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	2014c	:0859				Repoi Filed	_	CA	NDI	DATE	√	′ c	OMMITTE	E	LOB	BYIST		
Name of Filing C	ommittee, Ca	andida	te or Lo	obbyis	t:	K	RUEG	ER-BI	RANE	(Y,LI	EANNE	T							
Street Address:																			
City:									State:				Zip Cod	Zip Code: 19081					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		1.	2ND F PRIMA		PRE-	2.	30 D PRIM		Р	POST- 3. X			AMENDM REPORT	Yes	N	lo	√	
(place X to the right of	6TH TUESDAY PRE-ELECTION		4.	2ND F ELECT		PRE-	5.	30 D ELEC	AY TION	Р	OST-	6.		TERMINA REPORT		Yes	Ν	lo	>
report type)	ANNUAL REP	PORT	7.	Year 2	2014 FILING () CI					ETHOD K ONE				PAPER		\	DISK	ETTE	
Name of Office Sought by Candidate:						DAT	ΈO	F ELE	СТІ	ON	District Number	Office Code	Pai	rty Cod	e Coui				
DEDDECENTATIVE IN THE CENEDAL ACCEMBLY							МО		DAY	•	YEAR	161	STH	DEI	М	23			
REPRESENTATIVE IN THE GENERAL ASSEMBLY								11		4	2014		(SEE IN	STRUCTI	ONS FO	R CODES	5)		
Summary of Receipts and MO DAY YEAR								МО		DAY	1	YEAR	FC	R OFFI	CE USE	ONL	′		
Expenditures	trom:			5	6	20	14	ГО		6		9	2014	1					
A. Amount Bro	ught Forward	l From	Last R	eport				\$	1			(1,	553.35)						
B. Total Monetary Contributions And Receipts (From Schedule I)							\$	5		1,078.60									
C. Total Funds Available (Sum Of Lines A and B)							\$	5			(474.75)							
D. Total Expenditures (From Schedule III)						\$	5				567.46								
E. Ending Cash Balance (Subtract Line D From Line C)						\$	5			(1,0	042.21)								
F. Value Of In-	Kind Contribu	ıtions	Receive	ed (Fro	om Sc	hedule	e II)	\$	5				0.00						
G. Unpaid Debt	s And Obligat	tions (From S	chedu	le IV))		\$	5				0.00						
						AFFI	DAV	IT SE	CTI	NC									
PART I - If this is	a Committee	e repo	rt, trea	surer s	sign h	ere. If	this i	s a Ca	ndida	te re	port, o	cano	didate si	gn here.					
I swear (or affirm) correct and comple		rt, inclu	iding the	attach	ed sch	edules	filed or	paper	or by	electi	onic m	ediu	m, are to	the best o	f my kno	wledge	and be	lief , tr	rue
Sworn to and subs	cribed before m	ne this		20									Signatu	e of Perso	n Submit	ting Re	port		_
	Sig	gnature	e					<u>-</u>						Prin	ted Name	•			
My Commission Ex	rpires							_		•				Ema	il				
	МО		D#	AY		YR					Are	ea C	ode	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report of a	candi	idate's	author	rized (Commi	ittee,	Candio	late s	hall	sign he	ere.							
I swear (or affirm) No 320) as amende		st of my	y knowle	edge an	d belie	f this p	oolitica	l comn	nittee l	nas no	ot viola	ted a	any provi	sions of th	e act of J	une 3,1	937 (P	.L. 133	з,
Sworn to and subsc		e this		25									:	Signature o	of Candid	ate			_
	day of —— ——			_ 20 _				_						Printe	d Name				-
	Signa	iture						_											_
My Commission Exp	ires													Ema	il				
	м	0	DA	AY		YR		_			Area	Cod	e	D	aytime T	elephoi	ne Num	ber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

	_			
Name of Filing Committee or Candidate	Reporting	Period		
KRUEGER-BRANEKY,LEANNE T	From:	5/6/201	<u>4</u> То:	<u>6/9/2014</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)			\$	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)			\$	1,078.60
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting) Period	(3)	\$	1,078.60
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			\$	1,078.60

PART A

CONTRIBUTIONS RECEIVED FROM POLITICAL COMMITTEES

\$50.01 TO \$250.00

Name of Filing Committee or Candidate			Reporti	ng Period			
			From:		То	:	
		L		DATE			AMOUNT
Full Name of Contributin	g Committee		МС	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					

