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	20012	257				oort		CANDI	DATE		СОМ	4ITTEE	✓	LOB	BYIST		
Name of Filing C	Committee, Ca	ndida	te or Lo	bbyist:		LEA	CH,	DAYL	IN DAYP	AC				•				
Street Address:	PO BOX 6	60178	3															
City:	KING OF	PRUS	SIA						State:	PA			Zip Cod	ie: 19	9406			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY		1.	2ND FRIDA PRIMARY	Y PRE	-	2.	30 DA PRIMA		POST-	3.		AMENDM REPORT	No				
(place X to the right of	6TH TUESDAY PRE-ELECTION		4.	2ND FRIDATELECTION	y pre	Ē- !	5.	30 DA		POST-	6.			TERMINATION Yes N REPORT?				
report type)	ANNUAL REP	PORT	7. X	Year 2017					NG METH				PAPER	TTE				
Name of Office S	- Sought by Can	ndidate	e:						DATE 0	F ELE	CTIO	N	District Number	District Office Party Cod Number Code				
									МО	DAY	YE	AR		10000	DEI	М	Code	
									11		7	2017		(SEE IN	STRUCTI	ONS FOR (CODES)	1
Summary of Expenditures		nd	МО	DAY	YEAR		-	_	МО	DAY	YI	EAR	FO	R OFFI	CE USE	ONLY		
			1	.1 28	2	017	ı	<u>о</u>	12	;	31	2017						
A. Amount Bro	ught Forward	l From	Last Re	eport				\$			65,2	247.46						
B. Total Moneta	ary Contributi	ions A	nd Rece	eipts (From	Sche	dule	1)	\$				0.00						
C. Total Funds	Available (Su	ım Of I	Lines A	and B)				\$			65,2	247.46						
D. Total Expend	ditures (From	Sche	dule III	()				\$			9,3	329.36						
E. Ending Cash	Balance (Sub	otract	Line D I	From Line (C)			\$			55,9	18.10						
F. Value Of In-	Kind Contribu	ıtions	Receive	ed (From S	chedu	le II)	\$				0.00						
G. Unpaid Debt	s And Obligat	tions ((From S	chedule IV)			\$				0.00			•			
					AFF	IDA	١٧٧	T SE	CTION									
PART I - If this is	s a Committee	e repo	rt, treas	surer sign	here.	If th	is is	a Can	ndidate re	eport, o	candi	date sig	ın here.					
I swear (or affirm) correct and complete		rt, inclu	iding the	attached scl	nedule	s filed	d on	paper (or by elect	ronic m	edium	, are to t	he best o	f my kno	wledge	and beli	ef , tru	ıe
Sworn to and subs	cribed before m	ne this		20							S	Signature	of Perso	n Submit	ting Re	port		-
								-					Drin	ted Name				_
My Commission 7	•	gnature	е					_										_
My Commission Ex	MO		DA	. Y	YR			-		Ar	ea Cod	le	Ema	il e Teleph	one Nu	mher		-
Doub II If this is							- C	5 15 di di	ata aball				Dayem	Стеюрі		bei		
Part II- If this is I swear (or affirm)	•						•					v provis	ions of the	e act of J	une 3.1	937 (P.L	. 1333	
No 320) as amende	ed.		,			,						, , ,						_
Sworn to and subsc	day of	ะ เกเร		20								S	ignature o	of Candid	ate			
								-					Printe	d Name				-
My Commission Exp	Signa	iture						-					Ema	il				-
								-			Codo		5.	avtimo T	alanha	a Numb		-
	МС	•	DA	ΛΥ	YR	ı				Area	Code		ט	aytime T	eiebuoi	ie itumb	ei	- 1

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

, -				
Name of Filing Committee or Candidate	Reporting	g Period		
LEACH, DAYLIN DAYPAC	From:	11/28/201	<u>7</u> To:	12/31/2017
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	J 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

	this Part to itemize onl with an aggregate valu	-			-			
Name of Filing Comm	nittee or Candidate		Re	porting	Period			
		From: To:					:	
		L			DATE			AMOUNT
Full Name of Contribut	ing Committee			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.

