

# Campaign Finance Report

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

<b>Filer Identification Number :</b> 20140067		<b>Report Filed By :</b>		<b>CANDIDATE</b>		<b>COMMITTEE</b> <input checked="" type="checkbox"/>		<b>LOBBYIST</b>			
<b>Name of Filing Committee, Candidate or Lobbyist:</b> Leanne for Pa											
<b>Street Address:</b>											
<b>City:</b> Swarthmore				<b>State:</b> PA		<b>Zip Code:</b> 19081					
<b>TYPE OF REPORT</b>  (place X to the right of report type)	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDAY PRE-PRIMARY	2.	30 DAY POST-PRIMARY	3.	AMENDMENT REPORT?	Yes	<input checked="" type="checkbox"/> No		
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY POST-ELECTION	6.	TERMINATION REPORT?	Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7. X	Year 2014	<b>FILING METHOD ( ) CHECK ONE</b>			<b>PAPER</b> <input checked="" type="checkbox"/>	<b>DISKETTE</b>			
<b>Name of Office Sought by Candidate:</b>					<b>DATE OF ELECTION</b>			<b>District Number</b>	<b>Office Code</b>	<b>Party Code</b>	<b>County Code</b>
					<b>MO</b>	<b>DAY</b>	<b>YEAR</b>				
					11	4	2014				
<b>Summary of Receipts and Expenditures from:</b>					<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
					11	25	2014				<b>TO</b>
					12	31	2014				
<b>A. Amount Brought Forward From Last Report</b>					\$		1,331.25				
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>					\$		395.00				
<b>C. Total Funds Available (Sum Of Lines A and B)</b>					\$		1,726.25				
<b>D. Total Expenditures (From Schedule III)</b>					\$		1,347.22				
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>					\$		379.03				
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>					\$		235.00				
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>					\$		2,551.60				

## AFFIDAVIT SECTION

**PART I - If this is a Committee report, treasurer sign here. If this is a Candidate report, candidate sign here.**

I swear (or affirm) that this report, including the attached schedules filed on paper or by electronic medium, are to the best of my knowledge and belief, true correct and complete.

Sworn to and subscribed before me this

day of 20

Signature of Person Submitting Report

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**Part II- If this is a report of a candidate's authorized Committee, Candidate shall sign here.**

I swear (or affirm) that to the best of my knowledge and belief this political committee has not violated any provisions of the act of June 3, 1937 (P.L. 1333, No 320) as amended.

Sworn to and subscribed before me this

day of 20

Signature of Candidate

Printed Name

Signature

Email

My Commission Expires

MO DAY YR

Area Code Daytime Telephone Number

**SCHEDULE I**  
**CONTRIBUTIONS AND RECEIPTS**  
**Detailed Summary Page**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
Leanne for Pa	From: <u>11/25/2014</u> To: <u>12/31/2014</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 45.00

<b>2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)</b>	
<b>Contributions Received From Political Committees (Part A)</b>	\$ 250.00
<b>All Other Contributions (Part B)</b>	\$ 100.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 350.00

<b>3. Contributions Received Over \$250.00 (From Part C and Part D)</b>	
<b>Contributions Received From Political Committees (Part C)</b>	\$ 0.00
<b>All Other Contributions (Part D)</b>	\$ 0.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 0.00

<b>4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc . (From Part E)</b>	
<b>TOTAL for the Reporting Period (4)</b>	\$ 0.00

<b>Total Monetary Contributions and Receipts During this Reporting Period (Add and enter amount totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Page, Item B.)</b>	\$ 395.00
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# 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.**

<b>Name of Filing Committee or Candidate</b>  Leanne for Pa	<b>Reporting Period</b>  <b>From:</b> <u>11/25/2014</u> <b>To:</b> <u>12/31/2014</u>
<b>DATE</b>	
<b>AMOUNT</b>	

<b>Full Name of Contributing Committee</b> PA Future			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b>			12	15	2014	
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 19102				

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

<b>PAGE TOTAL</b>
\$ 250.00

**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)**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
Leanne for Pa	<b>From:</b> <u>11/25/2014</u> <b>To:</b> <u>12/31/2014</u>

DATE				AMOUNT
<b>Full Name of Contributor</b>				
Robert Cheetham				
<b>Mailing Address</b>				
<b>City</b> Philadelphia	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 191303202	12 16 2014	\$ 100.00

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

<b>PAGE TOTAL</b>
\$ 100.00

## 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.**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
	<b>From:</b> <b>To:</b>

			DATE			AMOUNT	
Full Name of Contributing Committee			MO	DAY	YEAR	\$ 0.00	
Mailing Address							
City	State	Zip Code (Plus 4)					

**Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.**

<b>PAGE TOTAL</b>	
\$	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: <span style="float: right;">To:</span>

			DATE	AMOUNT
Full Name of Contributor			MO	DAY
Mailing Address			YEAR	\$ 0.00
City	State	Zip Code (Plus 4)		
Employer Name			Occupation	
Employer Mailing Address/Principal Place of Business	City	State	Zip Code (Plus 4)	

Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Section 3.

<b>PAGE TOTAL</b>
\$ 0.00

## 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	Reporting Period  From: <span style="float: right;">To:</span>
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				DATE	AMOUNT		
Full Name				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code (Plus 4)					
Receipt Description							

Enter Grand Total of Part E on Schedule I, Detailed Summary Page, Section 4.

