

Campaign Finance Report

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

Filer Identification Number :		20140067		Report Filed By :		CANDIDATE		COMMITTEE <input checked="" type="checkbox"/>		LOBBYIST		
Name of Filing Committee, Candidate or Lobbyist: Leanne for Pa												
Street Address: PO Box 22												
City: Swarthmore						State: PA			Zip Code: 19081			
TYPE OF REPORT (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		No	<input checked="" type="checkbox"/>	
	ANNUAL REPORT	7. X	Year 2014	FILING METHOD () CHECK ONE			PAPER	<input checked="" type="checkbox"/>	DISKETTE			
Name of Office Sought by Candidate:						DATE OF ELECTION			District Number	Office Code	Party Code	County Code
						MO	DAY	YEAR				
						11	4	2014				
Summary of Receipts and Expenditures from:						MO	DAY	YEAR	FOR OFFICE USE ONLY			
						11	25	2014				TO
						12	31	2014				
A. Amount Brought Forward From Last Report						\$ 1,331.25						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 395.00						
C. Total Funds Available (Sum Of Lines A and B)						\$ 1,726.25						
D. Total Expenditures (From Schedule III)						\$ 1,347.22						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 379.03						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 235.00						
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 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

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

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

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

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 Period (4)	\$ 0.00

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.)	\$ 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.**

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

Full Name of Contributing Committee PA Future			MO	DAY	YEAR	\$ 250.00
Mailing Address 200 S Broad 200 South St			12	15	2014	
City Philadelphia	State PA	Zip Code (Plus 4) 19102				

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

PAGE TOTAL
\$ 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)**

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

				DATE			AMOUNT		
Full Name of Contributor					MO	DAY	YEAR	\$	100.00
Robert Cheetham									
Mailing Address					12	16	2014		
1911 Brandywine St									
City		State		Zip Code (Plus 4)					
Philadelphia		PA		191303202					

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

PAGE TOTAL
\$ 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.

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

			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.

PAGE TOTAL
\$ 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: To:

			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	
Mailing Address						\$ 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.

PAGE TOTAL
\$ 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: To:

			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.

PAGE TOTAL
\$ 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	
Leanne for Pa		From: <u>11/25/2014</u> To: <u>12/31/2014</u>	
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR			
TOTAL for the Reporting Period		(1)	\$ 0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)			
TOTAL for the Reporting Period		(2)	\$ 235.00
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)			
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

Name of Filing Committee or Candidate Leanne for Pa	Reporting Period From: <u>11/25/2014</u> To: <u>12/31/2014</u>
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				DATE			AMOUNT
Full Name of Contributor				MO	DAY	YEAR	
Leanne Krueger							
Mailing Address 815 S Providence Rd				12	1	2014	\$ 235.00
City Wallingford	State PA	Zip Code (Plus 4) 190867213					
Description of Contribution: Database							
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.							PAGE TOTAL \$ 235.00

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

Name of Filing Committee or Candidate				Reporting Period			
				From:		To:	
<div> <div>DATE</div> <div>AMOUNT</div> </div>							
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

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

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
Beneficial Bank				
Mailing Address 537 Baltimore Pike	12	16	2014	\$ 45.00
City Springfield	State PA	Zip Code (Plus 4) 190643839	Description of Expenditure	
			Account analysis fee	
To Whom Paid	MO	DAY	YEAR	
Delaware County Democratic Committee				
Mailing Address PO Box 473	12	4	2014	\$ 250.00
City Media	State PA	Zip Code (Plus 4) 190630473	Description of Expenditure	
			Election Night Party	
To Whom Paid	MO	DAY	YEAR	
Leanne for PA				
Mailing Address PO Box 22	12	31	2014	\$ 472.50
City Swarthmore	State PA	Zip Code (Plus 4) 190810022	Description of Expenditure	
			Audit Adjustment	
To Whom Paid	MO	DAY	YEAR	
NGP-VAN, Inc				
Mailing Address 1101 15th St NW Ste 500	12	30	2014	\$ 30.00
City Washington	State DC	Zip Code (Plus 4) 200055006	Description of Expenditure	
			Database	
To Whom Paid	MO	DAY	YEAR	
Pastuszek Real Estate				
Mailing Address 5 Park Ave	12	4	2014	\$ 25.00
City Swarthmore	State PA	Zip Code (Plus 4) 190811535	Description of Expenditure	
			Water Bill	

To Whom Paid Pastuszek Real Estate			MO	DAY	YEAR	
Mailing Address 5 Park Ave			12	4	2014	
City Swarthmore	State PA	Zip Code (Plus 4) 190811535	Description of Expenditure Utility Bills			
To Whom Paid Sage Payment Solutions			MO	DAY	YEAR	
Mailing Address 1750 Old Meadow Rd Ste 300			12	1	2014	
City McLean	State VA	Zip Code (Plus 4) 221024304	Description of Expenditure Credit Card Processing Fee			
To Whom Paid Vonage America			MO	DAY	YEAR	
Mailing Address 23 Main St			11	28	2014	
City Holmdel	State NJ	Zip Code (Plus 4) 077332136	Description of Expenditure Phone Service			
To Whom Paid Vonage America			MO	DAY	YEAR	
Mailing Address 23 Main St			12	29	2014	
City Holmdel	State NJ	Zip Code (Plus 4) 077332136	Description of Expenditure Phone Service			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.						PAGE TOTAL \$ 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**

Name of Filing Committee or Candidate Leanne for Pa				Reporting Period From: <u>11/25/2014</u> To: <u>12/31/2014</u>			
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						Outstanding Balance of Debt		
						DATE		
Name of Creditor Strassheim Graphic Design and Press Corp					MO	DAY	YEAR	
Mailing Address 333 N 15th St					10	31	2014	
					\$ 2,087.04			
City Philadelphia	State PA	Zip Code (Plus 4) 191021034	Description of Debt Print and Mail Services					

						Outstanding Balance of Debt		
						DATE		
Name of Creditor Verizon					MO	DAY	YEAR	
Mailing Address 130 S State Rd					8	13	2014	
					\$ 464.56			
City Springfield	State PA	Zip Code (Plus 4) 190641232	Description of Debt Phone Services					

Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL
							\$ 2,551.60