### **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 2	2020C	0656				Repoi Filed			CAN	DII	DATE	*	<b>/</b> [	COM	IMITTEE		LOB	BYIS	Т	
Name of Filing C	Committee, Ca	ndida	te or Lo	obbyis	t:	E	BAKER	, ANI	NE	TTE C											
Street Address:																					
City:	_									State:						Zip Code	: 19	540			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1	1.	2ND F PRIMA		PRE-	2.	30 I PRI			Р	OST-	3.			MENDME EPORT?	NT	Yes		No	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION		4.	2ND F ELECT		PRE-	5. <b>X</b>	30 I ELE		Y ION	Р	OST-	6.			ERMINAT	No	<b>\</b>			
report type)	ANNUAL REP	ORT 7	7.	Year :	2020					IG MET					P	PAPER DISKE					
Name of Office S	ought by Can	didate	e:							DATE	0	F ELE	CT:	ION		District Number	Office Code	Par	ty Co	de Cou Cod	
CENIATOR IN TI	IE CENEDAL	۸۵۵۲۱	MDLV							МО		DAY		YEAR	1	11	STS	REF	•	06	
SENATOR IN TH	TE GENERAL /	455EI	YIDLT								11		3	202	20		(SEE IN	STRUCTI	ONS FO	OR CODE	S)
Summary of	•	d	МО	DA	Y	YEAR				МО		DAY		YEAR		FOF	OFFIC	E USE	ONL	Y	
Expenditures	s trom:			6	23	20	20	ГО			10		19	202	20						
A. Amount Bro	ught Forward	From	Last R	eport					\$				(	(932.63	3)						
B. Total Moneta	ary Contributi	ons Aı	nd Rec	eipts (	From	Sched	lule I)		\$					0.0	00						
C. Total Funds	Available (Su	m Of L	ines A	and B	5)				\$				(	(932.63	3)						
D. Total Expend	ditures (From	Sched	dule II	I)					\$				1	L,649.1	.2						
E. Ending Cash	Balance (Sub	tract	Line D	From I	Line C	<b>:</b> )			\$				(2,	581.75	5)						
F. Value Of In-	Kind Contribu	tions	Receive	ed (Fro	om Sc	hedule	e II)		\$					0.0	0						
G. Unpaid Debt	s And Obligat	ions (	From S	Schedu	ile IV)	)			\$					0.0	00						
						AFFI	DAV:	IT S	E	CTIO	N										
PART I - If this is		-	•		_																
I swear (or affirm) correct and comple		t, inclu	ding the	attach	ed sch	edules	filed or	раре	er o	or by el	ectr	onic m	ediu	ım, are t	to th	e best of	my knov	vledge	and b	elief , t	rue
Sworn to and subs	cribed before m day of	e this		20							•			Signat	ure o	of Person	Submitt	ing Re	ort		_
	— ————————————————————————————————————	gnature	e					_								Printe	d Name	1			-
My Commission Ex	cpires										•					Email					
	МО		DA	ΑY		YR						Ar	ea C	Code		Daytime	Teleph	one Nu	mber		Ш
Part II- If this is	a report of a	candi	date's	authoi	rized (	Commi	ittee, (	Cand	ida	ate sha	all s	sign h	ere	•							
I swear (or affirm) No 320) as amende		t of my	/ knowle	edge an	d belie	ef this p	politica	com	mi	ttee ha	s no	ot viola	ted	any pro	visio	ns of the	act of Ju	ıne 3,1	937 (	P.L. 133	33,
Sworn to and subsc	ribed before me day of	this		20											Sig	nature of	Candida	ite			_
				_ 20				_								Printed	Name				-
My Commission Exp	Signat	ture						_								Email					-
								_													_
	МС	)	DA	AY		YR						Area	Cod	le		Day	time To	elephor	ne Nui	nber	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
BAKER, ANNETTE C	From:	6/23/202	<u>0</u> To:	10/19/2020
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)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00

#### **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.

Name of Filing Committee	or Candidate	R	eporting	Period			
		F	rom:		То	:	
		•		DATE			AMOUNT
Full Name of Contributing Co	ommittee		мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

PAGE TOTAL
0.00

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

## 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	Rep	oorting P	eriod					
			From: To			<b>)</b> :		
		•			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.