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 Filling Committee of Candidate			Rep	Reporting Period					
			Fro	m:		To):		
					DATE		АМ	OUNT	
Full Name of Contributor				МО	DAY	YEAR			
Mailing Address							\$	0.00	
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	Reporting Per			
KRUEGER-BRANEKY,LEANNE T	From:	5/6/2014	То:	6/9/2014

DATE AMOUNT

Full Name of Contributing Committee Committee to Elect Leanne Krueger-Bra	МО	DAY	YEAR			
Mailing Address PO Box 22						\$ 1,078.60
City Swarthmore	State PA	Zip Code (Plus 4) 19081	5	8	2014	

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

PAGE TOTAL 1,078.60

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 Re				Reporting Period					
		Fron	m: To:						
			D/	ATE		АМО	UNT		
			МО	DAY	YEAR				
Mailing Address						\$	0.00		
State	Zip Code (Plus	s 4)							
			Occupation						
e of	City			State		Zip Code (Plus 4)		
lule I, Detailed Su	ımmary Page,	Section	on 3.		4		E TOTAL 0.00		
	e of	e of City	State Zip Code (Plus 4)	State Zip Code (Plus 4) Occupat	State Zip Code (Plus 4) Occupation Octobroad Octobro	State Zip Code (Plus 4) Occupation Occupation Olivy State State Output Date Occupation Output Output	DATE AMO MO DAY YEAR \$ State Zip Code (Plus 4) Occupation Occupation PAG		

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 Car	ndidate		Report	Reporting Period					
			From:			To:			
				D	ATE		А	MOUNT	
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 T. Detailed	d Summary Page	Section	4			P	AGE TOTAL	
	2, 200 0000		22300				\$	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 Period								
KRUEGER-BRANEKY,LEANNE T	From:	<u>5/6/2014</u> To:	6/9/2014						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER 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 Candid	ate		Reporting Period					
			From:			То:		
				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	ле Г		PAGE TOTAL	
Section 2.	incudic 11, 111 Kii	ia contributions beta	nea Sam	illial y I as	,		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:		То:				
						DATE			AMOUNT		
Full Name of Contributor					мо	DAY	YEAR				
Mailing Address								\$	0.00		
City	State		Zip Code(Plus	4)							
Employer of Contributor					Occupa	ation					
Employer Mailing Address/Principal Plad Business	ce of	City	Sta	ite	Zip 4)	Code(Plus	Descri	ption	of Contribution		
Enter Grand Total of Part G on Sch	edule II, I	n-Kind	Contributions	Deta	ailed				PAGE TOTAL		
Summary Page, Section 3.									0.00		

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Repo	Reporting Period				
KRUEGER-BRANEKY,LEANNE T	From	<u>5/</u>	6/2014	То:	6/9/2014	
		DATE			AMOUNT	

To Whom Paid NGP VAN, Inc.			МО	DAY	YEAR		
Mailing Address 1101 15th Street, NW, Suite 500		5	6	2014	\$	235.00	
City Washington	State DC	Zip Code (Plus 4) 20005	Description of Expenditure Database				
To Whom Paid 19th & Arch Street Garade			мо	DAY	YEAR		
Mailing Address 100 N. 19th Street			5	8	2014	\$	23.00
City Philadelphia	State PA	Zip Code (Plus 4) 19103	Description of Expenditure Parking				
To Whom Paid Patriot Parking			МО	DAY	YEAR		
Mailing Address 2040 Market Street		5	23	2014	\$	18.00	
City Philadelphia	State PA	Zip Code (Plus 4) 19103	Description of Expenditure Parking				
To Whom Paid NGP VAN, Inc.		МО	DAY	YEAR			
Mailing Address 1101 15th Street, NW, Suite 500		6	3	2014	\$	235.00	
City Washington	State DC	Zip Code (Plus 4) 20005	Descrip Databa	otion of Exp se	enditure		
To Whom Paid Parkway Corporation		МО	DAY	YEAR			
Mailing Address 1845 Walnut Street	Mailing Address 1845 Walnut Street		6	4	2014	\$	18.00
City Philadelphia	State PA	Zip Code (Plus 4) 19103	Descrip Parking	tion of Exp	enditure		

To Whom Paid Staples			мо	DAY	YEAR	
Mailing Address 751 Sproul Road		6	5	2014	\$ 38.46	
City Springfield	State PA	Zip Code (Plus 4) 19064	1	otion of Exp supplies	penditure	
Enter Grand Total of Expe	nditures on Page 1, Re	port Cover Page, Item D				\$ PAGE TOTAL 567.46