Campaign Finance Report

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

Filer Identificati	ion	2014(0067		-	Repo		CAND	IDATE		СОМ	MITTEE	✓	LOBI	BYIST	
Number :				- h h: -t .		Filed	-									
Name of Filing C			ate or Lo	obbyist:		LEANN	EFOR	. PA								
Street Address:	PO B	OX 22														
City:	SWA	RTHMORE	3					State:	PA			Zip Co	de: 19	081		
TYPE OF REPORT	6TH TUES PRE-PRIM		1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 D PRIM		POST-	POST- 3.			AMENDMENT REPORT?		No	° ∀
(place X to the right of	6TH TUES PRE-ELEC		4.	2ND FRIDAY PRE- 5. 30 DAY ELECTION ELECTIO					POST- 6. X			TERMINATION REPORT?		Yes	No	· •
report type)	ANNUAL	REPORT 7. Year 2021 FILING METHO () CHECK OF									PAPER		\checkmark	DISK	TTE	
Name of Office Sought by Candidate:								DATE (OF ELE	CTI	ON	District Number		Par	ty Code	County Code
DEDDESENTATIVE IN THE GENERAL ASSEMBLY								мо	DAY	Y	EAR	161	STH	DEN	1	23
REPRESENTATIVE IN THE GENERAL ASSEMBLY								11	1	2	2021		(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of		and	мо	DAY	YEAR	Ł		мо	DAY	Y	EAR	FC	OR OFFIC	E USE	ONLY	
Expenditures	s from:		-	10 19	2	021	ГО	1:	1	22	2021					
A. Amount Bro	ught Forv	vard From	n Last R	eport			\$			31,	662.05					
B. Total Monet	ary Contr	ibutions A	And Rec	eipts (Fron	1 Sche	dule I)	\$	5		5,	385.00					
C. Total Funds	Available	(Sum Of	Lines A	and B)			\$	5		37,	047.05					
D. Total Expen	ditures (F	rom Sche	edule II	I)			\$	5		2,	040.78					
E. Ending Cash	Balance	(Subtract	Line D	From Line	C)		4	5		35,0	006.27	_				
F. Value Of In-	Kind Cont	tributions	Receiv	ed (From S	chedu	le II)	4	5	0.00							
G. Unpaid Deb	ts And Ob	ligations	(From S	Schedule IV	()		4	\$ 50,700.00								
					AFF	IDAV	IT SE	CTION								
PART I - If this is	s a Comm	ittee repo	ort, trea	surer sign	here.	If this i	s a Ca	ndidate r	eport,	candi	idate si	gn here.				
I swear (or affirm) correct and comple		report, inclu	uding the	e attached sc	hedule	s filed or	ı paper	or by elec	tronic m	ediun	n, are to	the best o	of my knov	vledge	and bel	ief , true
Sworn to and subs	cribed befo day of	ore me this		20						:	Signatur	e of Perso	on Submitt	ing Rep	oort	
		Signatur	re .				_					Prir	nted Name			
My Commission E	xpires											Ema	ail			
		мо	D	AY	YR				Ar	ea Co	de	Daytin	ne Teleph	one Nu	mber	
Part II- If this is	a report	of a cand	lidate's	authorized	Comn	nittee,	Candio	late shall	l sign h	ere.						
I swear (or affirm) No 320) as amendo		e best of m	ıy knowle	edge and beli	ef this	politica	l comn	nittee has	not viola	ited a	ny provis	ions of th	e act of Ju	ine 3,1	937 (P.I	1333,
Sworn to and subso	ribed befor day of	re me this		20							S	ignature	of Candida	ite		
							_					Printe	ed Name			
My Commission Fur		Signature					_					Ema	ail			
My Commission Exp	es 						_									
	MO DAY YR								Area	Code		D	aytime Te	elephon	e Numi	ber

