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	20012	257			Repor Filed		CANDI	DATE	СОМ	MITTEE	\checkmark	LOBBYIST	
Name of Filing C	Committee, O	Candida	ite or Lo	obbyist:		LEACH	DAYL	IN DAYP	AC					
Street Address:	PO BOX	60178	3											
City:	KING O	F PRUS	SIA					State:	PA		Zip Co	de: 19	406-0000	
TYPE OF REPORT	6TH TUESDA PRE-PRIMAR		1.	2ND FRIDA PRIMARY	Y PRE	- 2.	30 DA PRIMA		POST-	3.	AMENDI REPORT		Yes 🗸 No)
(place X to the right of	6TH TUESDA PRE-ELECTIO		4.	2ND FRIDA ELECTION	Y PRE	5.	30 DA		POST-	5.	TERMIN REPORT		Yes 🗸 No)
report type)	ANNUAL RE	PORT	7. X	Year 2021				NG METHO CHECK O			PAPER			TTE
Name of Office S	Sought by Ca	andidat	e:					DATE O	OF ELEC	TION	District Number		Party Code	County Code
SENATOR IN T	HE GENERA	L ASSE	MBLY					мо	DAY	YEAR	17	STS	DEM	46
			[I				11		2 2021	4		STRUCTIONS FOR	CODES)
Summary of Expenditures		and	мо	DAY	YEAR			мо	DAY	YEAR	F	OR OFFIC	E USE ONLY	
Expenditures			1	23	2	021	r o	12	3	1 202:				
A. Amount Bro	ught Forwaı	rd From	Last Re	eport			\$			458.85	_			
B. Total Monet	ary Contribu	itions A	nd Rece	eipts (From	1 Sche	dule I)	\$		5,000.00					
C. Total Funds	Available (S	Sum Of	Lines A	and B)			\$			5,458.85	5			
D. Total Expen	ditures (Fro	m Sche	dule III	[)			\$			5,458.85				
E. Ending Cash	Balance (S	ubtract	Line D	From Line	C)		\$			0.00				
F. Value Of In-	Kind Contrib	outions	Receive	ed (From S	chedu	le II)	\$		0.00					
G. Unpaid Debt	ts And Oblig	ations((From S	chedule IV	')		\$			0.00				
					AFF	IDAV	IT SE	CTION						
PART I - If this is	s a Committe	ee repo	rt, trea	surer sign	here.	If this i	s a Cai	ndidate re	eport, ca	andidate si	gn here.			
I swear (or affirm) correct and comple		ort, inclu	iding the	attached sc	hedule	s filed on	paper	or by elect	ronic me	dium, are to	the best o	of my knov	vledge and beli	ef , true
Sworn to and subs	cribed before day of	me this		20						Signatu	re of Perso	on Submitt	ing Report	
							_				Prir	nted Name		
My Commission Ex		Signatur	e								Ema	ail		
-	мо)	DA	AY	YR		_		Area	a Code			one Number	
Part II- If this is	a report of	a cand	idate's a	authorized	Comn	nittee, (Candid	ate shall	sian he	re.				
I swear (or affirm) No 320) as amende	that to the b								-		sions of th	ne act of Ju	ıne 3,1937 (P.I	1333,
Sworn to and subso	ribed before r	ne this									Signature	of Candida	ite	
	day of						_				Drint	ed Name		
	Signature													
My Commission Exp	-										Ema	ail		
	I	мо	DA	AY	YR	1	-		Area C	ode	D	Daytime Te	elephone Numb	er

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Name of Filing Committee or Candidate	Reportin	g Period		
LEACH, DAYLIN DAYPAC	From:	<u>11/23/20</u>	<u>21</u> To:	<u>12/31/2021</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)			\$	5,000.00
All Other Contributions (Part D)			\$	0.00
TOTAL for the Reporting	Period	(3)	\$	5,000.00
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 Page			\$	5,000.00

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 Candidate					Reporting 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