#### **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 Ca	ndidate		Reporting	Period				
			From:			То:		
				DA	TE		A	MOUNT
Full Name of Contributing Comn	nittee			мо	DAY	YEAR		0.00
Mailing Address							<b>*</b>	0.00
City	State	Zip Code	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C o	on Schedule I, Detailed	d Summary 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 Rep			Rep	Reporting Period							
				Fron	n:			To:			
					D	ATE			AMO	OUNT	
Full Name of Contributor					МО	DAY	YEA	R	\$		0.00
Mailing Address											
City	State	Zi	p Code (Plus	4)							
Employer Name	•				Occupa	tion					
Employer Mailing Address/Principal Pl	ace of Business		City		•	State		Z	ip Code	(Plus 4)	
Enter Grand Total of Part C on Sch	edule I, Detaile	d Sumr	mary Page,	Section	on 3.			\$	PA	<b>GE TOTA</b>	<b>L</b> .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		Report	ing Peri	od			
			From:			To:		
		<b>'</b>			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	<b>'</b>	1					<u> </u>	
	- C		<b>.</b> .:	_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	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 DURING THE REPORTING PERIOD.

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Perio	d	
BAKER, ANNETTE C	From:	<u>6/23/2020</u> <b>To:</b>	<u>10/19/2020</u>
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 Ca	ndidate		Reportin	g Period			
			From:			To:	
				DATE			AMOUNT
Full Name of Contributor			мо	DAY	YEAR		
Mailing Address						<b>-</b> \$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:	•		•	•			
				_	Г		
Enter Grand Total of Part F of Section 2.	n Schedule II, In-Ki	nd Contributions Detai	led Sum	nmary Pa	ge,		PAGE TOTAL
						\$	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate				Reporting Period						
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

### SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period				
BAKER, ANNETTE C	From	6/23/2020	То:	10/19/2020	

				DATE			AMOUNT		
To Whom Paid			МО	DAY	YEAR				
RPA									
Mailing Address 613 Frankl	in St		7	21	2020	\$	2.00		
<b>City</b> Reading	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	PA	19606	Parking	fee					
To Whom Paid			мо	DAY	YEAR				
County of Berks-Election Servi	ices		PIO	JA.	ILAK				
Mailing Address 633 Court	St, 1st Floor		7	21	2020	\$	20.00		
<b>City</b> Reading	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	PA	19601	CD						
To Whom Paid			мо	DAY	YEAR				
Staples			1-10		I ZAIR				
Mailing Address 1167 Berks	shire Blvd.		7	31	2020	\$	31.41		
City Wyomissing State Zip Code (Plus 4				tion of Exp	enditure				
	PA	19610	Office S	Supplies					
To Whom Paid			мо	DAY	YEAR				
Sam's Club			1-10	JA.	ILAK				
Mailing Address 5314 Allen	town Pike		8	7	2020	\$	134.94		
<b>City</b> Reading	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	PA	19560	Office S	Supplies					
To Whom Paid			МО	DAY	YEAR				
Amazon			140	JA.	ILAK				
Mailing Address 410 Terry	Ave.N.		7	12	2020	\$	13.99		
<b>City</b> Seattle	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure				
	WA	98108	Heat tra	ansfer viny	1				
To Whom Paid			МО	DAY	YEAR				
Amazon			МО	DAT	ILAK				
Mailing Address 410 Terry	Ave.N.		7	12	2020	\$	64.99		
City Seattle State Zip Code (Plus 4)				4) Description of Expenditure					
WA 98108			Heat tra	ansfer viny	1				
		<u> </u>							