SCHEDULE I CONTRIBUTIONS AND RECEIPTS Detailed Summary Page

Name of Filing Committee or Candidate **Reporting Period** LEANNE FOR PA From: <u>10/19/2021</u> **To:** 11/22/2021 1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor \$ 510.00 **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)** 2,375.00 All Other Contributions (Part B) \$ **TOTAL for the Reporting Period** (2) \$ 2,375.00 3. Contributions Received Over \$250.00 (From Part C and Part D) \$ **Contributions Received From Political Committees (Part C)** 0.00 2,500.00 All Other Contributions (Part D) \$ **TOTAL for the Reporting Period** (3) \$ 2,500.00 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 \$ 5,385.00 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 Committee or Candidate				Reporting Period						
F					From: To			0:		
		DATE			AMOUNT					
Full Name of Contributing Committee				мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	4)									
							Γ	PAGE TOTAL		

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

0.00

\$

Reporting PeriodLEANNE FOR PAID (19/2021TO: ID (1	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)										
Linking AddressLinking AddressL	Name of Filing Committee or Cand	idate		Reporting P	eporting Period						
Full Name of Contributor KATHLEEN ADAMSON MO DAY YEAR Mailing Address 5 WATERFORD WAY 11 22 2021 \$ 250.00 City WALLINGFORD State PA Zip Code (Plus 4) 190867214 11 22 2021 \$ 250.00 Full Name of Contributor NELL CLARK MO DAY YEAR 11 22 2021 \$ 100.00 Gity SWARTHMORE State PA Zip Code (Plus 4) 19081714 11 18 2021 \$ 100.00 Full Name of Contributor SHARON DALY State PA Zip Code (Plus 4) 19081714 11 18 2021 \$ 100.00 Full Name of Contributor SHARON DALY MO DAY YEAR YEAR \$ 100.00 Full Name of Contributor SHARON DALY MO DAY YEAR YEAR \$ 100.00 Full Name of Contributor LINDA EMORY HEALY MO DAY YEAR YEAR \$ 100.00 Full Name of Contributor 	LEANNE FOR PA			From:	om: <u>10/19/2021</u> To: <u>11/22/</u>						
KATHLEEN ADAMSON MO DAY YEAR Mailing Address 5 WATERFORD WAY 11 22 2021 5 250.00 City WALLINGFORD State Zip Code (Plus 4) 11 22 2021 5 250.00 Full Name of Contributor PA 190867214 MO DAY YEAR 7 <td< th=""><th colspan="10">DATE AMOUNT</th></td<>	DATE AMOUNT										
City WALLINGFORD State Zip Code (Plus 4) 11 22 2021 \$ 250.00 Full Name of Contributor Number of Contributor MO DAY YEAR YEAR 11 22 2021 \$ 250.00 Full Name of Contributor MO DAY YEAR MO DAY YEAR YEAR 100.00 City SWARTHMORE State Zip Code (Plus 4) 11 18 2021 \$ 100.00 Full Name of Contributor PA 190811714 MO DAY YEAR YEAR Full Name of Contributor State Zip Code (Plus 4) 11 18 2021 \$ 100.00 Full Name of Contributor State Zip Code (Plus 4) 11 18 2021 \$ 100.00 Full Name of Contributor Mo DAY YEAR YEAR \$ 100.00 Full Name of Contributor Mo DAY YEAR \$ 100.00 \$ 100.00 \$ <td></td> <td></td> <td>мо</td> <td>DAY</td> <td>YEAR</td> <td></td> <td></td>			мо	DAY	YEAR						
City WALLINGFORD State Zip Code (Plus 4) Mo DAY YEAR Full Name of Contributor NELL CLARK MO DAY YEAR 100.00 City SWARTHMORE State Zip Code (Plus 4) 11 18 2021 \$ 100.00 City SWARTHMORE State Zip Code (Plus 4) 11 18 2021 \$ 100.00 Full Name of Contributor PA 190811714 MO DAY YEAR \$ 100.00 Full Name of Contributor State Zip Code (Plus 4) 11 18 2021 \$ 100.00 City MEDIA State Zip Code (Plus 4) 11 18 2021 \$ 100.00 Full Name of Contributor IOA BEATTY RD MO DAY YEAR \$ 100.00 Full Name of Contributor PA 190631702 MO DAY YEAR \$ 100.00 Full Name of Contributor PA 190632301 10 19 2021 \$ 100.00 City MEDIA State Zip Code (Plus 4) 10 19 2021 \$ 100.00 <td>Mailing Address 5 WATERFORD</td> <td>WAY</td> <td></td> <td></td> <td></td> <td></td> <td>\$25</td> <td>50.00</td>	Mailing Address 5 WATERFORD	WAY					\$ 25	50.00			
Full Name of Contributor NELL CLARK MO DAY YEAR Mailing Address 139 RUTGERS AVE APT 4 11 18 2021 \$ 100.00 City SWARTHMORE State Zip Code (Plus 4) 11 18 2021 \$ 100.00 Full Name of Contributor SHARON DALY PA Igo Code (Plus 4) 11 18 2021 \$ 100.00 Full Name of Contributor SHARON DALY MO DAY YEAR \$ 100.00 Mailing Address 104 BEATTY RD MO DAY YEAR \$ 100.00 City MEDIA State Zip Code (Plus 4) 11 18 2021 \$ 100.00 Full Name of Contributor LINDA EMORY HEALY MO DAY YEAR \$ 100.00 Full Name of Contributor LINDA EMORY HEALY State Zip Code (Plus 4) 10 19 2021 \$ 100.00 Full Name of Contributor City MEDIA State Zip Code (Plus 4) 10 19 2021 \$ 100.00 Full Name of Contributor CHRISTINE FURRY Indo State Indo State	City WALLINGFORD	State	11	22	2021						
