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 202	00109			Repo Filed			CANDI	DATE		СОМІ	MMITTEE / LOBBYIST						
Name of Filing C	Committee, Candi	date or L	obbyist:	Ī	FRIEN	DS O	FΑ	NNETTE	BAKE	R								
Street Address:	PO BOX 703																	
City:	READING						9,	State:	PA			Zip Cod	d e: 19	607-3	653			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRIMARY	PRE-	2.	30 E PRIM			POST-			AMENDMENT REPORT?		Yes	No			
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY ELECTION	PRE	- 5.	30 E		-	POST-	6. X		TERMINA REPORT		Yes	No	•	\	
report type)	ANNUAL REPORT	7.	Year 2020					G METHO				PAPER		/	DISKE	TTE		
Name of Office S	Sought by Candida	ate:	-					DATE O	F ELE	CTIC	N	District Number	Office Code	Par	ty Code	Coun		
							ı	МО	DAY	YI	AR	11	STS	REF)	06		
SENATOR IN TH	HE GENERAL ASS	SEMBLY						11		3	2020	020 (SEE INSTRUCTIONS FOR CODE						
	Receipts and	МО	DAY Y	EAR			ı	мо	DAY	Y	EAR	FO	R OFFI	CE USE	ONLY			
Expenditures	from:		10 20	20	020	то		11	:	23	2020							
A. Amount Bro	ught Forward Fro	m Last R	eport			:	\$			3,4	419.12							
B. Total Moneta	ary Contributions	And Rec	eipts (From S	che	dule I)	\$				274.00							
C. Total Funds	Available (Sum O	f Lines A	and B)				\$			3,6	593.12							
D. Total Expend	ditures (From Scl	nedule II	I)				\$			3,2	252.43							
E. Ending Cash	Balance (Subtra	t Line D	From Line C)				\$			4	40.69							
F. Value Of In-	Kind Contribution	s Receiv	ed (From Sch	edul	e II)		\$			3,9	08.33							
G. Unpaid Debt	ts And Obligation	s (From S	Schedule IV)				\$			1,0	00.00							
			A	\FF	IDA۱	'IT S	EC	TION										
PART I - If this is	s a Committee rep	ort, trea	surer sign he	re. I	f this	is a Ca	anc	didate re	port, c	andi	date sig	jn here.						
I swear (or affirm) correct and comple) that this report, in ete.	cluding the	attached sched	dules	filed o	n pape	er oı	r by electi	ronic m	edium	, are to	the best o	f my kno	wledge	and beli	ef , tru	ue	
Sworn to and subs	cribed before me th day of	is	20							S	Signature	of Perso	n Submit	ting Re	oort		-	
	Signat	ure				_						Prin	ted Name	<u> </u>			-	
My Commission Ex	-							•				Ema	il				-	
	мо	D	AY	YR					Are	ea Cod	le	Daytim	e Teleph	one Nu	mber			
Part II- If this is	a report of a car	didate's	authorized Co	omm	ittee,	Candi	ida	te shall :	sign he	ere.								
I swear (or affirm) No 320) as amende	that to the best of ed.	my knowle	edge and belief	this	politic	al com	mit	tee has n	ot viola	ted ar	y provis	ions of the	e act of J	une 3,1	937 (P.L	. 1333	3,	
Sworn to and subsc	ribed before me this	ì									s	ignature o	of Candid	ate			-	
	day of											Dui-nt-	d Name				_	
	Signature											Printe	ed Name					
My Commission Exp	_							,				Ema	il				_	
	МО	D	AY	YR					Area	Code		Da	aytime T	elephor	ne Numb	er	-	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
FRIENDS OF ANNETTE BAKER	From:	10/20/202	<u>0</u> To:	11/23/2020
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting) Period	(1)	\$	74.00
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)			\$	200.00
TOTAL for the Reporting	Period	(2)	\$	200.00
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			\$	274.00

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

	his Part to itemize onl with an aggregate val	-			-			
Name of Filing Comm	ittee or Candidate		Re	porting	Period			
			From:			То:		
		1			DATE			AMOUNT
Full Name of Contribution	ng Committee			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

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 C	ommittee or Candidat	e		Repo	rting Pe	eriod				
FRIENDS OF AN	NETTE BAKER			From	:	10/20/2	<u>2020</u> To) :	: <u>11/23/2020</u>	
					I	DATE			AMOUNT	
Full Name of Contr Nancy Seeger	ibutor				мо	DAY	YEAR			
Mailing Address	89 Magnolia Dr				1.0		2020	\$	100.00	
City Leola		State PA	Zip Code (Plus 4) 17540		10	21	2020			
Full Name of Contr Victoria Solberg	ibutor				мо	DAY	YEAR			
Mailing Address	317 Sofia Blvd.					0.0	2020	\$	100.00	
City Blandon		State PA	Zip Code (Plus 4) 19510		11	23	2020			
		1 ' ' '	1 13310	1			ı	ı		

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

PAGE TOTAL \$ 200.00

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 Candi	date		Reporting Period					
			From:			То:		
				DA	TE		Α	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on S	Schedule I, Detail	ed 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	orting Pe	riod			
				Fror	n:		To):	
					D	ATE		AI	MOUNT
Full Name of Contributor					мо	DAY	YEAR		
lailing ddress ity State Zip Code (Plus 4)							\$	0.00	
City	State	Zip Cod	de (Plus	s 4)					
Employer Name	•				Occupa	tion			
Employer Mailing Address/Principal Pla Business	ice of	Ci	ty			State		Zip Cod	e (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detailed S	Summary	Page,	Section	on 3.			P \$	AGE 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		Report	ing Perio	od			
			From:			To:		
				D	ATE			AMOUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	·	·					•	
Enter Grand Total of Part E	on Schedule I. Detailed	d Summary Page	Section	4			ı	PAGE TOTAL
	Journal 1, Betailet	a cannual y 1 age,	200011	••			\$	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 Per	od	
FRIENDS OF ANNETTE BAKER	From:	<u>10/20/2020</u> To:	11/23/2020
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTO	R	
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)	\$	3,908.33
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,		\$	3,908.33

