

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:												
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 PRIMARY	POST-	3. X	AMENDMENT REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDAY PRE-ELECTION	5.	30 DAY ELECTION	POST-	6.	TERMINATION REPORT?	Yes	No	<input checked="" type="checkbox"/>	
	ANNUAL REPORT	7.	Year 2024	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
REPRESENTATIVE IN THE GENERAL ASSEMBLY						MO	DAY	YEAR	161	STH	DEM	23
						11	5	2024	(SEE INSTRUCTIONS FOR CODES)			
Summary of Receipts and Expenditures from:		MO	DAY	YEAR	TO	MO	DAY	YEAR	FOR OFFICE USE ONLY			
		4	9	2024		5	13	2024				
A. Amount Brought Forward From Last Report						\$ 75,064.40						
B. Total Monetary Contributions And Receipts (From Schedule I)						\$ 16,885.24						
C. Total Funds Available (Sum Of Lines A and B)						\$ 91,949.64						
D. Total Expenditures (From Schedule III)						\$ 35,782.98						
E. Ending Cash Balance (Subtract Line D From Line C)						\$ 56,166.66						
F. Value Of In-Kind Contributions Received (From Schedule II)						\$ 0.00						
G. Unpaid Debts And Obligations (From Schedule IV)						\$ 35,700.00						

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>4/9/2024</u> To: <u>5/13/2024</u>

1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor	
TOTAL for the Reporting Period (1)	\$ 585.24

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)	\$ 4,950.00
TOTAL for the Reporting Period (2)	\$ 5,200.00

3. Contributions Received Over \$250.00 (From Part C and Part D)	
Contributions Received From Political Committees (Part C)	\$ 2,000.00
All Other Contributions (Part D)	\$ 9,100.00
TOTAL for the Reporting Period (3)	\$ 11,100.00

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.)	\$ 16,885.24
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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>4/9/2024</u> To: <u>5/13/2024</u>
DATE	
AMOUNT	

Full Name of Contributing Committee			MO	DAY	YEAR	\$ 250.00
PA PROFESSIONAL FIRE FIGHTERS PAC-FUND						
Mailing Address						
City	State	Zip Code (Plus 4)				
HARRISBURG	PA	171012702	5	1	2024	

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>4/9/2024</u> To: <u>5/13/2024</u>

				DATE			AMOUNT
Full Name of Contributor WINNIE BRANTON				MO	DAY	YEAR	\$ 100.00
Mailing Address							
City	PHILADELPHIA	State	Zip Code (Plus 4)	4	18	2024	
		PA	191036140				
Full Name of Contributor DAVID BROWN				MO	DAY	YEAR	\$ 250.00
Mailing Address							
City	SWARTHMORE	State	Zip Code (Plus 4)	4	24	2024	
		PA	190811629				
Full Name of Contributor HARRY CHEN				MO	DAY	YEAR	\$ 200.00
Mailing Address							
City	MEDIA	State	Zip Code (Plus 4)	5	8	2024	
		PA	190631667				
Full Name of Contributor SANDRA L CLITTER				MO	DAY	YEAR	\$ 100.00
Mailing Address							
City	MEDIA	State	Zip Code (Plus 4)	5	7	2024	
		PA	190635339				
Full Name of Contributor JACK CUNICELLI				MO	DAY	YEAR	\$ 200.00
Mailing Address							
City	ROSE VALLEY	State	Zip Code (Plus 4)	5	13	2024	
		PA	190634214				
Full Name of Contributor THOMAS GALLAGHER				MO	DAY	YEAR	\$ 100.00
Mailing Address							
City	MEDIA	State	Zip Code (Plus 4)	5	11	2024	
		PA	190631627				
Full Name of Contributor GLENN GAUZZA				MO	DAY	YEAR	\$ 100.00
Mailing Address							
City	WALLINGFORD	State	Zip Code (Plus 4)	4	19	2024	
		PA	190866670				

Full Name of Contributor LISA GOLDSTEIN			MO	DAY	YEAR	\$ 100.00
Mailing Address			5	13	2024	
City	NEWTOWN SQUARE	State PA				
Full Name of Contributor HEATHER GRAY			MO	DAY	YEAR	\$ 250.00
Mailing Address			5	13	2024	
City	WALLINGFORD	State PA				
Full Name of Contributor ARLIN GREEN			MO	DAY	YEAR	\$ 100.00
Mailing Address			5	2	2024	
City	HAVERFORD	State PA				
Full Name of Contributor RACHEL HOLBERT			MO	DAY	YEAR	\$ 100.00
Mailing Address			5	7	2024	
City	ROSE VALLEY	State PA				
Full Name of Contributor PAUL JACOBS			MO	DAY	YEAR	\$ 100.00
Mailing Address			5	2	2024	
City	WALLINGFORD	State PA				
Full Name of Contributor JOAN KAMINSKI			MO	DAY	YEAR	\$ 100.00
Mailing Address			4	19	2024	
City	MEDIA	State PA				
Full Name of Contributor EVE B KLOTHEN			MO	DAY	YEAR	\$ 250.00
Mailing Address			5	5	2024	
City	PHILADELPHIA	State PA				
Full Name of Contributor PHILIPS LEBOWITZ			MO	DAY	YEAR	\$ 200.00
Mailing Address			5	5	2024	
City	SWARTHMORE	State PA				
Full Name of Contributor DANIEL R. MUROFF			MO	DAY	YEAR	\$ 100.00
Mailing Address			5	13	2024	
City	MEDIA	State PA				