NELL CLARK MO DAY YEAR Mailing Address 139 RUTGERS AVE APT 4 The second		PA									
Lind Received Art PartZip Code (Plus 4) 19081171411182021\$100.00CitySWARTHMOREState PAZip Code (Plus 4) 19081171411182021\$100.00Full Name of Contributor SHARON DALYMoDAYYEAR PAYEAR 19063170211182021\$100.00CityMEDIAState PAZip Code (Plus 4) 19063170211182021\$100.00Full Name of Contributor LINDA EMORY HEALYMoDAYYEAR YEAR\$100.00Full Name of Contributor LINDA EMORY HEALYState PAZip Code (Plus 4) 19063230110192021\$100.00Full Name of Contributor LINDA EMORY HEALYState PAZip Code (Plus 4) 1906323011010192021\$100.00Full Name of Contributor CityMeDIAState PAZip Code (Plus 4) 1906323011010192021\$100.00Full Name of Contributor CHRISTINE FURRYMoDAYYEAR Y\$100.00Full Name of Contributor 		мо	DAY	YEAR							
City SWARTHMORE State Zip Code (Plus 4) 190811714 Mo DAY YEAR Full Name of Contributor SHARON DALY Mo DAY YEAR Mailing Address 104 BEATTY RD Mo DAY YEAR City MEDIA State Zip Code (Plus 4) 190631702 11 18 2021 \$ Full Name of Contributor LINDA EMORY HEALY PA Zip Code (Plus 4) 190632301 10 DAY YEAR Mailing Address 345 W SECOND ST Mo DAY YEAR City MEDIA State Zip Code (Plus 4) 190632301 10 19 2021 \$ Full Name of Contributor LINDA EMORY HEALY Mo DAY YEAR \$ 100.00 Full Name of Contributor CHRISTINE FURRY State Zip Code (Plus 4) 190632301 10 19 2021 \$ 100.00 Full Name of Contributor CHRISTINE FURRY I084 PRESIDENTS DR Mo DAY YEAR \$ 100.00	Mailing Address 139 RUTGERS A				\$ 10	0.00					
SHARON DALY MO DAY YEAR Mailing Address 104 BEATTY RD Tip Code (Plus 4) 11 18 2021 100.00 City MEDIA State Zip Code (Plus 4) 11 18 2021 2021 100.00 Full Name of Contributor PA 190631702 MO DAY YEAR YEAR 100.00 Mailing Address 345 W SECOND ST MO DAY YEAR YEAR 100.00 City MEDIA State Zip Code (Plus 4) 10 19 2021 YEAR Mailing Address 345 W SECOND ST Full Name of Contributor MO DAY YEAR YEAR Full Name of Contributor PA 190632301 10 19 2021 YEAR Full Name of Contributor PA 190632301 MO DAY YEAR YEAR Mailing Address 1084 PRESIDENTS DR MO DAY YEAR \$ 100.00	City SWARTHMORE			11	18	2021					
CityMEDIAState PAZip Code (Plus 4) 19063170211182021\$100.00Full Name of Contributor LINDA EMORY HEALYMoDAYYEARYEARMailing Address345 W SECOND STMoDAYYEARCityMEDIAState PAZip Code (Plus 4) 19063230110192021\$100.00Full Name of Contributor CHRISTINE FURRYMoDAYYEAR\$100.00Mailing Address1084 PRESIDENTS DRMoDAYYEAR\$100.00Mailing Address1084 PRESIDENTS DRII <td></td> <td></td> <td></td> <td>мо</td> <td>DAY</td> <td>YEAR</td> <td></td> <td></td>				мо	DAY	YEAR					
City MEDIA Mailing Address State 21p Code (Plus 4) 190631702 Mo DAY YEAR Full Name of Contributor Index State Mo DAY YEAR YEAR Mailing Address 345 W SECOND ST Mo DAY YEAR 100.00 City MEDIA State Zip Code (Plus 4) 10 19 2021 \$ 100.00 City MEDIA State Zip Code (Plus 4) 190632301 10 19 2021 \$ 100.00 Full Name of Contributor PA 190632301 Mo DAY YEAR \$ 100.00 Full Name of Contributor PA 190632301 Mo DAY YEAR \$ 100.00 Mailing Address 1084 PRESIDENTS DR Mo DAY YEAR \$ 100.00	Mailing Address 104 BEATTY RD						\$ 10)0.00			
Full Name of Contributor MO DAY YEAR Mailing Address 345 W SECOND ST MO DAY YEAR City MEDIA State Zip Code (Plus 4) 10 19 2021 \$ 100.00 Full Name of Contributor PA Zip Code (Plus 4) 190632301 10 19 2021 \$ 100.00 Full Name of Contributor PA 190632301 MO DAY YEAR \$ 100.00 Mailing Address 1084 PRESIDENTS DR I <td>City MEDIA</td> <td></td> <td></td> <td>11</td> <td>18</td> <td>2021</td> <td></td> <td></td>	City MEDIA			11	18	2021					
LINDA EMORY HEALY Mailing Address 345 W SECOND ST City MEDIA State Zip Code (Plus 4) 190632301 10 19 2021 \$ 100.00 10 10 19 10 10 10 10 10 10 10 10 10 10 10 10 10		PA	190631702								
City MEDIA State Zip Code (Plus 4) 10 19 2021 \$ 100.00 Full Name of Contributor PA 190632301 MO DAY YEAR Mailing Address 1084 PRESIDENTS DR I				мо	DAY	YEAR					
City MEDIA State Zip Code (Pids 4) PA 190632301 Image: Code (Pids 4) Full Name of Contributor MO DAY YEAR CHRISTINE FURRY Image: Code (Pids 4) Image: Code (Pids 4) Mailing Address 1084 PRESIDENTS DR Image: Code (Pids 4)	Mailing Address 345 W SECOND	ST					\$ 10)0.00			
CHRISTINE FURRY MO DAY YEAR Mailing Address 1084 PRESIDENTS DR Image: Comparison of the second	City MEDIA		10	19	2021						
\$ 100.00		мо	DAY	YEAR							
	Mailing Address 1084 PRESIDEN	Mailing Address 1084 PRESIDENTS DR					\$ 10	00.00			
City LITITZ State Zip Code (Plus 4) 10 25 2021 PA 175437327 10 25 2021	City LITITZ	10	25	2021							

