

# Campaign Finance Report

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

<b>Filer Identification Number :</b> 2005279		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>			
<b>Name of Filing Committee, Candidate or Lobbyist:</b> BAKER, ELISABETH FOR SENATE											
<b>Street Address:</b> 1041 MOUNTAIN VIEW DR,PO BOX 59											
<b>City:</b> LEHMAN				<b>State:</b> PA		<b>Zip Code:</b> 18627-0059					
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	<input checked="" type="checkbox"/> No		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7. X	Year 2020	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>			
<b>Name of Office Sought by Candidate:</b>					<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
					<b>MO</b>	<b>DAY</b>	<b>YEAR</b>				
					11	3	2020				
<b>Summary of Receipts and Expenditures from:</b>					<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
					11	24	2020				<b>TO</b>
					12	31	2020				
<b>A. Amount Brought Forward From Last Report</b>					\$ 103,845.80						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>					\$ 0.00						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>					\$ 103,845.80						
<b>D. Total Expenditures (From Schedule III)</b>					\$ 4,501.54						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>					\$ 99,344.26						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>					\$ 0.00						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>					\$ 0.00						

## AFFIDAVIT SECTION

**PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.**

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.**

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3,1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
Detailed Summary Page

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
BAKER, ELISABETH FOR SENATE	From: <u>11/24/2020</u> To: <u>12/31/2020</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 0.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 0.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 0.00
<b>All Other Contributions (Part D)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 0.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)</b>	\$ 0.00
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

<b>PAGE TOTAL</b>	
\$	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:	To:

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

<b>PAGE TOTAL</b>
\$ 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: <span style="float: right;">To:</span>

				DATE	AMOUNT		
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					
Employer Name				Occupation			
Employer Mailing Address/Principal Place of Business			City	State	Zip Code (Plus 4)		

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

<b>PAGE TOTAL</b>
\$ 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	Reporting Period  From: <span style="float: right;">To:</span>
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			DATE			AMOUNT
Full Name			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Receipt Description						

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

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
BAKER, ELISABETH FOR SENATE		From: <u>11/24/2020</u> To: <u>12/31/2020</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period (1)		\$	0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period (2)		\$	0.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period (3)		\$	0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)		\$	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
	From: <span style="float: right;">To:</span>

				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
Mailing Address							\$ 0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:							
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.							<b>PAGE TOTAL</b> \$ 0.00

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

Name of Filing Committee or Candidate	Reporting Period
	From: To:

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)		Description of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

# SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
BAKER, ELISABETH FOR SENATE	From <u>11/24/2020</u> To: <u>12/31/2020</u>

DATE				AMOUNT		
To Whom Paid Elisabeth Baker			MO	DAY	YEAR	\$ 346.32
Mailing Address PO Box 59			12	1	2020	
City Lehman	State PA	Zip Code (Plus 4) 18627	Description of Expenditure Supplies			
To Whom Paid Senator Joe Pittman			MO	DAY	YEAR	\$ 100.00
Mailing Address 281 Main Capitol			12	1	2020	
City Harrisburg	State PA	Zip Code (Plus 4) 17120	Description of Expenditure Donation			
To Whom Paid Rail-Trail Council of Northeast PA			MO	DAY	YEAR	\$ 35.00
Mailing Address PO BOx 32			12	1	2020	
City Uniondale	State PA	Zip Code (Plus 4) 18470	Description of Expenditure Membership Dues			
To Whom Paid Back Mountain Regional EMS			MO	DAY	YEAR	\$ 100.00
Mailing Address PO Box 41			12	1	2020	
City Dallas	State PA	Zip Code (Plus 4) 18612	Description of Expenditure Donation			
To Whom Paid Friends of Salt Springs			MO	DAY	YEAR	\$ 50.00
Mailing Address PO Box 541			12	1	2020	
City Montrose	State PA	Zip Code (Plus 4) 18801	Description of Expenditure Membership Dues			

To Whom Paid Misericordia University			MO	DAY	YEAR	\$ 100.00
Mailing Address 301 Lake Street			12	1	2020	
City Dallas	State PA	Zip Code (Plus 4) 18612	Description of Expenditure Donation			

To Whom Paid Wyoming County Chamber of Commerce			MO	DAY	YEAR	\$ 165.00
Mailing Address 79 Warren Street			12	8	2020	
City Tunkhannock	State PA	Zip Code (Plus 4) 18657	Description of Expenditure Membership Dues			

To Whom Paid DAA Consulting			MO	DAY	YEAR	\$ 1,000.00
Mailing Address 2024 Rock Fall Road			12	8	2020	
City Harrisburg	State PA	Zip Code (Plus 4) 17110	Description of Expenditure Consulting Services			

To Whom Paid Jennifer Wilson			MO	DAY	YEAR	\$ 550.04
Mailing Address 1456 Chase Road			12	8	2020	
City Shavertown	State PA	Zip Code (Plus 4) 18708	Description of Expenditure Cell Phone/Supplies			

To Whom Paid VanGorder's Furniture			MO	DAY	YEAR	\$ 529.47
Mailing Address 2561 Route 6			12	8	2020	
City Hawley	State PA	Zip Code (Plus 4) 18428	Description of Expenditure Promotional Items			

To Whom Paid Heather Kukosky			MO	DAY	YEAR	\$ 200.00
Mailing Address 1069 Mountain View Drive			12	11	2020	
City Dallas	State PA	Zip Code (Plus 4) 18612	Description of Expenditure Cell Phone			

To Whom Paid Paper Eaters			MO	DAY	YEAR	\$ 195.00
Mailing Address PO Box 25			12	11	2020	
City Wilkes Barre	State PA	Zip Code (Plus 4) 18703	Description of Expenditure Shredding			
To Whom Paid Susan Slocum			MO	DAY	YEAR	\$ 40.80
Mailing Address 542 Valley View Road			12	11	2020	
City Dallas	State PA	Zip Code (Plus 4) 18612	Description of Expenditure Supplies			
To Whom Paid Elisabeth Baker			MO	DAY	YEAR	\$ 294.32
Mailing Address PO Box 59			12	11	2020	
City Lehman	State PA	Zip Code (Plus 4) 18627	Description of Expenditure Lunch Meetings			
To Whom Paid Hershey Food Pantry			MO	DAY	YEAR	\$ 100.00
Mailing Address 120 East Derry Road			12	11	2020	
City Hershey	State PA	Zip Code (Plus 4) 17033	Description of Expenditure Condolence			
To Whom Paid Honesdale Friends of Wrestling			MO	DAY	YEAR	\$ 75.00
Mailing Address 23 Fords Road			12	18	2020	
City Honesdale	State PA	Zip Code (Plus 4) 18431	Description of Expenditure Advertisement			
To Whom Paid Wyoming Seminary			MO	DAY	YEAR	\$ 500.00
Mailing Address 201 North Sprague Avenue			12	29	2020	
City Kingston	State PA	Zip Code (Plus 4) 18704	Description of Expenditure Donation			

<b>To Whom Paid</b> Luzerne Bank			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	
<b>Mailing Address</b> 118 Main Street			12	1	2020	
<b>City</b> Luzerne	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 18709	<b>Description of Expenditure</b> Checks			
<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b> \$ 4,501.54

