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				Report Filed B		CA	NDII	DATE	\	CC	OMMITTEE		LOB	BYIS [.]	Г	
Name of Filing C	ommittee, Ca	ndidat	te or Lo	bbyist	t:	K	RUEGE	R-BR	ANE	(Y,LE	EANNE	Т							
Street Address:																			
City:									State	e:				Zip Cod	e: 19	9081			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1	l.	2ND FI PRIMA		PRE-	2.	30 DA		Р	OST-	3.		AMENDMENT REPORT?		Yes]	No	\
(place X to the right of	6TH TUESDAY PRE-ELECTION		1.	2ND FI		PRE-	5.	30 DA		Р	OST-	6.		TERMINATION REPORT?		Yes		No	/
report type)	ANNUAL REP	ORT 7	7. X	Year 2	2014				NG ME					PAPER		V	DIS	KETTE	
Name of Office S	ought by Can	didate	·····				•		DAT	ΕO	F ELE	СТІ	ON	District Number	Office Code	Pai	rty Co	de Cou Cod	
									МО		DAY	1	YEAR	161	STH	DEI	М	23	
REPRESENTATI	VE IN THE GE	∃NERA	AL ASSI	EMBLY	,					11		4	2014	(SEE INSTRUCTIONS FOR CODES					S)
Summary of		d	МО	DAY	Y	YEAR			МО		DAY	,	YEAR	FOI	ROFFI	CE USE	ONL	Υ	
Expenditures	from:		1	11	25	20	14 T	0		12		31	2014						
A. Amount Bro	ught Forward	From	Last Re	eport				\$				(1,	354.69)						
B. Total Moneta	ary Contribution	ons Ar	nd Rece	eipts (From	Sched	ule I)	\$					0.00						
C. Total Funds	Available (Sui	m Of L	ines A	and B)			\$				(1,	354.69)						
D. Total Expenditures (From Schedule III) \$ 235.0							235.00												
E. Ending Cash Balance (Subtract Line D From Line C) \$ (1,589.69)							589.69)	_											
F. Value Of In-	Kind Contribut	tions I	Receive	ed (Fro	om Sc	hedule	e II)	\$					0.00						
G. Unpaid Debt	s And Obligat	ions (From S	chedu	le IV)		\$					0.00						
						AFFI	DAVI	T SE	CTI	NC									
PART I - If this is		-	•								•								
I swear (or affirm) correct and comple		t, inclu	ding the	attach	ed sch	edules	filed on	paper	or by	electr	onic m	ediu	m, are to	the best of	my kno	wledge	and b	elief , t	rue
Sworn to and subs	cribed before me day of	e this		20									Signatur	e of Person	Submit	ting Re	port		_
	- ———	nature	1	-				- -						Printe	ed Name	•			_
My Commission Ex	xpires	•						_		•				Email					_
	МО		DA	λY		YR					Arc	ea C	ode	Daytime	Teleph	one Nu	mber		
Part II- If this is	a report of a	candi	date's a	author	ized (Commi	ittee, C	andid	ate s	hall	sign he	ere.							
I swear (or affirm) No 320) as amende		t of my	knowle	dge and	d belie	ef this p	oolitical	comm	ittee l	nas no	ot viola	ted a	any provis	ions of the	act of J	une 3,1	937 (1	P.L. 133	33,
Sworn to and subsc		this											S	ignature of	Candid	ate			-
	day of —							-						Printed	l Name				-
	Signat	ture						-						Email					_
My Commission Exp	ires													Email					
	мо)	DA	λY		YR		-			Area	Code	e	Da	ytime T	elephor	ne Nur	nber	_

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reporting	g Period		
KRUEGER-BRANEKY,LEANNE T	From:	11/25/2014	<u>4</u> То:	12/31/2014
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 ar 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 Candidat	e		Reporting Period					
			From:		То	<u>:</u>		
				DATE			AMOUNT	
Full Name of Contributing Committee			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 Committ	ee or Candidate		Rep	orting P	eriod			
			Fro	m:		Т):	
		I			DATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						
					-			DAGE TOTAL

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 Candidate			Reporting	Period					
			From:			То:			
				DA	TE		P	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			0.00
Mailing Address							- \$		0.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTA	AL
Enter Grand Total of Part C on Sche	dule I, Detailed Sun	nmary P	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			
			Fron	n:		To):	
				D	ATE			AMOUNT
Full Name of Contributor				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plus	s 4)					
Employer Name				Occupa	tion			
Employer Mailing Address/Principal Plac	ce of Business	City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sche	dule I, Detailed Su	ımmary Page,	Section	on 3.			\$	PAGE 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 Peri	od			
			From:			To:		
		'			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	'						<u> </u>	
	- C		. .:	_				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 Period					
KRUEGER-BRANEKY,LEANNE T	From:	<u>11/25/2014</u> To:	<u>12/31/2014</u>			
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	PER 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	TF)					
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 Candidate	me of Filing Committee or Candidate			Reporting 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 Sche Section 2.	dule II, In-Kind (Contributions Detai	iled Sum	mary Pag	je,		PAGE TOTAL	
						\$	(0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Rep	porting	Period			
				Fro	m:		То:		
						DATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR		
Mailing Address				-				\$	0.00
City	State		Zip Code(Plus 4)						
Employer of Contributor					Occup	ation			
Employer Mailing Address/Principal Plac	e of Business	City	у	State	e Zip	Code(Plus 4)	Descri	ption	of Contribution
Enter Grand Total of Part G on Sch	edule II, In-Kin	nd C	Contributions D	etaile	ed				PAGE TOTAL
Summary Page, Section 3.									0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period				
KRUEGER-BRANEKY,LEANNE T	From	11/25/2014	То:	12/31/2014	

				DATE			AMOUNT
To Whom Paid NGP VAN, Inc.			мо	DAY	YEAR		
Mailing Address 1101 15th Street, NW, Suite 500			12	1	2014	\$	235.00
City Washington	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
	DC	20005	D				
							PAGE TOTAL
nter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.							235.00