\$

Use this Part to ite	emize all other 0.01 to \$250.0	1 TO \$250.00 r contribution 00 in the repo	s w ortir	ith an 1g per	aggreg iod.			rom
Name of Filing Committee or Candidat	e		Rep	orting P	eriod			
From:						Τα):	
					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 S	Schedule I, Detail	ed Summary Pag	je, Se	ection 2	<u>.</u>		\$	0.00

PAGE 5

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						
LEACH, DAYLIN DAYPAC	From:	<u>11/2</u>	2/31/2021							
				DA	TE		A	MOUNT		
Full Name of Contributing Commit LABORER'S DIST COUNCIL OF TH		PHILA & VI	CINITY	мо	DAY	YEAR				
Mailing Address 61 NORTH BR	DAD ST						\$	5,000.00		
City PHILADELPHIA	State PA	Zip Cod 191230	e (Plus 4) 1000	6	25	2020				
Enter Grand Total of Part C on	Schedule I, Detail	ed Summary Pa	age, Sectio	n 3.	-		\$	PAGE TOTAL 5,000.00		

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	Name of Filing Committee or Candidate Repo				od			
			From:			То:		
				D	ATE		AMOUNT	
Full Name				мо	DAY	YEAR		
Mailing Address							\$ i	0.00
City	State	Zip Code (Plus 4)					
Receipt Description						•		
Enter Grand Total of Part E on Schedu	le T. Detailed Sumn	nary Page	Section	4			PAGE TO	ΓAL
		iaiy raye,	Section	7.			\$	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	
LEACH, DAYLIN DAYPAC	From:	<u>11/23/2021</u> то:	<u>12/31/2021</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	Reporting Period						
	From:			То:			
				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 Candidate					Reporting Period					
					From:		То:			
						DATE			AMOUNT	
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								\$	0.00	
City	State		Zip Code(Plus	4)						
Employer of Contributor			1		Occupa	l tion				
Employer Mailing Address/Prin Business	cipal Place of	City	Sta	te	Zip 4)	Code(Plus	Descri	ption of	Contribution	
Enter Grand Total of Part G	Con Schedule II	In-Kind	Contributions	Dota	iled				PAGE TOTAL	

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

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate			Reporting Period					
LEACH, DAYLIN DAYPAC		From <u>11/23/2021</u> To: <u>12</u> /				<u>12/31/2021</u>		
				DATE			AMOUNT	
To Whom Paid GO DADDY			мо	DAY	YEAR			
Mailing Address 14455 HAYDEN RD			7	27	2020	\$	21.20	
City SCOTTSDALE	State AZ	Zip Code (Plus 4) 85260		tion of Exp ERVICES	penditure	1		
To Whom Paid GO DADDY			мо	DAY	YEAR			
Mailing Address 14455 HAYDEN RD			8	26	2020	\$	21.20	
City SCOTTSDALE	State AZ	Zip Code (Plus 4) 85260	Description of Expenditure WEB SERVICES					
To Whom Paid GO DADDY			мо	DAY	YEAR			
Mailing Address 14455 HAYDEN RD			9	28	2020	\$	21.20	
City SCOTTSDALE	State AZ	Zip Code (Plus 4) 85260	Description of Expenditure WEB SERVICES					
To Whom Paid GO DADDY			мо	DAY	YEAR			
Mailing Address 14455 HAYDEN RD			10	26	2020	\$	21.20	
City SCOTTSDALE	State AZ	Zip Code (Plus 4) 85260	Description of Expenditure WEB SERVICES					
To Whom Paid GO DADDY			мо	DAY	YEAR			
Mailing Address 14455 HAYDEN RD			11	25	2020	\$	21.20	
City SCOTTSDALE	State AZ	Zip Code (Plus 4) 85260		otion of Exp ERVICES	oenditure	1		