Full Name of Contributor SARAH GRADEN	мо	DAY	YEAR	
Mailing Address 535 CORNELL AVE				\$ 100.00
CitySWARTHMOREStateZip Code (Plus 4)PA190812401	10	19	2021	
Full Name of Contributor BETH GROSS	мо	DAY	YEAR	
Mailing Address 214 HARVARD AVE				\$ 100.00
CitySWARTHMOREStateZip Code (Plus 4)PA190811631	10	31	2021	
Full Name of Contributor SHIRLEE HOWE	мо	DAY	YEAR	
Mailing Address 309 BRYN MAWR AVE				\$ 250.00
CityBALA CYNWYDStateZip Code (Plus 4)PA190042606	10	25	2021	
Full Name of Contributor MELISSA KENNEDY	мо	DAY	YEAR	
	мо		YEAR	\$ 100.00
MELISSA KENNEDY Mailing Address 557 JUNIATA AVE	мо 10	DAY 19	YEAR 2021	\$ 100.00
MELISSA KENNEDY Mailing Address 557 JUNIATA AVE City SWARTHMORE State Zip Code (Plus 4)				\$ 100.00
MELISSA KENNEDY Mailing Address 557 JUNIATA AVE City SWARTHMORE PA 2ip Code (Plus 4) 190812414 Full Name of Contributor	10	19	2021	\$ 200.00
MELISSA KENNEDY Mailing Address 557 JUNIATA AVE City SWARTHMORE PA 2ip Code (Plus 4) 190812414 Full Name of Contributor KAITLIN MCKENZIE	10	19	2021	
MELISSA KENNEDY Mailing Address 557 JUNIATA AVE City SWARTHMORE Full Name of Contributor KAITLIN MCKENZIE Mailing Address 871 PARKRIDGE DR City MEDIA FUL Address 871 PARKRIDGE DR FUL ADDIA FUL ADD	10 MO	19 DAY	2021 YEAR	
MELISSA KENNEDY Mailing Address 557 JUNIATA AVE City SWARTHMORE State Zip Code (Plus 4) PA 190812414 Full Name of Contributor KAITLIN MCKENZIE Mailing Address 871 PARKRIDGE DR City MEDIA State Zip Code (Plus 4)	10 MO 10	19 DAY 19	2021 YEAR 2021	