Full Name of Contributor ROBERT E PAUL			MO	DAY	YEAR	\$ 100.00
Mailing Address			5	13	2024	
City	MERION STATION	State PA				
Full Name of Contributor JANE PEPPER			MO	DAY	YEAR	\$ 250.00
Mailing Address			5	13	2024	
City	MEDIA	State PA				
Full Name of Contributor KATHLEEN PETERSON			MO	DAY	YEAR	\$ 100.00
Mailing Address			4	24	2024	
City	MEDIA	State PA				
Full Name of Contributor GLORIA RABINOWITZ			MO	DAY	YEAR	\$ 250.00
Mailing Address			5	12	2024	
City	WALLINGFORD	State PA				
Full Name of Contributor LOUIS ROSENTHAL			MO	DAY	YEAR	\$ 250.00
Mailing Address			5	13	2024	
City	NEWTOWN SQUARE	State PA				
Full Name of Contributor JUNE RUNDGREN GRAVES			MO	DAY	YEAR	\$ 250.00
Mailing Address			5	5	2024	
City	WALLINGFORD	State PA				
Full Name of Contributor HOLLACE RUTKOWSKI			MO	DAY	YEAR	\$ 250.00
Mailing Address			5	2	2024	
City	NEWTOWN SQUARE	State PA				
Full Name of Contributor HEATHER SAUNDERS			MO	DAY	YEAR	\$ 250.00
Mailing Address			5	8	2024	
City	SWARTHMORE	State PA				
Full Name of Contributor STRADLEY RONON STEVENS & YOUNG, LLP			MO	DAY	YEAR	\$ 250.00
Mailing Address			5	13	2024	
City	PHILADELPHIA	State PA				

Full Name of Contributor LETTY THALL			MO	DAY	YEAR	\$ 250.00
Mailing Address			5	5	2024	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191303010				
Full Name of Contributor WILLIAM TURPIN			MO	DAY	YEAR	\$ 100.00
Mailing Address			4	12	2024	
City RUTLEDGE	State PA	Zip Code (Plus 4) 190702122				
Full Name of Contributor WILLIAM TURPIN			MO	DAY	YEAR	\$ 100.00
Mailing Address			5	12	2024	
City RUTLEDGE	State PA	Zip Code (Plus 4) 190702122				
Full Name of Contributor CAROLE WEINTRAUB			MO	DAY	YEAR	\$ 100.00
Mailing Address			5	6	2024	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191464916				
Full Name of Contributor MILLICENT P WEST			MO	DAY	YEAR	\$ 100.00
Mailing Address			5	13	2024	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191031002				

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

PAGE TOTAL

\$ 4,950.00

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 LEANNE FOR PA	Reporting Period From: <u>4/9/2024</u> To: <u>5/13/2024</u>
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				DATE	AMOUNT	
Full Name of Contributing Committee				MO	DAY	YEAR
BUCHANAN INGERSOLL & ROONEY COM EFF STATE GVT						
Mailing Address				4	24	2024
City	PITTSBURGH	State	PA			
		Zip Code (Plus 4)	152194413			
						\$ 500.00
Full Name of Contributing Committee				MO	DAY	YEAR
POP PAC						
Mailing Address				5	1	2024
City	PITTSBURGH	State	PA			
		Zip Code (Plus 4)	152064051			
						\$ 1,000.00
Full Name of Contributing Committee				MO	DAY	YEAR
SEIU HEALTHCARE PA COPE						
Mailing Address				4	24	2024
City	HARRISBURG	State	PA			
		Zip Code (Plus 4)	171022528			
						\$ 500.00

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

PAGE TOTAL
\$ 2,000.00

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 LEANNE FOR PA	Reporting Period From: <u>4/9/2024</u> To: <u>5/13/2024</u>
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				DATE	AMOUNT		
Full Name of Contributor MARYLOUISE BABETT				MO	DAY	YEAR	\$ 500.00
Mailing Address				5	13	2024	
City GARNET VALLEY	State PA	Zip Code (Plus 4) 190601125					
Employer Name NOT EMPLOYED				Occupation NOT EMPLOYED			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	
Full Name of Contributor CHELSEA BARRISH				MO	DAY	YEAR	\$ 1,000.00
Mailing Address				4	24	2024	
City BROOKHAVEN	State PA	Zip Code (Plus 4) 190152713					
Employer Name LINCOLN FINANCIAL FOUNDATION				Occupation ECONOMIC MOBILITY ADVOCAT			
Employer Mailing Address/Principal Place of Business			City WAYNE		State PA	Zip Code (Plus 4) 190875252	
Full Name of Contributor LESLIE BENOLIEL				MO	DAY	YEAR	\$ 500.00
Mailing Address				4	20	2024	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191191233					
Employer Name URBAN AFFAIRS COALITION				Occupation NONPROFIT MANAGER			
Employer Mailing Address/Principal Place of Business			City PHILADELPHIA		State PA	Zip Code (Plus 4) 191032000	
Full Name of Contributor WILLIAM DALY				MO	DAY	YEAR	\$ 100.00
Mailing Address				4	10	2024	
City MEDIA	State PA	Zip Code (Plus 4) 190631702					
Employer Name NOT EMPLOYED				Occupation RETIRED			
Employer Mailing Address/Principal Place of Business			City		State	Zip Code (Plus 4)	

