		
BAKER, ANNETTE C	From:	<u>5/19/2020</u> To:	<u>6/22/2020</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 PAR	TF)		
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 Re			Reporting Period					
Fr						То:		
				DATE		АМО	UNT	
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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL	
					4	6	0.00	

0.00

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

Name of Filing Committee or Candidate					Reporting Period					
					From:		То:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address							\$	0.00		
City	State		Zip Code(Plus	4)						
Employer of Contributor			1		Occupa	l tion		1		
Employer Mailing Address/Prin Business	cipal Place of	City	Sta	te	Zip 4)	Code(Plus	Descri	ption of	Contribution	
Enter Grand Total of Part G	Con Schedule II	In-Kind	Contributions	Dota	iled				PAGE TOTAL	

	1
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.	PAGE

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Cand	Name of Filing Committee or Candidate						
BAKER, ANNETTE C			From	<u>5/19</u>	<u>9/2020</u>	То:	<u>6/22/2020</u>
				DATE			AMOUNT
To Whom Paid Friends of Annette Baker			мо	DAY	YEAR		
Mailing Address P.O. Box 703			5	22	2020	\$	55.00
City Reading	Description of Expenditure Donation						
To Whom Paid DreamHost Web Hosting			мо	DAY	YEAR		
Mailing Address 417 Associated	l Rd		6	6	2020	\$	4.95
CityBreaStateZip Code (Plus 4)CA92821				otion of Exp	penditure	1	
To Whom Paid RPA			мо	DAY	YEAR		
Mailing Address 613 Franklin S	t		5	21	2020	\$	2.00
City Reading	State PA	Zip Code (Plus 4) 19606	Description of Expenditure Parking Fee				
To Whom Paid Staples			мо	DAY	YEAR		
Mailing Address 1167 Berkshire	e Blvd.		6	22	2020	\$	31.79
CityWyomissingStateZip Code (Plus 4)PA19610				otion of Exp ss Cards	oenditure		
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D							PAGE TOTAL
						\$	93.74