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 :	ion 2016	C0667			Repor Filed E		CANDI	DATE	✓	CC	OMMITTE		LOB	BYIS	r	
Name of Filing C	Committee, Candida	ate or Lo	obbyist:			-	ANEKY,L	EANNE	Т							
Street Address:																
City:							State:				Zip Code: 19081					
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	2.	30 DA PRIMA		POST-	3.		AMENDMI REPORT?	ENT	Yes	\checkmark	No	
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5. X	30 DA ELEC		POST-	6.		TERMINA REPORT?	TION	Yes		No	\checkmark
report type)	ANNUAL REPORT	7.	Year 2016				NG METHO CHECK O				PAPER		\checkmark	DIS	KETTE	
Name of Office S	Sought by Candidat	te:					DATE O	F ELE	CTION		District Number	Office Code	Pai	ty Co	le Cou Coo	unty Je
DEDDESENITATI	VE IN THE GENER						мо	DAY	YEA	R	161	STH	DEI	Ч	23	
REFRESENTAL	IVE IN THE GENER	AL ASS					11		8	2016]	(SEE INS	TRUCTI	ONS FC	R CODE	S)
	Receipts and	мо	DAY	YEAR			мо	DAY	YEA	R	FOI	R OFFIC	E USE	ONL	Y	
Expenditures	s from:		5 17	20	016 T	0	5	1	18	2016						
A. Amount Bro	ught Forward Fron	n Last R	eport			\$				0.00						
B. Total Monet	ary Contributions A	And Reco	eipts (Fron	n Schee	dule I)	\$				0.00						
C. Total Funds	Available (Sum Of	Lines A	and B)			\$				0.00						
D. Total Expen	ditures (From Sche	edule II	[)			\$			1,08	8.44						
E. Ending Cash	Balance (Subtract	t Line D	From Line	C)		\$			(1,088	8.44)						
F. Value Of In-	Kind Contributions	Receive	ed (From S	chedul	e II)	\$				0.00						
G. Unpaid Deb	ts And Obligations	(From S	chedule IV	')		\$				0.00						
				AFF	IDAVI	T SE	CTION									
	s a Committee repo		-					•			-					
correct and compl) that this report, incl ete.	uaing the	attached sc	neaules	filed on	paper	or by elect	ronic me	eaium, a	are to	the best of	ту кпом	/leage	and b	eller , t	rue
Sworn to and subs	cribed before me this day of	5	20						Sig	Inatur	e of Person	Submitt	ing Re	port		
	Signatu	re				_					Print	ed Name				_
My Commission E	xpires					_					Email					
	мо	DA	AY	YR				Are	ea Code		Daytime	e Telepho	one Nu	mber		
Part II- If this is	a report of a cand	lidate's a	authorized	Comm	ittee, C	andid	ate shall	sign he	ere.							
I swear (or affirm) No 320) as amende	that to the best of med.	ıy knowle	dge and beli	ef this	political	comm	ittee has n	ot viola	ed any	provis	ions of the	act of Ju	ine 3,1	937 (I	P.L. 13	33,
Sworn to and subso	ribed before me this day of		20							s	ignature of	f Candida	te			-
						_					Printeo	i Name				-
My Commission Exp	Signature					-					Email					
						_										_
	мо	DA	AY .	YR				Area	Code		Da	ytime Te	elephor	ne Nur	nber	

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** KRUEGER-BRANEKY, LEANNE T From: <u>5/17/2016</u> **To:** 5/18/2016 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.)

PAGE 3

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 Candidate				porting l	Period			
Fro				om:		То	:	
					DATE			AMOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus	4)					
							Γ	PAGE TOTAL

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

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 Candidat	e		Rep	orting P	eriod			
			Froi	m:		Тс):	
					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 Cand	lame of Filing Committee or Candidate			g Period				
			From:			То:		
				DA	TE		А	MOUNT
Full Name of Contributing Commit	tee			мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Cod	e (Plus 4)					
						ſ		PAGE TOTAL
Enter Grand Total of Part C on	Schedule I, Detail	led 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	od				
From			From:	rom: To:					
				D	ATE			AMOUNT	
Full Name				мо	DAY	YEAR			
Mailing Address							\$		0.00
City	State	Zip Code (Plus 4)						
Receipt Description	•								
Enter Grand Total of Part E on Schedu	ule T. Detailed Summ	nary Page	Section	4				PAGE TO	ſAL
		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 Period		
KRUEGER-BRANEKY,LEANNE T	From:	<u>5/17/2016</u> то:	<u>5/18/2016</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	g Period			
	From:						
				DATE		АМО	UNT
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	6	0.00

0.00

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

Name of Filing Committee or (ne of Filing Committee or Candidate				Repo	orting P	Period			
					Fron	n:		То:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address				1				\$	0.00	
City	State		Zip Code(F	Plus 4)						
Employer of Contributor					•	Occupa	l tion			
Employer Mailing Address/Prin Business	ncipal Place of	City		State		Zip 4)	Code(Plus	Descri	ption of	Contribution
Enter Crand Total of Dart	C an Sahadula II	Te Kind	Contributi		tailar					PAGE TOTAL

