Campaign Finance Report

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

Filer Identificat	ion 2014	c0859			Repo			CANDI	DATE	√	СС	OMMITTE	E	LOB	BYIST	Ē	
Number :					Filed					· -							
Name of Filing G	Committee, Candid	ate or L	obbyist:		KRUE	JEK-	-BR	ANEKY,L	EANNE	: 1							
Street Address:																	
City:								State:				Zip Code: 19081					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE	- 2.) DA RIMA					AMENDMENT REPORT?		Yes	No	C	\checkmark
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRI	E- 5.) da .ect		POST- 6.			TERMINATION REPORT?		Yes	No	C	\checkmark
report type)	ANNUAL REPORT	7. X	Year 2014			FILING METHOD F () CHECK ONE				PAPER		\checkmark	DISKI	ETTE			
Name of Office S	Sought by Candidat	te:						DATE O	F ELE	CTIO	N	District Number	Office Code	Par	ty Code	Cour	
								мо	DAY	YE	AR	161	STH	DEN	1	23	
REPRESENTAT	IVE IN THE GENER	RAL ASS	EMBLY					11		4	2014	 	(SEE INS	TRUCTI	ONS FOR	CODES	;)
Summary of	Receipts and	мо	DAY	YEAF	2			мо	DAY	YI	EAR	FO	R OFFIC	E USE	ONLY		
Expenditures	penditures from: 11 25 2014 TO 12 31 201						2014										
A. Amount Bro	ought Forward Fron	n Last R	eport	-			\$		-	(1,3	54.69)						
B. Total Monet	ary Contributions	And Rec	eipts (Fron	1 Sche	dule I))	\$				0.00						
C. Total Funds	Available (Sum Of	Lines A	and B)				\$			(1,3	54.69)						
D. Total Expen	ditures (From Sche	edule II	I)				\$			2	35.00						
E. Ending Cash	Balance (Subtract	t Line D	From Line	C)			\$			(1,58	39.69)						
F. Value Of In-	Kind Contributions	Receiv	ed (From S	chedu	le II)		\$				0.00						
G. Unpaid Deb	ts And Obligations	(From S	Schedule IV	()			\$				0.00						
				AFF	IDAV	ΊΤ :	SE	CTION									
PART I - If this i	s a Committee repo	ort, trea	surer sign	here.	If this	is a	Can	didate re	eport, o	andi	date sig	gn here.					
I swear (or affirm correct and compl) that this report, incl ete.	uding the	e attached sc	hedule	s filed o	n pap	per o	or by elect	ronic m	edium	, are to	the best of	f my knov	ledge	and bel	ief , tr	ue
Sworn to and subs	scribed before me this day of	5	20							s	ignatur	e of Persor	n Submitt	ing Rep	oort		-
						_						Print	ted Name				-
My Commission E	Signatu xpires	re										Emai					_
,	мо	D	AY	YR					Are	ea Cod	le		e Teleph	one Nu	mber		-
Part II- If this is	a report of a canc	lidate's	authorized	Comr	nittee,	Can	dida	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amend) that to the best of n ed.	ny knowle	edge and beli	ef this	politica	al co	mmi	ttee has n	ot viola	ted an	y provis	ions of the	e act of Ju	ine 3,1	937 (P.I	L. 133	з,
Sworn to and subso	cribed before me this										s	ignature o	of Candida	te			-
	day of 											Printe	d Name				-
	Signature																
My Commission Exp	pires											Emai	il				
	мо	D	AY	YR	Ł				Area	Code		Da	aytime Te	lephon	e Numl	per	-

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** KRUEGER-BRANEKY, LEANNE T From: <u>11/25/2014</u> **To:** 12/31/2014 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor 0.00 \$ **TOTAL for the Reporting Period** (1) 2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B) \$ 0.00 **Contributions Received From Political Committees (Part A)** 0.00 All Other Contributions (Part B) \$ **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 0.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 0.00 4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E) 0.00 **TOTAL for the Reporting Period** (4) \$ Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount \$ 0.00 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)

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 Committe	e or Candidate		Reporting	Period			
			From:		То	:	
		÷		DATE			AMOUNT
Full Name of Contributing C	Committee		мо	DAY	YEAR		
Mailing Address						\$	0.00
City	State	Zip Code (Plus 4)					
						Г	PAGE TOTAL
Enter Grand Total of Par	t A on Schedule I, Detail	ed Summary Page, Sect	ion 2.			\$	0.00

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

\$

Use this Part to ite	mize all other 0.01 to \$250.0	1 TO \$250.00 contribution 00 in the repo	s wi	ith an 1g per	aggreg iod.			rom
Name of Filing Committee or Candidat	e		Rep Froi	orting P m:	eriod	То):	
					DATE			AMOUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)						
								PAGE TOTAL
Enter Grand Total of Part A on S	Schedule I, Detail	ed Summary Pag	le, Se	ection 2	2.		\$	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 Can	didate		Reporting	Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Comm	ittee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C or	n Schedule I, Detaile	ed Summary Pa	age, Sectio	n 3.			\$	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:	То:

				D	ATE		АМ	OUNT
Full Name of Contributor				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zi	p Code (Plus 4)					
Employer Name				Occupat	tion			
Employer Mailing Address/Principal P Business	lace of		City		State		Zip Code	(Plus 4)
Enter Grand Total of Part C on Sc	hedule I <i>,</i> Deta	iled Sumr	narv Page, Secti	on 3.		Γ	PA	GE TOTAL
	,		, . <u>.</u>	-			\$	0.00

I

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			Report	ing Perio	bd					
	From					From: To:				
				D	ATE			AMOUNT		
Full Name				мо	DAY	YEAR				
Mailing Address							\$	5	0.00	
City	State	Zip Code (Plus 4)							
Receipt Description		•				ł	-			
Enter Grand Total of Part E on Schedu	le T. Detailed Sumn	nary Page	Section	4				PAGE TO	TAL	
		iiai y i uge,	Section				\$		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 Perio	od	
KRUEGER-BRANEKY,LEANNE T	From:	<u>11/25/2014</u> то:	<u>12/31/2014</u>
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	riod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	TF)		
TOTAL for the Reporting Pe	riod (2)	\$	0.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
TOTAL for the Reporting Pe	riod (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, 1		\$	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:			То:	
				DATE		АМС	DUNT
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 Sched Section 2.	ule II, In-Kind Co	ontributions Deta	iled Sum	mary Pag	je,	PAGE	TOTAL
					4	5	0.00

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

Name of Filing Committee or Candidate				Rep	oorting P	eriod				
					Fro	From: To:				
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address								\$	0.00	
City	State		Zip Code(F	Plus 4)						
Employer of Contributor						Occupat	tion			
Employer Mailing Address/Principal Plac Business	e of	City		State		Zip 4)	Code(Plus	Descri	otion o	f Contribution

	i
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed	PAGE TOTAL
Summary Page, Section 3.	0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or C	Name of Filing Committee or Candidate						
KRUEGER-BRANEKY,LEANNE	From <u>11/25/2014</u> To:				<u>12/31/2014</u>		
		AMOUNT					
To Whom Paid NGP VAN, Inc.				DAY	YEAR		
Mailing Address 1101 15th	Street, NW, Suite 500		12	1	2014	\$	235.00
City Washington	State DC	Zip Code (Plus 4) 20005	Descrip D	otion of Exp	benditure		
Futer Over d Tabal of France							PAGE TOTAL
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	235.00