

Campaign Finance Report

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

Filer Identification Number : 2005279		Report Filed By :	CANDIDATE	COMMITTEE <input checked="" type="checkbox"/>	LOBBYIST					
Name of Filing Committee, Candidate or Lobbyist: BAKER, ELISABETH FOR SENATE										
Street Address: 1041 MOUNTAIN VIEW DR,PO BOX 59										
City: LEHMAN			State: PA	Zip Code: 18627-0059						
TYPE OF REPORT (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	No	<input checked="" type="checkbox"/>
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>
	ANNUAL REPORT	7.	Year 2023	FILING METHOD () CHECK ONE		PAPER <input checked="" type="checkbox"/>		DISKETTE		
Name of Office Sought by Candidate:				DATE OF ELECTION			District Number	Office Code	Party Code	County Code
				MO	DAY	YEAR	40			
				1	31	2023	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY	
		1	17	2023	TO	2	10	2023		
A. Amount Brought Forward From Last Report				\$		120,548.67				
B. Total Monetary Contributions And Receipts (From Schedule I)				\$		714.33				
C. Total Funds Available (Sum Of Lines A and B)				\$		121,263.00				
D. Total Expenditures (From Schedule III)				\$		8,220.36				
E. Ending Cash Balance (Subtract Line D From Line C)				\$		113,042.64				
F. Value Of In-Kind Contributions Received (From Schedule II)				\$		0.00				
G. Unpaid Debts And Obligations (From Schedule IV)				\$		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
 My Commission Expires _____
 MO DAY YR

 Signature of Person Submitting Report

 Printed Name

 Email

 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
 My Commission Expires _____
 MO DAY YR

 Signature of Candidate

 Printed Name

 Email

 Area Code Daytime Telephone Number

SCHEDULE I
CONTRIBUTIONS AND RECEIPTS
Detailed Summary Page

Name of Filing Committee or Candidate	Reporting Period
BAKER, ELISABETH FOR SENATE	From: <u>1/17/2023</u> To: <u>2/10/2023</u>

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)	\$ 214.33
All Other Contributions (Part B)	\$ 0.00
TOTAL for the Reporting Period (2)	\$ 214.33

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 500.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 500.00

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 and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)	\$ 714.33
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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
BAKER, ELISABETH FOR SENATE	From: <u>1/17/2023</u> To: <u>2/10/2023</u>
DATE	AMOUNT

Full Name of Contributing Committee	MO	DAY	YEAR	
Citizens for Good Government				
Mailing Address 60 Public Square				\$ 214.33
City Wilkes-Barre	2	10	2023	
State PA				
Zip Code (Plus 4) 18701				

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

PAGE TOTAL
\$ 214.33

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 Candidate	Reporting Period
	From: _____ To: _____

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

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 BAKER, ELISABETH FOR SENATE	Reporting Period From: <u>1/17/2023</u> To: <u>2/10/2023</u>
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	DATE			AMOUNT
Full Name of Contributing Committee	MO	DAY	YEAR	
DT MIDSTREAM HOLDINGS LLC PAC				
Mailing Address 500 WOODWARD AVE SUITE 2900				\$ 500.00
City DETROIT	2	6	2023	
State MI				
Zip Code (Plus 4) 48226-1221				

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

PAGE TOTAL
\$ 500.00

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: To:

	DATE			AMOUNT
Full Name of Contributor	MO	DAY	YEAR	
Mailing Address				\$ 0.00
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.

PAGE TOTAL
\$ 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: _____ To: _____

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

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

PAGE TOTAL
\$ 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 BAKER, ELISABETH FOR SENATE	Reporting Period From: <u>1/17/2023</u> To: <u>2/10/2023</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR	
TOTAL for the Reporting Period (1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)	
TOTAL for the Reporting Period (2)	\$ 0.00
3. IN-KIND CONTRIBUTION RECEIVED - VALUE OVER \$250.00 (FROM PART G)	
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: _____ To: _____

			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.				PAGE TOTAL \$ 0.00

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

Name of Filing Committee or Candidate	Reporting Period From: _____ To: _____
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				DATE	AMOUNT
Full Name of Contributor	MO	DAY	YEAR		
Mailing Address				\$	0.00
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

Name of Filing Committee or Candidate	Reporting Period
BAKER, ELISABETH FOR SENATE	From <u>1/17/2023</u> To: <u>2/10/2023</u>

