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	20160	0667				Repor		CAN	DIC	DATE	\	C	OMMITTE		LOB	BYIS	T	
Name of Filing C	Committee, C	andida	te or Lo	obbyi	st:	K	RUEGI	ER-BR	ANEK	Y,LE	ANNE	Т							
Street Address:																			
City:	_								State	ŀ				Zip Cod	l e: 19	081			
TYPE OF REPORT	6TH TUESDA PRE-PRIMAR		1.	2ND PRIM	FRIDAY IARY	PRE-	2.	30 DA		P	OST-	3.		AMENDM REPORT?		Yes	/	No	
(place X to the right of	6TH TUESDA' PRE-ELECTIC		4.		FRIDAY TION	PRE-	5. X	30 DA		P	OST-	6.		TERMINA REPORT?		Yes		No	\
report type)	ANNUAL RE	PORT	7.	Year	2016				NG MET					PAPER		\	DIS	KETTI	E
Name of Office S	- Sought by Ca	ındidate	e:						DATE	OF	ELEC	СТІ	ON	District Number	Office Code	Pai	rty Co	ode Co Co	
REPRESENTATI	VE IN THE C	GENER/	AL ASS	EMBL	Υ.				МО		DAY	4	YEAR	161	STH	DEI		23	
			мо	DA	v I	YEAR			мо	11	DAY	8	2016 YEAR		(SEE IN			OR COD	ES)
Summary of Expenditures		nd	1-10	5	17	20:	16 T	0	140	5		18	2016		K OFFIC	LE USE	ON	- T	
A. Amount Bro	ught Forwar	d From	Last R	eport	<u> </u> :			\$					0.00	1					
B. Total Moneta	ary Contribu	tions A	nd Rec	eipts	(From	Sched	ule I)	\$					0.00						
C. Total Funds	Available (S	um Of I	Lines A	and I	В)			\$					0.00						
D. Total Expend	ditures (Fror	m Sche	dule II	I)				\$				1	,088.44						
E. Ending Cash	Balance (Su	ıbtract	Line D	From	Line C)		\$				(1,0	088.44)						
F. Value Of In-	Kind Contrib	utions	Receive	ed (Fi	rom Sc	hedule	e II)	\$					0.00						
G. Unpaid Debt	s And Obliga	ations (From S	ched	ule IV)			\$					0.00						
						AFFI	DAVI	T SE	CTIO	N									
PART I - If this is		-	•		-														
I swear (or affirm) correct and complete		ort, inclu	iding the	attac	hed sch	edules 1	filed on	paper	or by el	ectr	onic me	ediu	m, are to	the best of	my knov	wledge	and I	elief ,	true
Sworn to and subs	cribed before of day of	me this		20						-			Signatur	e of Persor	Submitt	ing Re	port		
	 s	Signature	e					- -		-				Print	ed Name	•			_
My Commission Ex	cpires							_		-				Emai	I				
	МО		D/	AY		YR					Are	ea Co	ode	Daytim	e Teleph	one Nu	mbei	——	
Part II- If this is	a report of	a candi	idate's	autho	orized (Commi	ttee, C	andid	ate sh	all s	ign he	ere.							
I swear (or affirm) No 320) as amende		est of my	y knowle	edge a	nd belie	f this p	olitical	comm	ittee ha	s no	t violat	ted a	any provis	ions of the	act of J	une 3,1	937 (P.L. 13	33,
Sworn to and subsc	ribed before m	ne this		20									S	ignature o	f Candida	ate			_
				-				_						Printe	d Name				-
My Commission Exp	_	nature						-		-				Emai	I				-
		мо		AY		YR		-			Area	Code		Da	ytime To	elephor	ne Nu	mber	$-\mid$
	-	-	,	••		110							-		,	p y .			

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
KRUEGER-BRANEKY,LEANNE T	From:	<u>5/17/201</u>	<u>.6</u> To:	<u>5/18/2016</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)			\$	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 an 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 Candida	te		Reporting	Period			
			From:		То	•	
		·		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.