PAGE TOTAL
\$ 0.00

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 Candid	ate		Rep Fro					
					DATE		AN	4OUNT
Full Name of Contributor				МО	DAY	YEAR		
Mailing Address							\$ \$	0.00
City	State	Zip Code (Plus 4)	1					

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

PAGE TOTAL\$ 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 Candidate			Reporting	Period				
			From:			То:		
				DA	TE		A	MOUNT
Full Name of Contributing Committee				мо	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code	e (Plus 4)					
								PAGE TOTAL
Enter Grand Total of Part C on Scheo	dule I, Detailed Sum	nmary 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 Candida	te			Rep	orting Pe	riod			
				Froi	n:		To) :	
					D	ATE		АМ	IOUNT
Full Name of Contributor					МО	DAY	YEAR		
Mailing Address								\$	0.00
City	State	Zi	p Code (Plus	s 4)					
Employer Name	•	•			Occupa	tion			
Employer Mailing Address/Principal P Business	lace of		City		•	State		Zip Code	e (Plus 4)
Enter Grand Total of Part C on Sc	hedule I, Deta	iled Sumr	mary Page,	Section	on 3.			P <i>A</i>	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	ting Perio	bd			
			From:			To:		
				D	ATE		AM	OUNT
Full Name				МО	DAY	YEAR		
Mailing Address							\$	0.00
City	State	Zip Code (Plus 4)					
Receipt Description	•	•		•	•	•	_	
Enter Grand Total of Part E o	on Schedule I. Detaile	d Summary Page	Section	4			PAG	GE TOTAL
	m deficación 1, detailes	z Sammary r age,	occion	••			\$	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 Per	iod	
LEACH, DAYLIN DAYPAC	From:	<u>11/28/2017</u> To:	12/31/2017
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	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 Candidat	:e		Reporting	g Period			
			From:			То:	
				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 Sch	andula II. In-Kir	nd Contributions Data	ilad Sum	mary Pag			DACE TOTAL
Section 2.	iedule II, III-KII	ia Contributions Deta	iiieu Suiii	iliai y Pag	, je,		PAGE TOTAL
						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate					Re	porting	Period			
					Fro	om:		To:		
							DATE			AMOUNT
Full Name of Contributor						мо	DAY	YEAR		
Mailing Address									\$	0.00
City	State		Zip Code(F	Plus 4)						
Employer of Contributor						Occupa	ation			
Employer Mailing Address/Principal Plac Business	e of	City		State		Zi _Į 4)	Code(Plus	Descri	ption	of Contribution
Enter Grand Total of Part G on School Summary Page, Section 3.	edule II, I	n-Kind	Contributi	ons De	etaile	ed				PAGE TOTAL 0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candid	late		Reporti	ng Period				
LEACH, DAYLIN DAYPAC			From		<u>8/2017</u>	То:	12/31/2017	
			•	DATE			AMOUNT	
To Whom Paid BOCHETTO & LENTZ, P.C.			мо	DAY	YEAR			
Mailing Address 1524 LOCUST S	Т		12	11	2017	\$	5,000.00	
City PHILADELPHIA				Description of Expenditure LEGAL				
To Whom Paid COMMITTEE TO ELECT MIKE STACK	(МО	DAY	YEAR			
Mailing Address PO BOX 292		12	31	2017	\$	2,000.00		
City NEWTOWN	State PA	Zip Code (Plus 4) 189400292	Descrip	otion of Exp IBUTION	penditure			
To Whom Paid DELAWARE COUNTY DEMOCRATIC	PARTY		МО	DAY	YEAR			
Mailing Address PO BOX 473			12	8	2017	\$	1,000.00	
City MEDIA	State PA	Zip Code (Plus 4) 19063	Descrip	otion of Exp	penditure			
To Whom Paid EXTRA SPACE STORAGE			МО	DAY	YEAR			
Mailing Address 282 S GULPH RI	282 S GULPH RD			12	2017	\$	229.36	
City KING OF PRUSSIA State Zip Code (Plus 4)			Descrip	otion of Exp GE SPACE				

To Whom Paid FRIENDS OF KEN LAWRENCE			МО	DAY	YEAR		
Mailing Address PO BOX 1732			12	8	2017	\$	500.00
City BLUE BELL	State PA	Zip Code (Plus 4) 194220467	Description of Expenditure CONTRIBUTION				

							TAGE 12
To Whom Paid NGP VAN INC.			мо	DAY	YEAR		
Mailing Address PO BOX 392264			12	8	2017	\$	600.00
City PITTSBURGH	State PA	Zip Code (Plus 4) 152519264	Description of Expenditure SOFTWARE				
Enter Grand Total of Expend	litures on Page 1, Re	port Cover Page, Item D	•			\$	9,329.36