			DATE	AMOUNT
To Whom Paid	MO	DAY	YEAR	
Elisabeth Baker	1	17	2023	\$ 827.14
Mailing Address PO Box 59				
City Lehman	State PA	Zip Code (Plus 4) 18627	Description of Expenditure Cell Phone/Event Expenses	
To Whom Paid Brace's Orchard	1	17	2023	\$ 1,066.00
Mailing Address 444 Brace Road				
City Dallas	State PA	Zip Code (Plus 4) 18612	Description of Expenditure Promotional Items	
To Whom Paid PCCRW	1	25	2023	\$ 40.00
Mailing Address PO Box 98				
City Milford	State PA	Zip Code (Plus 4) 18337	Description of Expenditure Membership Dues	
To Whom Paid Verizon	1	25	2023	\$ 198.50
Mailing Address PO Box 16810				
City Newark	State NJ	Zip Code (Plus 4) 07101	Description of Expenditure Cell Phone	
To Whom Paid Plymouth Alive	1	25	2023	\$ 250.00
Mailing Address PO Box 83				
City Plymouth	State PA	Zip Code (Plus 4) 18657	Description of Expenditure Donation	

To Whom Paid Northwest Area Little League			MO	DAY	YEAR	
Mailing Address PO Box 192			1	27	2023	
City Hunlock Creek	State PA	Zip Code (Plus 4) 18621	Description of Expenditure Donation			
To Whom Paid WCCC/Dietrich Theater			MO	DAY	YEAR	
Mailing Address 60 E Tioga Street			1	27	2023	
City Tunkhannock	State PA	Zip Code (Plus 4) 18657	Description of Expenditure Advertisement			
To Whom Paid Minuteman Press			MO	DAY	YEAR	
Mailing Address 488 Market Street			1	27	2023	
City Kingston	State PA	Zip Code (Plus 4) 18704	Description of Expenditure Stationary			
To Whom Paid Wilderflowers			MO	DAY	YEAR	
Mailing Address 347 Conyngham Drive			1	27	2023	
City Shavertown	State PA	Zip Code (Plus 4) 18708	Description of Expenditure Event Expenses			
To Whom Paid Chamber of the Northern Poconos			MO	DAY	YEAR	
Mailing Address 2512 Route 6 Ste 2			1	27	2023	
City Hawley	State PA	Zip Code (Plus 4) 18428	Description of Expenditure Event Tickets			
To Whom Paid Minuteman Press			MO	DAY	YEAR	
Mailing Address 488 Market Street			2	1	2023	
City Kingston	State PA	Zip Code (Plus 4) 18704	Description of Expenditure Stationary			

To Whom Paid NWTF Red Rock Chapter			MO	DAY	YEAR	
Mailing Address 76 Chittenden Street			2	1	2023	
City Duryea	State PA	Zip Code (Plus 4) 18642	Description of Expenditure Event Tickets			
To Whom Paid Jennifer Wilson			MO	DAY	YEAR	
Mailing Address 1456 Chase Road			2	9	2023	
City Shavertown	State PA	Zip Code (Plus 4) 18708	Description of Expenditure Cell Phone/Meetings			
To Whom Paid DAA Consulting			MO	DAY	YEAR	
Mailing Address 2024 Rock Fall Road			2	9	2023	
City Harrisburg	State PA	Zip Code (Plus 4) 17110	Description of Expenditure Consulting Services			
To Whom Paid KSB Consulting Group LLC			MO	DAY	YEAR	
Mailing Address 2052 North Autumn Chase Drive			2	9	2023	
City Mechanicsburg	State PA	Zip Code (Plus 4) 17055	Description of Expenditure Consulting Services			
To Whom Paid Thomas Williams			MO	DAY	YEAR	
Mailing Address 32 Shady Tree Drive			2	9	2023	
City Mountain Top	State PA	Zip Code (Plus 4) 18707	Description of Expenditure Cell Phone			
To Whom Paid Mark Grochocki			MO	DAY	YEAR	
Mailing Address 29 Old Mill Road			2	9	2023	
City Laflin	State PA	Zip Code (Plus 4) 18702	Description of Expenditure Lunch Meeting			

To Whom Paid Family Service Association			MO	DAY	YEAR	
Mailing Address 31 West Market Street			2	9	2023	
City Wilkes-Barre	State PA	Zip Code (Plus 4) 18701	Description of Expenditure Sponsorship			
To Whom Paid Center for Developmental Disabilities			MO	DAY	YEAR	
Mailing Address 101 Pocono Drive			2	9	2023	
City Milford	State PA	Zip Code (Plus 4) 18337	Description of Expenditure Sponsorship			
To Whom Paid Susquehanna County Republican Committee			MO	DAY	YEAR	
Mailing Address 171 Foolish Pleasure Road			2	9	2023	
City Friendsville	State PA	Zip Code (Plus 4) 18818	Description of Expenditure Event Tickets			
To Whom Paid Greater Forest City Business Association			MO	DAY	YEAR	
Mailing Address PO Box 155			2	9	2023	
City Forest City	State PA	Zip Code (Plus 4) 18421	Description of Expenditure Donation			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 8,220.36