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.

(Exclu	ide contributions from	n political comm	itte	es re _l	ported	in Part .	A)	
Name of Filing Committe	ee or Candidate		Rep	orting P	eriod			
			Froi	m:		To):	
		•			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 Schedule I, Detailed Summary Page, Section 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 Cai	ndidate		Reporting	Period				
			From:			То:		
				DA	TE		Α	AMOUNT
Full Name of Contributing Comm	nittee			мо	DAY	YEAR		0.00
Mailing Address							- \$	0.00
City	State	Zip Code	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C o	on Schedule I, Detaile	d Summary Pa	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	2			Rep	orting Pe	riod			
				Fron	n:		To) :	
					D	ATE			AMOUNT
Full Name of Contributor					мо	DAY	YEAR	\$	0.00
Mailing Address									
City	State	Zi	p Code (Plus	(4)					
Employer Name	•				Occupa	tion	-	-	
Employer Mailing Address/Principal Pl	ace of Business		City		•	State		Zip Co	ode (Plus 4)
Enter Grand Total of Part C on Sch	edule I, Detaile	ed Sumr	mary 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:			То:		
		•		D	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	ıs 4)					
Receipt Description	'	<u>'</u>			•			
Futor Curred Total of Bout	For Cabadula I Batailad	I Comment Page Co		4				PAGE TOTAL
Enter Grand Total of Part	E on Schedule 1, Detailed	Summary Page, Se	ection	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 Perio	od	
KRUEGER-BRANEKY,LEANNE T	From:	<u>5/17/2016</u> To:	5/18/2016
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	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 Candi	idate		Reportin	g Period			
			From:			To:	
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						7 \$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:	•		•	•	•		
Enter Grand Total of Part F on	Schedule II, In-Ki	nd Contributions Detai	led Sum	mary Pag	ge,		PAGE TOTAL
Section 2.						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	0.00
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Pe	eriod		
KRUEGER-BRANEKY,LEANNE T	From	5/17/2016	То:	5/18/2016

			DATE			AMOUNT
		мо	DAY	YEAR		
		7 24 2016 Description of Expenditure Transportation MO DAY YEAR 7 25 2016 Is 4) Description of Expenditure Transportation MO DAY YEAR 7 25 2016 Is 4) Description of Expenditure Transportation MO DAY YEAR 7 25 2016 Is 4) Description of Expenditure Transportation MO DAY YEAR 7 26 2016				27.47
State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
CA	94105	Transpo	rtation			
		МО	DAY	VEAD		
		МО	DAT	TEAR		
		7	25	2016	\$	31.69
State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
CA	94105	Transpo	rtation			
		МО	DAY	VEAD		
		MO		ILAK		
		7	25	2016	\$	24.46
State	Zin Codo (Blue 4)	Danawimi	lan of Fra			
Jule	Zip Code (Plus 4)	Descrip	tion of Exp	enaiture		
CA	94105			enaiture		
		Transpo	rtation			
		Transpo	rtation			
		Transpo	DAY	YEAR	\$	52.17
		MO 7	DAY 26	YEAR 2016	\$	52.17
CA	94105	MO 7 Descript	DAY 26	YEAR 2016	\$	52.17
CA	94105 Zip Code (Plus 4)	MO 7 Descript	DAY 26 tion of Exportation	YEAR 2016 enditure	\$	52.17
CA	94105 Zip Code (Plus 4)	MO 7 Descript	DAY 26	YEAR 2016	\$	52.17
CA	94105 Zip Code (Plus 4)	MO 7 Descript	DAY 26 tion of Exportation	YEAR 2016 enditure	\$	52.17 30.05
CA	94105 Zip Code (Plus 4)	MO 7 Descript Transpo MO 7	DAY 26 tion of Expertation DAY	YEAR 2016 enditure YEAR 2016		
State CA	94105 Zip Code (Plus 4) 94105	MO 7 Descript Transpo MO 7	DAY 26 tion of Exp rtation DAY 27 tion of Exp	YEAR 2016 enditure YEAR 2016		
State CA State	2ip Code (Plus 4) 94105 Zip Code (Plus 4)	MO 7 Descript Transpo MO 7 Descript Transpo	DAY 26 tion of Exp ortation DAY 27 tion of Exp ortation	YEAR 2016 enditure YEAR 2016 enditure		
State CA State	2ip Code (Plus 4) 94105 Zip Code (Plus 4)	MO 7 Descript Transpo MO 7 Descript	DAY 26 tion of Exp rtation DAY 27 tion of Exp	YEAR 2016 enditure YEAR 2016		
State CA State	2ip Code (Plus 4) 94105 Zip Code (Plus 4)	MO 7 Descript Transpo MO 7 Descript Transpo	DAY 26 tion of Exp ortation DAY 27 tion of Exp ortation	YEAR 2016 enditure YEAR 2016 enditure		
State CA State	2ip Code (Plus 4) 94105 Zip Code (Plus 4)	MO 7 Descript Transpo MO 7 Descript Transpo MO 7 Transpo MO 7	DAY 26 tion of Exp rtation DAY 27 tion of Exp rtation DAY	YEAR 2016 Penditure YEAR 2016 Penditure YEAR 2016	\$	30.05
	State CA	CA 94105 State Zip Code (Plus 4) CA 94105	State Zip Code (Plus 4) Descript	State Zip Code (Plus 4) Description of Exp.	MO DAY YEAR 7 24 2016 State Zip Code (Plus 4) Description of Expenditure Transportation Transportation MO DAY YEAR 7 25 2016 State Zip Code (Plus 4) Description of Expenditure CA 94105 Transportation MO DAY YEAR 7 25 2016	MO