	<u> </u>
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.	PAGE 1

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	ame of Filing Committee or Candidate								
KRUEGER-BRANEKY,LEANNE T			From	<u>5/1</u>	7/2016	То:	<u>5/18/2016</u>		
				DATE			AMOUNT		
To Whom Paid Uber			мо	DAY	YEAR				
Mailing Address 182 Howard St			7	24	2016	\$	27.47		
City San Francisco	State CA	Zip Code (Plus 4) 94105		Description of Expenditure Transportation					
To Whom Paid Uber				DAY	YEAR				
Mailing Address 182 Howard St				25	2016	\$	31.69		
CitySan FranciscoStateZip Code (Plus 4)CA94105				Description of Expenditure Transportation					
To Whom Paid Uber			мо	DAY	YEAR				
Mailing Address 182 Howard St			7	25	2016	\$	24.46		
City San Francisco	State CA	Zip Code (Plus 4) 94105		otion of Exp	penditure	3			
To Whom Paid Uber			мо	DAY	YEAR				
Mailing Address 182 Howard St			7	26	2016	\$	52.17		
City San Francisco	State CA	Zip Code (Plus 4) 94105	-	otion of Exp ortation	penditure	2			
To Whom Paid Uber			мо	DAY	YEAR				
Mailing Address 182 Howard St				27	2016	\$	30.05		
City San Francisco	State CA	Zip Code (Plus 4) 94105		otion of Exp ortation	penditure				

To Whom Paid Uber					DAY	YEAR			
Mailing Address 182 Howard St				7	28	2016	\$	28.88	
City San Franc	risco	State	Zip Code (Plus 4)	Descrip	tion of Exi	Denditure			
Jun Tun		СА	94105	Description of Expenditure Transportation					
To Whom Paid Uber					DAY	YEAR			
Mailing Address 182 Howard St				7	26	2016	\$	31.60	
City San Franc	cisco	State	Zip Code (Plus 4)	Descrip	Description of Expenditure				
		СА	94105	Transportation					
To Whom Paid Philadelphia Parking Authority					DAY	YEAR			
Mailing Address 701 Market St				8	1	2016	\$	104.50	
City Philadelph	hia	State Zi			tion of Ex	, Denditure			
		РА	19106	Parking					
To Whom Paid Groupon				мо	DAY	YEAR			
	600 W. Chicago Ave	<u>.</u>		мо 8	DAY	YEAR 2016	\$	306.95	
Groupon Mailing Address	600 W. Chicago Ave	State	Zip Code (Plus 4)	8	1	2016		306.95	
Groupon Mailing Address	600 W. Chicago Ave	1	Zip Code (Plus 4) 60654	8	1 otion of Exp	2016		306.95	
Groupon Mailing Address	600 W. Chicago Ave	State		8 Descrip	1 otion of Exp	2016		306.95	
Groupon Mailing Address City Chicago To Whom Paid	600 W. Chicago Ave	State		8 Descrip Lodging	1 ption of Exp	2016 Denditure		306.95	
Groupon Mailing Address City Chicago To Whom Paid NYC Taxi Mailing Address	33 Beaver Street	State		8 Descrip Lodging MO 8	1 ption of Exp DAY 17	2016 Denditure YEAR 2016	\$		
Groupon Mailing Address City Chicago To Whom Paid NYC Taxi Mailing Address	33 Beaver Street	State IL	60654	8 Descrip Lodging MO 8 Descrip	1 btion of Exp DAY	2016 Denditure YEAR 2016	\$		
Groupon Mailing Address City Chicago To Whom Paid NYC Taxi Mailing Address	33 Beaver Street	State IL State	60654	8 Descrip Lodging MO 8 Descrip	DAY 17	2016 Denditure YEAR 2016	\$		
Groupon Mailing Address City Chicago To Whom Paid NYC Taxi Mailing Address City New York To Whom Paid	33 Beaver Street	State IL State	60654	8 Descrip Lodging MO 8 Descrip Transpo	DAY 17 ption of Exp 17 ption of Exp portation	2016 penditure YEAR 2016 penditure	\$		
Groupon Mailing Address City Chicago To Whom Paid NYC Taxi Mailing Address City New York To Whom Paid New Yorker Hote	33 Beaver Street	State IL State	60654	8 Descrip Lodging MO 8 Descrip Transpo MO 8	DAY 17 DAY 17 DAY	2016 Denditure YEAR 2016 Denditure YEAR 2016	\$	8.75	

To Whom Paid Parkway Corporation	мо	DAY	YEAR					
Mailing Address 150 N Broad Street				8	2016	\$	12.00	
City Philadelphia	State PA	Zip Code (Plus 4) 19102	Description of Expenditure Parking					
To Whom Paid Parkway Corporation				DAY	YEAR			
Mailing Address 150 N Broad Street				2	2016	\$	28.00	
City Philadelphia	State PA	Zip Code (Plus 4) 19102	Description of Expenditure Parking					
To Whom Paid Capital One				DAY	YEAR			
Mailing Address 1680 Capital One Drive				7	2016	\$	374.70	
City McLean	State VA	Zip Code (Plus 4) 22102	Description of Expenditure Photo shoot expenses					
Enter Grand Total of Expenditures of	\$	PAGE TOTAL 1,088.44						