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 2005	279			Report		CANDI	DATE		СОМ	DMMITTEE V LOBBYIST					
Name of Filing C	ommittee, Candid	ate or L	obbyist:	В	AKER,	ELISA	ABETH FO	OR SEI	NATE							
Street Address:	1041 MOUNT	AIN VIE	W DR,PO BOX 5	9												
City:	LEHMAN						State: PA				Zip Code: 18627-0059					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PR PRIMARY	E-	2.	30 DA		POST-	3. X		AMENDM REPORT		Yes	No	•	\
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRELECTION	RE-	5.	30 DA		POST-	6.		TERMINA REPORT		Yes	No		/
report type)	ANNUAL REPORT	7.	Year 2020				NG METHO				PAPER		$\overline{}$	DISKE	TTE	
Name of Office S	ought by Candida	te:	-				DATE 0	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Coun	
	,						МО	DAY	YE	AR	Number	Code			code	
							11		3	2020		(SEE IN	STRUCTI	ONS FOR C	ODES))
	Receipts and	МО	DAY YEA	R			МО	DAY	YE	AR	FC	R OFFI	CE USE	ONLY		
Expenditures	from:		5 19	202	20 T	0	6		22	2020						
A. Amount Bro	ught Forward Froi	n Last R	eport			\$			77,3	396.18						
B. Total Moneta	ary Contributions	And Rec	eipts (From Sch	edı	ule I)	\$			1	.00.00						
C. Total Funds Available (Sum Of Lines A and B)									77,4	196.18						
D. Total Expend	ditures (From Sch	edule II	I)			\$			12,5	49.28						
E. Ending Cash	Balance (Subtrac	t Line D	From Line C)			\$			64,9	46.90						
F. Value Of In-	Kind Contribution	Receiv	ed (From Sched	ule	II)	\$		0.00								
G. Unpaid Debt	s And Obligations	(From S	Schedule IV)			\$				0.00			•			
	AFFIDAVIT SECTION															
PART I - If this is	a Committee rep	ort, trea	surer sign here.	If	this is	a Car	ndidate re	eport, o	candi	date sig	jn here.					
I swear (or affirm) correct and comple	that this report, incete.	luding the	attached schedule	es fi	iled on	paper	or by elect	ronic m	edium	, are to t	the best o	f my kno	wledge	and belie	ef , tru	ue
Sworn to and subs	cribed before me this day of	5	20						S	ignature	of Perso	n Submit	ting Rep	ort		
	Signatu	re	-			- -					Prin	ted Name	e			
My Commission Ex	rpires					_					Ema	il				
	МО	D	AY YI	₹				Are	ea Cod	e	Daytim	e Telepl	none Nu	mber		
Part II- If this is	a report of a can	didate's	authorized Com	mit	ttee, C	andid	ate shall	sign h	ere.							
I swear (or affirm) No 320) as amende	that to the best of red.	ny knowle	edge and belief thi	is po	olitical	comm	ittee has n	ot viola	ted an	y provis	ions of th	e act of J	une 3,1	937 (P.L	. 1333	3,
Sworn to and subsc	ribed before me this day of		20							s	ignature (of Candid	ate			-
						-					Printe	d Name				-
My Commission Exp	Signature					-					Ema	il				-
rry Commission Exp					_	_										
	МО	D	AY Y	R				Area	Code		D	aytime T	elephon	e Numb	er	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
BAKER, ELISABETH FOR SENATE	From:	5/19/202	<u>20</u> To:	6/22/2020
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) Period	(4)	\$	100.00
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			\$	100.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Use	this Part to itemize onl with an aggregate valu							
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
			Fre	om:		То	:	
		'			DATE			AMOUNT
Full Name of Contribut	ing Committee			МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4))					
	'	· · · · · · · · · · · · · · · · · · ·						DAGE 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 Filing Committee or C	andidate		Rep Fro	oorting P m:	eriod	To) :	
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)	1					

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			Reporting	Period				
			From:			То:		
				DA	TE		A	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule I, Detailed Sum	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	n:		To):		
				D	ATE		АМС	OUNT	
Full Name of Contributor				мо	DAY	YEAR			
Mailing Address							\$	0.00	
City	State	Zip Code (Plus	s 4)						
Employer Name				Occupa	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	ımmary Page,	Section	on 3.			PA(GE TOTAL 0.00	

OTHER RECEIPTS

REFUNDS, INTEREST INCOME, RETURNED CHECKS, ETC.
Use this Part to report refunds received, interest earned, returned checks and prior expenditures that were returned to the filer.