No	s 4.9!
DreamHost Web Hosting         To Mailing Address         417 Associated Rd.         Zip Code (Plus 4)         Description of Expenditure           City Brea         State CA         Zip Code (Plus 4)         Description of Expenditure           Mo DAY         YEAR           City Brea         State Zip Code (Plus 4)         Description of Expenditure           To Whom Paid DreamHost Web Hosting         Mo DAY         YEAR           To Whom Paid DreamHost Web Hosting         Mo DAY         YEAR           Mailing Address         417 Associated Rd.         9 6 2020         \$           City Brea         State         Zip Code (Plus 4)         Description of Expenditure	s 4.9!
City Brea State Zip Code (Plus 4) Description of Expenditure  CA 92821 Web Hosting  To Whom Paid DreamHost Web Hosting  Mailing Address 417 Associated Rd. 8 6 2020 \$  City Brea State Zip Code (Plus 4) Description of Expenditure  CA 92821 Web Hosting  To Whom Paid DreamHost Web Host	s 4.9!
To Whom Paid DreamHost Web Hosting  Mailing Address 417 Associated Rd.  State Zip Code (Plus 4) Description of Expenditure CA 92821 Web Hosting  To Whom Paid DreamHost Web Hosting  To Whom Paid DreamHost Web Hosting  Mo DAY YEAR  To Whom Paid DreamHost Web Hosting  Mo DAY YEAR  To Whom Paid DreamHost Web Hosting  State Zip Code (Plus 4) 9 6 2020 \$  City Brea State Zip Code (Plus 4) Description of Expenditure	
To Whom Paid DreamHost Web Hosting  Mailing Address 417 Associated Rd.  State Zip Code (Plus 4) Description of Expenditure CA 92821 Web Hosting  To Whom Paid DreamHost Web Hosting  To Whom Paid DreamHost Web Hosting  Mo DAY YEAR  YEAR  Page 1	
DreamHost Web Hosting  Mailing Address 417 Associated Rd.  State Zip Code (Plus 4) Description of Expenditure CA 92821 Web Hosting  To Whom Paid DreamHost Web Hosting  MO DAY YEAR  Provided (Plus 4) Description of Expenditure Web Hosting  MO DAY YEAR  Provided (Plus 4) Description of Expenditure Web Hosting  State Zip Code (Plus 4) Description of Expenditure  City Brea  State Zip Code (Plus 4) Description of Expenditure	
Mailing Address 417 Associated Rd.  State Zip Code (Plus 4) Description of Expenditure CA 92821 Web Hosting  To Whom Paid DreamHost Web Hosting  Mailing Address 417 Associated Rd.  City Brea State Zip Code (Plus 4) Description of Expenditure For Whom Paid DreamHost Web Hosting  Mailing Address 417 Associated Rd.  State Zip Code (Plus 4) Description of Expenditure	
City Brea State CA ST	
To Whom Paid DreamHost Web Hosting  Mailing Address 417 Associated Rd.  City Brea  CA  92821  Web Hosting  MO  DAY  YEAR  9 6 2020  \$  City Brea  State  Zip Code (Plus 4)  Description of Expenditure	6.94
To Whom Paid  DreamHost Web Hosting  Mailing Address 417 Associated Rd.  State  Mo DAY  YEAR  9 6 2020  \$ City Brea  State  Zip Code (Plus 4)  Description of Expenditure	6.94
DreamHost Web Hosting  Mailing Address 417 Associated Rd.  State Zip Code (Plus 4) Description of Expenditure	6.94
DreamHost Web Hosting  Mailing Address 417 Associated Rd.  9 6 2020  State Zip Code (Plus 4) Description of Expenditure	6.94
City Brea State Zip Code (Plus 4) Description of Expenditure	6.94
CA 92821 Web Hosting	
To Whom Paid MO DAY YEAR	
LMG Marketing Solutions	
Mailing Address         237 Court St, Suite 304A         10         19         2020         \$	1,205.00
City Reading State Zip Code (Plus 4) Description of Expenditure	
PA 19601 Website design	
To Whom Paid  MO DAY YEAR	
DreamHost Web Hosting	
Mailing Address 417 Associated Rd. 10 6 2020 *	9.9!
City Brea State Zip Code (Plus 4) Description of Expenditure	
CA 92821 Web Hosting	
To Whom Paid MO DAY YEAR	
Berks County Republican Committee	
Mailing Address8468 Allentown Pike, Suite 610132020\$	150.00
City Blandon State Zip Code (Plus 4) Description of Expenditure	
PA 19610 Dinner Ticket	
	PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.	