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candid	ate		Reportin	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 Sun	nmary Pag	je,		PAGE TOTAL
Section 2.						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Car	ndidate				Re	porting P	eriod						
FRIENDS OF ANNETTE BAKER					Fro	om:	10/20/20	<u>20</u> To :	11/23/2020				
							DATE		AMOUNT				
Full Name of Contributor						мо	DAY	YEAR					
William White Political													
Mailing Address 500 Walnut F	Rd.								\$ 2,858.33				
City Birdsboro	State		Zip Code(Plus 4)		11	5	2020					
Bildsbolo	PA		19508										
Employer of Contributor The	Works					Occupat	ion	Self Empl	f Employed/Owner				
Employer Mailing Address/Principal Place of Business				Zip (Code(Plus	Descri	ption of Contribution						
1109 Bern Rd		Wyom	issing	PA		196	10	Billboa	rds				
Full Name of Contributor William White Political						мо	DAY	YEAR					
Mailing Address 500 Walnut F	Rd.								\$ 1,050.00				
City Birdsboro	State		Zip Code(Plus 4)		11	5	2020					
	PA		19508										
Employer of Contributor The	Works		•			Occupat	ion	Self Empl	oyed/Owner				
Employer Mailing Address/Princi Business	Employer Mailing Address/Principal Place of City			State		Zip (Code(Plus	Descri	ption of Contribution				
1109 Bern Rd		Wyom	issing	PA	PA 19610 Billboard				rd				
Enter Grand Total of Part G	on Schedule IT.	In-Kind	Contribut	ions De	taile	ed			PAGE TOTAL				
Summary Page, Section 3.									3,908.33				

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period			
FRIENDS OF ANNETTE BAKER	From	10/20/2020	То:	11/23/2020

				DATE			AMOUNT
To Whom Paid Facebook			мо	DAY	YEAR		
Mailing Address 1 Hacker Wa	ay .		10	21	2020	\$	75.00
City Menlo Park	State CA	Zip Code (Plus 4) 94025	Descrip Adverti	otion of Exp	penditure		
To Whom Paid Facebook			МО	DAY	YEAR		
Mailing Address 1 Hacker Wa	ay		10	25	2020	\$	75.00
City Menlo Park State Zip Code (Plus 4) CA 94025				otion of Exp	penditure		
To Whom Paid Facebook			МО	DAY	YEAR		
Mailing Address 1 Hacker Wa	ay		10	27	2020	\$	125.00
City Menlo Park	State CA	Zip Code (Plus 4) 94025	Descrip Adverti	otion of Exp sing	penditure		
To Whom Paid Facebook	·	·	МО	DAY	YEAR		
Mailing Address 1 Hacker Wa	ay		10	29	2020	\$	175.00
City Menlo Park	State CA	Zip Code (Plus 4) 94025	Descrip Adverti	otion of Exp	penditure		
To Whom Paid Facebook			МО	DAY	YEAR		
Mailing Address 1 Hacker Wa	ау		11	2	2020	\$	250.00
City Menlo Park	State CA	Zip Code (Plus 4) 94025	Description of Expenditure Advertising				
		I	•				

							PAGE 12	
To Whom Paid Facebook				DAY	YEAR			
Mailing Address 1 Hacker Way			11	3	2020	\$	68.42	
City Menlo Park	State CA	Zip Code (Plus 4) 94025	Description of Expenditure Advertising					
To Whom Paid Vistaprint				DAY	YEAR			
Mailing Address 95 Hayden Ave			10	24	2020	\$	217.71	
City Lexington	State MA	Zip Code (Plus 4) 02421	Description of Expenditure Flyers					
To Whom Paid Lamar Advertising			МО	DAY	YEAR			
Mailing Address 600 E. Neversink Rd.			10	29	2020	\$	1,200.00	
City Reading	State PA	Zip Code (Plus 4) 19606	Description of Expenditure Advertising					
To Whom Paid Loud 99.3			мо	DAY	YEAR			
Mailing Address 435 N. Main St			10	27	2020	\$	1,062.00	
City Allentown	State PA	Zip Code (Plus 4) 18104	Description of Expenditure Advertising					
To Whom Paid Anedot, LLC			МО	DAY	YEAR			
Mailing Address 450 Laurel St, Suite 2105			10	21	2020	\$	4.30	
City Baton Rouge	State LA	Zip Code (Plus 4) 70801	Description of Expenditure Fees					
Enter Grand Total of Exper	nditures on Page 1. Pe	nort Cover Page Item D					PAGE TOTAL	
Enter Grand Total Of Exper	iditales on Page 1, Re	port cover rage, Item D	•			\$	3,252.43	

STATEMENT OF UNPAID DEBTS

Use this Section to itemize all unpaid debts and obligations which are outstanding at the end of the reporting period

Name of Filing Committee or Candidate			Reporting Period						
FRIENDS OF ANNETTE BAKER			From:	<u>10/20/2020</u> To:				11/23/2020	
					DATE			Outstanding Balance of Debt	
Name of Creditor Annette C. Baker				МО	DAY	YEAR			
Mailing Address 15 Glennola Dr				10	19	2020	\$	1,000.00	
City Mohnton	State PA	Zip Code (Plu 19540	ıs 4)	Description of Debt					
Futor Count Tatal of Hamaid Bald	D 1 D		T	_				PAGE TOTAL	
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							\$	1,000.00	