To Whom Paid GO DADDY			мо	DAY	YEAR				
Mailing Address 14455 HAYDEN RD			12	28	2020	\$		21.20	
City SCOTTSI		State	Zip Code (Plus 4)	Descrir	i tion of Exp	l Denditure			
2 300113		AZ	85260		ERVICES	Jenuiture			
To Whom Paid PNC BANK				мо	DAY	YEAR			
Mailing Address 109 E. DEKALB PIKE			7	1	2020	\$		2.50	
City KING OF	PRUSSIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	, Denditure			
		PA	19406	Description of Expenditure BANK FEE					
To Whom Paid PNC BANK			мо	DAY	YEAR				
Mailing Address 109 E. DEKALB PIKE			8	3	2020	\$		2.50	
City KING OF	PRUSSIA	State	Zip Code (Plus 4)	Descrip	tion of Exp	Denditure			
		PA	19406	BANK FEE					
To Whom Paid PNC BANK				мо	DAY	YEAR			
	109 E. DEKALB PI	KE	I	мо 9	DAY	YEAR 2020	\$		2.50
PNC BANK Mailing Address	109 E. DEKALB PI	KE State	Zip Code (Plus 4)	9		2020			2.50
PNC BANK Mailing Address		-	Zip Code (Plus 4) 19406	9	1 Dition of Exp	2020			2.50
PNC BANK Mailing Address		State		9 Descrip	1 Dition of Exp	2020			2.50
PNC BANK Mailing Address City KING OF To Whom Paid		State PA		9 Descrip BANK F	1 Detion of Exp THE	2020 penditure			2.50
PNC BANK Mailing Address City KING OF To Whom Paid PNC BANK Mailing Address	PRUSSIA 109 E. DEKALB PI	State PA		9 Descrip BANK F MO 10	1 Day Day	2020 penditure YEAR 2020	\$		
PNC BANK Mailing Address City KING OF To Whom Paid PNC BANK Mailing Address	PRUSSIA	State PA KE	19406	9 Descrip BANK F MO 10	1 etion of Exp EE DAY 1	2020 penditure YEAR 2020	\$		
PNC BANK Mailing Address City KING OF To Whom Paid PNC BANK Mailing Address	PRUSSIA 109 E. DEKALB PI	State PA KE State	19406 Zip Code (Plus 4)	9 Descrip BANK F MO 10 Descrip	1 etion of Exp EE DAY 1	2020 penditure YEAR 2020	\$		
PNC BANK Mailing Address City KING OF To Whom Paid PNC BANK Mailing Address City KING OF To Whom Paid	PRUSSIA 109 E. DEKALB PI	State PA KE State PA	19406 Zip Code (Plus 4)	9 Descrip BANK F MO 10 Descrip BANK F	1 etion of Exp EE DAY 1 etion of Exp EE	2020 penditure YEAR 2020 penditure	\$		
PNC BANK Mailing Address City KING OF To Whom Paid PNC BANK Mailing Address City KING OF To Whom Paid PNC BANK Mailing Address	PRUSSIA 109 E. DEKALB PI	State PA KE State PA	19406 Zip Code (Plus 4)	9 Descrip BANK F MO 10 Descrip BANK F MO	1 ption of Exp EE DAY 1 ption of Exp EE DAY	2020 Denditure YEAR 2020 Denditure YEAR 2020	\$		2.50

							TAGE 13
To Whom Paid PNC BANK			мо	DAY	YEAR		
Mailing Address 109 E. DEKALB PIKE			12	1	2020	\$	2.50
City KING OF PRUSSIA	State PA	Zip Code (Plus 4) 19406	Description of Expenditure BANK FEE				
To Whom Paid EXTRA SPACE STORAGE			мо	DAY	YEAR		
Mailing Address 282 S. GULPH ROAD			7	10	2020	\$	271.26
City KING OF PRUSSIA	State PA	Zip Code (Plus 4) 19406	Description of Expenditure STORAGE				
To Whom Paid CROSSROADS CONSULTING INC.			мо	DAY	YEAR		
Mailing Address 1825 K STREET NW SUITE 450			7	27	2020	\$	3,771.52
City WASHINGTON	State DC	Zip Code (Plus 4) 20006	Description of Expenditure CONSULTING FEES				
To Whom Paid LIVE LEARN LLC/PEREGRINE STRATEGIES			мо	DAY	YEAR		
Mailing Address 442 LEEDOM ST			7	1	2020	\$	1,273.87
City JENKINTOWN	State PA	Zip Code (Plus 4) 19014	Description of Expenditure CONSULTING FEES				
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						\$	PAGE TOTAL 5,458.85