						PAGE 6
Full Name of Contributor HELEN NADEL			мо	DAY	YEAR	
Mailing Address 15 WOODBR	OOK LN					\$ 250.00
City SWARTHMORE	State	Zip Code (Plus 4)	10	22	2021	
SWARTIMORE	РА	190811235				
Full Name of Contributor VERA K ORTHLIEB			мо	DAY	YEAR	
Mailing Address 13 GREEN V	ALLEY RD					\$ 75.00
City WALLINGFORD	State	Zip Code (Plus 4)	10	19	2021	
· WALLINGI OKD	РА	190866050				
Full Name of Contributor ERIN OWEN	мо	DAY	YEAR			
Mailing Address 101 W NIPPO				\$ 100.00		
	State	Zip Code (Plus 4)	11	18	2021	
CITY PHILADELPHIA	PA	191192428				
Full Name of Contributor MICHAEL SPEIRS			мо	DAY	YEAR	
Mailing Address 545 STRATH	HAVEN AVE					\$ 100.00
City SWARTHMORE	State	Zip Code (Plus 4)	11	18	2021	
SWARTHMORE	PA	190812404				
Full Name of Contributor WILLIAM TURPIN	·		мо	DAY	YEAR	
Mailing Address 7 E SYLVAN	AVE					\$ 100.00
City RUTLEDGE	State	Zip Code (Plus 4)	11	12	2021	
RUTLEDGE	PA	190702122				
Full Name of Contributor FLORA WOLF	мо	DAY	YEAR			
Mailing Address 1737 CHESTNUT ST APT 1100						\$ 250.00
ity PHILADELPHIA State Zip Code (Plus 4)		10	19	2021		
	PA	191034100				
						PAGE TOTAL
	A on Schodulo T J	Detailed Summary Page, S				\$ 2,375.00

