

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 : 20140067		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST			
Name of Filing Committee, Candidate or Lobbyist: COMMITTEE TO ELECT LEANNE KRUEGER-BRANEKY											
Street Address: PO BOX 22											
City: SWARTHMORE					State: PA		Zip Code: 19081				
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. X	TERMINATION REPORT?	Yes	No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2015	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	DEM			
					11	3	2015	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY		
		10	20	2015		11	23	2015			
A. Amount Brought Forward From Last Report					\$ 4,761.75						
B. Total Monetary Contributions And Receipts (From Schedule I)					\$ 13,485.00						
C. Total Funds Available (Sum Of Lines A and B)					\$ 18,246.75						
D. Total Expenditures (From Schedule III)					\$ 2,546.00						
E. Ending Cash Balance (Subtract Line D From Line C)					\$ 15,700.75						
F. Value Of In-Kind Contributions Received (From Schedule II)					\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)					\$ 464.56						

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

Name of Filing Committee or Candidate	Reporting Period
COMMITTEE TO ELECT LEANNE KRUEGER-BRANEKY	From: <u>10/20/2015</u> To: <u>11/23/2015</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 190.00

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)	\$ 350.00
TOTAL for the Reporting Period (2)	\$ 350.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 12,900.00
All Other Contributions (Part D)	\$ 0.00
TOTAL for the Reporting Period (3)	\$ 12,900.00

4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)	
TOTAL for the Reporting Period (4)	\$ 45.00

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.)	\$ 13,485.00
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Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				

PAGE TOTAL	
\$	0.00

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
COMMITTEE TO ELECT LEANNE KRUEGER-BRANEKY	From: <u>10/20/2015</u> To: <u>11/23/2015</u>

				DATE			AMOUNT	
Full Name of Contributor CATHY GREENBLAT					MO	DAY	YEAR	\$ 100.00
Mailing Address 2222 OAKCREST DR					10	30	2015	
City PALM SPRINGS		State CA	Zip Code (Plus 4) 922645021					

Full Name of Contributor				MO	DAY	YEAR	\$	250.00
MARY GAY SCANLON								
Mailing Address				11	11	2015		
230 PARK AVE		State	Zip Code (Plus 4)					
City		PA	190811728					
SWARTHMORE								

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

PAGE TOTAL
\$ 350.00

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 COMMITTEE TO ELECT LEANNE KRUEGER-BRANEKY	Reporting Period From: <u>10/20/2015</u> To: <u>11/23/2015</u>
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				DATE		AMOUNT	
Full Name of Contributing Committee PLUMBERS UNION LOCAL 690 ELECTION POLITICAL ACTION FUND				MO	DAY	YEAR	\$ 5,000.00
Mailing Address 2791 SOUTHAMPTON RD				11	20	2015	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191541211					
Full Name of Contributing Committee PSEA-PACE				MO	DAY	YEAR	\$ 7,500.00
Mailing Address 400 N 3RD ST PO BOX 1724				11	20	2015	
City HARRISBURG	State PA	Zip Code (Plus 4) 171011385					
Full Name of Contributing Committee STEAMFITTERS LOCAL 449				MO	DAY	YEAR	\$ 400.00
Mailing Address 1517 WOODRUFF ST				10	23	2015	
City PITTSBURGH	State PA	Zip Code (Plus 4) 152205317					

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

PAGE TOTAL
\$ 12,900.00

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	\$ 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.

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 COMMITTEE TO ELECT LEANNE KRUEGER-BRANEKY	Reporting Period From: <u>10/20/2015</u> To: <u>11/23/2015</u>
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				DATE	AMOUNT	
Full Name	MO	DAY	YEAR			
BENEFICIAL BANK						
Mailing Address 537 BALTIMORE PIKE	10	26	2015	\$	45.00	
City SPRINGFIELD State PA Zip Code (Plus 4) 190643839						
Receipt Description REFUND OF ANALYSIS FEE						

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

PAGE TOTAL
\$ 45.00

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	
COMMITTEE TO ELECT LEANNE KRUEGER-BRANEKY		From: <u>10/20/2015</u> To: <u>11/23/2015</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 RECIEVED - 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:
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
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:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
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

Name of Filing Committee or Candidate	Reporting Period
COMMITTEE TO ELECT LEANNE KRUEGER-BRANEKY	From <u>10/20/2015</u> To: <u>11/23/2015</u>

DATE				AMOUNT
To Whom Paid ACTBLUE	MO	DAY	YEAR	
Mailing Address 366 SUMMER ST	11	4	2015	\$ 1.00
City SOMERVILLE	State MA	Zip Code (Plus 4) 021443132	Description of Expenditure CREDIT CARD PROCESSING	
To Whom Paid BENEFICIAL BANK	MO	DAY	YEAR	
Mailing Address 537 BALTIMORE PIKE	11	16	2015	\$ 45.00
City SPRINGFIELD	State PA	Zip Code (Plus 4) 190643839	Description of Expenditure ACCOUNT ANALYSIS FEE	
To Whom Paid EDGE HILL STRATEGIES, LLC	MO	DAY	YEAR	
Mailing Address PO BOX 22390	10	22	2015	\$ 2,500.00
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191102390	Description of Expenditure CONSULTING	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.				PAGE TOTAL \$ 2,546.00

SCHEDULE IV

STATEMENT OF UNPAID DEBTS

**Use this Section to itemize all unpaid debts and obligations
which are outstanding at the end of the reporting period**

Name of Filing Committee or Candidate				Reporting Period			
COMMITTEE TO ELECT LEANNE KRUEGER-BRANEKY				From: <u>10/20/2015</u> To: <u>11/23/2015</u>			
							Outstanding Balance of Debt
							DATE
Name of Creditor				MO	DAY	YEAR	
VERIZON							
Mailing Address 130 S STATE RD				8	13	2014	\$ 464.56
City SPRINGFIELD		State		Zip Code (Plus 4)		Description of Debt	
PA		190641232		PHONE SERVICES			
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL
							\$ 464.56