								JL 12
To Whom Paid					DAY	YEAR		
Uber								
Mailing Address 182 Howard St				7	26	2016	\$	31.60
City San Fran	ncisco	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure		
CA 94105			Transportation					
To Whom Paid				мо	DAY	YEAR		
Philadelphia Parking Authority								
Mailing Address	701 Market St			8	1	2016	\$	104.50
City Philadelp	ohia	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure		
		PA	19106	Parking				
To Whom Paid Groupon					DAY	YEAR		
Mailing Address 600 W. Chicago Ave				8	1	2016	\$	306.95
City Chicago		State	Zip Code (Plus 4)	Descript	Description of Expenditure			
cincago		IL	60654	Lodging				
To Whom Paid								
NYC Taxi				МО	DAY	YEAR		
Mailing Address 33 Beaver Street			8	17	2016	\$	8.75	
City New Yor	k	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure		
		NY	10004	Transportation				
To Whom Paid				мо	DAY	YEAR		
New Yorker Hotel				1-10		1 Z/IIX		
Mailing Address 481 8th Ave				8	17	2016	\$	27.22
City New Yor	k	State	Zip Code (Plus 4)	Description of Expenditure				
		NY	10001	Internet access				
To Whom Paid				МО	DAY	YEAR		
Parkway Corporation								
Mailing Address 150 N Broad Street			9	8	2016	\$	12.00	
City Philadelp	phia	State	Zip Code (Plus 4)	Descript	tion of Exp	enditure		
		PA	19102	Parking				
To Whom Paid Parkway Corporation				мо	DAY	YEAR		
Mailing Address 150 N Broad Street			8	2	2016	\$	28.00	
City Philadelp		State	Zip Code (Plus 4)	Descrip	l tion of Exp			
- i illiadelp	, ma	PA	19102	Parking				
To Whom Paid					DAY	VEAR		
Capital One					DAY	YEAR		
Mailing Address 1680 Capital One Drive			9	7	2016	\$	374.70	
City McLean		State	Zip Code (Plus 4)	Descript	tion of Exp	enditure		
		VA	22102	Photo shoot expenses				

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	PAGE TOTAL	
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.	\$	1,088.44