<b>PAGE TOTAL</b>
\$ 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**

<b>Name of Filing Committee or Candidate</b>		<b>Reporting Period</b>	
Leanne for Pa		From: <u>11/25/2014</u> To: <u>12/31/2014</u>	
<b>1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR</b>			
TOTAL for the Reporting Period		(1)	\$ 0.00
<b>2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)</b>			
TOTAL for the Reporting Period		(2)	\$ 235.00
<b>3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)</b>			
TOTAL for the Reporting Period		(3)	\$ 0.00
TOTAL VALUE OF IN-KIND CONTRIBUTIONS DURING THIS REPORTING PERIOD (Add and enter amount totals from Boxes 1,2, and 3; also enter on Page 1, Reports Cover Page, Item F.)			\$ 235.00



**SCHEDULE II**  
**PART F**  
**IN-KIND CONTRIBUTIONS RECEIVED**  
**VALUE OF \$50.01 TO \$250.00**

<b>Name of Filing Committee or Candidate</b>  Leanne for Pa	<b>Reporting Period</b>  <b>From:</b> <u>11/25/2014</u> <b>To:</b> <u>12/31/2014</u>
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	
Leanne Krueger						\$ 235.00
Mailing Address						
City Wallingford	State PA	Zip Code (Plus 4) 190867213	12	1	2014	
<b>Description of Contribution:</b> Database						
<b>Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.</b>						<b>PAGE TOTAL</b>  \$ 235.00

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

Name of Filing Committee or Candidate	Reporting Period
	From: To:

				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$ 0.00
Mailing Address							
City	State	Zip Code(Plus 4)					
Employer of Contributor				Occupation			
Employer Mailing Address/Principal Place of Business		City	State	Zip Code(Plus 4)	Description of Contribution		
Enter Grand Total of Part G on Schedule II, In-Kind Contributions Detailed Summary Page, Section 3.						PAGE TOTAL 0.00	

## SCHEDULE III STATEMENT OF EXPENDITURES

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
Leanne for Pa	From <u>11/25/2014</u> To: <u>12/31/2014</u>

				DATE	AMOUNT		
To Whom Paid				MO	DAY	YEAR	\$ 45.00
Beneficial Bank				12	16	2014	
Mailing Address				12	16	2014	\$ 45.00
City	Springfield	State	Zip Code (Plus 4)	Description of Expenditure			
		PA	190643839	Account analysis fee			
To Whom Paid				MO	DAY	YEAR	\$ 250.00
Delaware County Democratic Committee				12	4	2014	
Mailing Address				12	4	2014	\$ 250.00
City	Media	State	Zip Code (Plus 4)	Description of Expenditure			
		PA	190630473	Election Night Party			
To Whom Paid				MO	DAY	YEAR	\$ 472.50
Leanne for PA				12	31	2014	
Mailing Address				12	31	2014	\$ 472.50
City	Swarthmore	State	Zip Code (Plus 4)	Description of Expenditure			
		PA	190810022	Audit Adjustment			
To Whom Paid				MO	DAY	YEAR	\$ 30.00
NGP-VAN, Inc				12	30	2014	
Mailing Address				12	30	2014	\$ 30.00
City	Washington	State	Zip Code (Plus 4)	Description of Expenditure			
		DC	200055006	Database			
To Whom Paid				MO	DAY	YEAR	\$ 25.00
Pastuszek Real Estate				12	4	2014	
Mailing Address				12	4	2014	\$ 25.00
City	Swarthmore	State	Zip Code (Plus 4)	Description of Expenditure			
		PA	190811535	Water Bill			
To Whom Paid				MO	DAY	YEAR	\$ 263.22
Pastuszek Real Estate				12	4	2014	
Mailing Address				12	4	2014	\$ 263.22
City	Swarthmore	State	Zip Code (Plus 4)	Description of Expenditure			
		PA	190811535	Utility Bills			

<b>To Whom Paid</b> Sage Payment Solutions			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 131.67
<b>Mailing Address</b>			12	1	2014	
<b>City</b> McLean	<b>State</b> VA	<b>Zip Code (Plus 4)</b> 221024304	<b>Description of Expenditure</b> Credit Card Processing Fee			

  

<b>To Whom Paid</b> Vonage America			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 39.83
<b>Mailing Address</b>			11	28	2014	
<b>City</b> Holmdel	<b>State</b> NJ	<b>Zip Code (Plus 4)</b> 077332136	<b>Description of Expenditure</b> Phone Service			

  

<b>To Whom Paid</b> Vonage America			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>\$</b> 90.00
<b>Mailing Address</b>			12	29	2014	
<b>City</b> Holmdel	<b>State</b> NJ	<b>Zip Code (Plus 4)</b> 077332136	<b>Description of Expenditure</b> Phone Service			

  

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						<b>\$</b> 1,347.22

**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

<b>Name of Filing Committee or Candidate</b>  Leanne for Pa	<b>Reporting Period</b>  <b>From:</b> <u>11/25/2014</u> <b>To:</b> <u>12/31/2014</u>
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				DATE		Outstanding Balance of Debt	
Name of Creditor Strassheim Graphic Design and Press Corp				MO	DAY	YEAR	\$ 2,087.04
Mailing Address				10	31	2014	
City	Philadelphia	State	PA	Zip Code (Plus 4)	Description of Debt		
				191021034	Print and Mail Services		
Name of Creditor Verizon				MO	DAY	YEAR	\$ 464.56
Mailing Address				8	13	2014	
City	Springfield	State	PA	Zip Code (Plus 4)	Description of Debt		
				190641232	Phone Services		
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL
							\$ 2,551.60