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 Candio	lame of Filing Committee or Candidate			Reporting Period						
			From:			То:				
				DA	TE		А	MOUNT		
Full Name of Contributing Committe	ee			мо	DAY	YEAR				
Mailing Address							\$	0.00		
City	State	Zip Cod	e (Plus 4)							
							-	PAGE TOTAL		
Enter Grand Total of Part C on S	chedule 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.)

lame of Filing Committee or Candidate Ro				Repo	eporting Period				
LEANNE FOR PA				Fron	n:	<u>10/19/2</u>	<u>021</u> То	:: <u>11/22/2021</u>	
					DA	ATE		AMOUNT	
Full Name of Contributor ROBERT SCOTT					мо	DAY	YEAR		
Mailing 23 S PRINCETON AVE								\$ 500.00	
City SWARTHMORE	State	Zip	o Code (Plus	4)	11	20	2021		
	РА	PA 190811516							
Employer Name ROBERT W SCOTT PC	Occupat	t ion	AWYER						
Employer Mailing Address/Principal Place of City Business						State		Zip Code (Plus 4)	
205 N MONROE ST MEDIA						PA		190633052	
Full Name of Contributor LESLIE F. MILLER					мо	DAY	YEAR		
Mailing 459 HUSTON RD								\$ 1,000.00	
City RADNOR	State	Zip	o Code (Plus	4)	10	25	2021		
	РА	19	0874421						
Employer Name _{N/A}					Occupation RETIRED				
Employer Mailing Address/Principal Plac Business	e of		City			Zip Code (Plus 4)			
123 S BROAD STSTE 1827			PHILADE	LPHIA		PA		191091026	
Full Name of Contributor WILLIAM H EWING ESQ.					мо	DAY	YEAR		
Mailing 510 E MOUNT PLEASA Address	ANT AVE							\$ 250.00	
City PHILADELPHIA State Zip Code (Plus 4)				4)	10	19	2021		
PA 191191232									
Employer Name SELF					Occupation ARBITRATOR			ATOR	
Employer Mailing Address/Principal Place of City Business			State Zi			Zip Code (Plus 4)			
510 E MOUNT PLEASANT AVE PHILADELPHIA				A PA 191191232			191191232		

Full Name of Contributor WILLIAM H EWING ESQ.	ILLIAM H EWING ESQ.					YEAR			
Mailing 510 E MOUNT PL	EASANT AVE						\$	250.00	
City PHILADELPHIA	State	Zi	p Code (Plus 4)	10	19	2021			
	PA	19	91191232						
Employer Name SELF					ion A	RBITRA	ATOR		
Employer Mailing Address/Principal Place of City Business					State		Zip Co	de (Plus 4)	
510 E MOUNT PLEASANT AVE PHILADELPHIA					PA		1911	91232	
Full Name of Contributor					DAY	YEAR			
TIM BAK				мо	2				
Mailing 21 E STATE ST Address							\$	500.00	
City MEDIA	State	Zi	p Code (Plus 4)	11	22	2021			
	PA	19	90632917						
Employer Name J. TIMOTHY BAK	ATTORNEY AT LAW			Occupat	ion A	TTORN	EY		
Employer Mailing Address/Principal Business	Place of		City		State		Zip Co	de (Plus 4)	
21 E STATE ST MEDIA					РА			190632917	
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Secti						Γ	I	PAGE TOTAL	
,							\$	2,500.00	