Name of Filing Committee or Candidate	Reporting Peri	iod	
BAKER, ELISABETH FOR SENATE	From:	<u>5/19/2020</u> To:	6/22/2020

			D	ATE		AMOUNT
Full Name Milford Lodge 344 F & AM			мо	DAY	YEAR	
Mailing Address PO Box 152	5		_			\$ 100.00
City Milford	State PA	Zip Code (Plus 4) 18337	5	28	2020	
Receipt Description Return	ed Sponsorship					

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

PAGE TOTAL\$ 100.00

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 Perio	od	
BAKER, ELISABETH FOR SENATE	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	PER CONTRIBUTOR	l .	
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
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	ate		Reporting	g 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 Candidate				Re	porting P	Period			
				Fro	om:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address								\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occupa	tion			
Employer Mailing Address/Principal Plac Business	ce of Cit	ity	State		Zip 4)	Code(Plus	Descri	ption o	f Contribution
Enter Grand Total of Part G on Sch Summary Page, Section 3.	edule II, In-K	Kind (Contributions De	etaile	ed				PAGE TOTAL 0.00

STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Pe	eriod		
BAKER, ELISABETH FOR SENATE	From	5/19/2020	То:	6/22/2020

			DATE				AMOUNT
To Whom Paid The 109th Infantry Regiment A	ssociation		мо	DAY	YEAR		
Mailing Address 118 West Ri	dge Street		5	20	2020	\$	100.00
City Shavertown	State PA	Zip Code (Plus 4) 18708	Description of Expenditure Sponsorship				
To Whom Paid Verizon			МО	DAY	YEAR		
Mailing Address PO Box 2550	05		5	20	2020	\$	205.37
City Lehigh Valley	State PA	Zip Code (Plus 4) 18002	Description of Expenditure Cell Phone				
To Whom Paid Wilderflowers			МО	DAY	YEAR		
Mailing Address 347 Conyng	ham Drive		5	20	2020	\$	53.00
City Shavertown	State PA	Zip Code (Plus 4) 18708	Description of Expenditure Condolence				
To Whom Paid Central Volunteer Fire Departm	ent	·	МО	DAY	YEAR		
Mailing Address PO Box 33			6	1	2020	\$	100.00
City Rowland	State PA	Zip Code (Plus 4) 18457	Descrip Donation	otion of Exp	penditure		
To Whom Paid Catherine McAuley Center			МО	DAY	YEAR		
Mailing Address 430 Pittston Avenue			6	1	2020	\$	150.00
City Scranton	State PA	Zip Code (Plus 4) 18505	Description of Expenditure Donation				
		l .	1				

мо	DAY	YEAR			
6	10	2020	\$		100.00
мо	DAY	YEAR			
6	10	2020	\$		26.35
МО	DAY	YEAR			
6	10	2020	\$		1,000.00
1					
	otion of Exp ing Servic				
Consult	ing Servic	es 	\$		5,000.00
MO 6	DAY 10	YEAR 2020	\$		5,000.00
MO 6	DAY 10	YEAR 2020	\$		5,000.00
MO 6 Descrip	DAY 10 stion of Expution	YEAR 2020 Denditure	\$		5,000.00
MO 6 Descrip Contrib MO 6	DAY 10 ption of Expution DAY	YEAR 2020 Denditure YEAR 2020	\$		
MO 6 Descrip Contrib MO 6 Descrip	DAY 10 ption of Expution DAY	YEAR 2020 Denditure YEAR 2020	\$		
MO 6 Descrip Contrib MO 6 Descrip	DAY 10 Pation of Expution DAY 10 Pation of Expution	YEAR 2020 Denditure YEAR 2020 Denditure	\$		
	6 Description MO 6 Description Postage MO	6 10 Description of Exp Donation MO DAY 6 10 Description of Exp Postage MO DAY	6 10 2020 Description of Expenditure Donation MO DAY YEAR 6 10 2020 Description of Expenditure Postage MO DAY YEAR	6 10 2020 \$ Description of Expenditure Donation MO DAY YEAR 6 10 2020 \$ Description of Expenditure Postage MO DAY YEAR	6 10 2020 \$ Description of Expenditure Donation MO DAY YEAR 6 10 2020 \$ Description of Expenditure Postage MO DAY YEAR

To Whom Paid Pike County Republican Committee				DAY	YEAR		
Pike County Republican Con	imittee						
Mailing Address 107 East High Street			6	19	2020	\$	400.00
City Milford	State	Zip Code (Plus 4)	Descri	tion of Exr	enditure		
· inilioru	PA	18337	Description of Expenditure Sponsorship				
To Whom Paid Wallenpaupack Vets for	·	·	мо	DAY	YEAR		
Mailing Address PO Box 2	25		6	19	2020	\$	100.00
City Greentown	State	Zip Code (Plus 4)	Description of Expenditure				
Greentown	PA	18426	Sponso		, c.i.a.ca.c		
To Whom Paid American Society of Highwa	y Engineers, NEPA		МО	DAY	YEAR		
Mailing Address One South Church Street			6	19	2020	\$	100.00
City Hazleton	State	Zip Code (Plus 4)	Description of Expenditure				
Hazicton	PA	18201	Sponso	-			
To Whom Paid United Way of Pike County	·	·	МО	DAY	YEAR		
Mailing Address 506 Broa	nd Street		6	19	2020	\$	75.00
City Milford	State	Zip Code (Plus 4)	Description of Expenditure				
Fillion	PA	18337	Sponsorship				
	•	•	•				PAGE TOTAL
Enter Grand Total of Expe	enditures on Page 1, Rep	port Cover Page, Item D	•			\$	12,549.28