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			Report	ing Perio	d					
			From:	om: To				:		
				D	ATE			AMOUNT	ſ	
Full Name				мо	DAY	YEAR				
Mailing Address							\$	5	0.00	
City	City State Zip Code (Plus 4)									
Receipt Description										
Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section				4				PAGE TO	TAL	
nter Grand Total of Part E on Schedule 1, Detailed Summary Page, 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	
LEANNE FOR PA	From:	<u>10/19/2021</u> то:	<u>11/22/2021</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	lame of Filing Committee or Candidate			Reporting 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:	Description of Contribution:								
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detail				mary Pag	je,	PAGE	TOTAL		
	Section 2.				4	5	0.00		

PAGE 13

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

Name of Filing Committee or Candidate	1				Re	porting P	Period				
					Fro	om:		To:	То:		
					I		DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR				
Mailing Address									\$	0.00	
City	State		Zip Code(I	Plus 4)							
Employer of Contributor			•		Occupation						
Employer Mailing Address/Principal Place of City State Business						Zip 4)	Code(Plus	Descri	ption	of Contribution	
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Deta Summary Page, Section 3.					etaile	ed				PAGE TOTAL 0.00	

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period					
LEANNE FOR PA			From	om <u>10/19/2021</u> To:			<u>11/22/2021</u>	
				DATE				
To Whom Paid ACTBLUE				DAY	YEAR			
Mailing Address 366 SUMMER ST			11	4	2021	\$	116.83	
City SOMERVILLE	State MA	Zip Code (Plus 4) 021443132	Descrip CREDIT					
To Whom Paid EXCELLENCE IN EDUCATION				DAY	YEAR			
Mailing Address PO BOX 1005			10	19	2021	\$	125.00	
City BROOKHAVEN	State PA	Zip Code (Plus 4) 190150005	Description of Expenditure CONTRIBUTION					
To Whom Paid LAURIE FRIEDMAN			мо	DAY	YEAR			
Mailing Address 707 HEMLOCK RD			11	13	2021	\$	600.00	
City MEDIA	State PA	Zip Code (Plus 4) 190631709	Description of Expenditure CONSULTING					
To Whom Paid FRIENDS OF GINA H CURRY			мо	DAY	YEAR			
Mailing Address PO BOX 1241			10	25	2021	\$	1,000.00	
City LANSDOWNE	State PA	Zip Code (Plus 4) 190508241	Description of Expenditure CONTRIBUTION					
To Whom Paid VANTIV.COM		<u> </u>	мо	DAY	YEAR			
Mailing Address 8500 GOVERNORS HILL DR			11	8	2021	\$	198.95	
City SYMMES TWP	State OH	Zip Code (Plus 4) 452491384		Description of Expenditure CREDIT CARD PROCESSING FEE				
Enter Grand Total of Expendit	ures on Dago 1. Do	nort Cover Page Them	 ח				PAGE TOTAL	
	ures on raye 1, Ke	port cover Page, Item I	<i>.</i>			\$	2,040.78	

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					
LEANNE FOR PA			From:	<u>10/19/2021</u> To:			<u>11/22/2021</u>	
					DATE			Outstanding Balance of Debt
Name of Creditor EDGE HILL STRATEGIES, LLC					DAY	YEAR		
Mailing Address PO BOX 22390				12	23	2019	\$	50,700.00
City PHILADELPHIA	State	Zip Code (Pl	lus 4) Description of Debt					
	РА	191102390		CONSULTING				
		-		-				PAGE TOTAL
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							\$	50,700.00