Full Name of Contributor WILLIAM DALY				MO	DAY	YEAR	\$ 1,000.00
Mailing Address				4	16	2024	
City MEDIA	State PA	Zip Code (Plus 4) 190631702					
Employer Name NOT EMPLOYED				Occupation RETIRED			
Employer Mailing Address/Principal Place of Business			City		State		Zip Code (Plus 4)

Full Name of Contributor CAROL FANCONI				MO	DAY	YEAR	\$ 1,000.00
Mailing Address				4	30	2024	
City MEDIA	State PA	Zip Code (Plus 4) 190631629					
Employer Name NOT EMPLOYED				Occupation RETIRED			
Employer Mailing Address/Principal Place of Business			City		State		Zip Code (Plus 4)

Full Name of Contributor BRIAN GRALNICK				MO	DAY	YEAR	\$ 500.00
Mailing Address				5	3	2024	
City ELKINS PARK	State PA	Zip Code (Plus 4) 190272620					
Employer Name JEWISH FEDERATION OF GREATER PHILADELPHIA				Occupation PLANNING			
Employer Mailing Address/Principal Place of Business			City PHILA		State PA		Zip Code (Plus 4) 191037044

Full Name of Contributor LYNNE GRIFFINTHS				MO	DAY	YEAR	\$ 500.00
Mailing Address				4	15	2024	
City MEDIA	State PA	Zip Code (Plus 4) 190631663					
Employer Name NOT EMPLOYED				Occupation RETIRED			
Employer Mailing Address/Principal Place of Business			City		State		Zip Code (Plus 4)

Full Name of Contributor AMY MOULTON				MO	DAY	YEAR	\$ 500.00
Mailing Address				5	13	2024	
City MEDIA	State PA	Zip Code (Plus 4) 190631634					
Employer Name AMY MOULTON				Occupation CONSULTANT-SELF EMPLOYED			
Employer Mailing Address/Principal Place of Business			City MEDIA		State PA		Zip Code (Plus 4) 190631634

Full Name of Contributor KIMBERLY OXHOLM				MO	DAY	YEAR	\$ 500.00
Mailing Address				5	13	2024	
City GOULDSBORO	State PA	Zip Code (Plus 4) 184248706					
Employer Name NOT EMPLOYED				Occupation NOT EMPLOYED			
Employer Mailing Address/Principal Place of Business			City		State		Zip Code (Plus 4)

Full Name of Contributor KENNETH D ROSE			MO 4	DAY 15	YEAR 2024	\$ 500.00
Mailing Address						
City MEDIA	State PA	Zip Code (Plus 4) 190631663				
Employer Name NOT EMPLOYED			Occupation RETIRED			
Employer Mailing Address/Principal Place of Business		City	State		Zip Code (Plus 4)	

Full Name of Contributor ALLYSON Y SCHWARTZ			MO 5	DAY 12	YEAR 2024	\$ 500.00
Mailing Address						
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191184108				
Employer Name LEAVITT PARTNERS			Occupation SENIOR ADVISOR			
Employer Mailing Address/Principal Place of Business		City	State		Zip Code (Plus 4)	
		WASHINGTON	DC		200012018	

Full Name of Contributor JOAN STERN			MO 4	DAY 29	YEAR 2024	\$ 500.00
Mailing Address						
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191034914				
Employer Name NOT EMPLOYED			Occupation RETIRED			
Employer Mailing Address/Principal Place of Business		City	State		Zip Code (Plus 4)	

Full Name of Contributor FLORA WOLF			MO 4	DAY 30	YEAR 2024	\$ 500.00
Mailing Address						
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191034100				
Employer Name NOT EMPLOYED			Occupation NOT EMPLOYED			
Employer Mailing Address/Principal Place of Business		City	State		Zip Code (Plus 4)	

Full Name of Contributor PAUL WOOLF			MO 5	DAY 10	YEAR 2024	\$ 1,000.00
Mailing Address						
City WALLINGFORD	State PA	Zip Code (Plus 4) 190866329				
Employer Name NOT EMPLOYED			Occupation NOT EMPLOYED			
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**\$** 9,100.00

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>4/9/2024</u> To: <u>5/13/2024</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)	\$ 0.00
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.)			\$ 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: To:
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			DATE			AMOUNT
Full Name of Contributor			MO	DAY	YEAR	\$ 0.00
Mailing Address						
City	State	Zip Code (Plus 4)				
Description of Contribution:						
Enter Grand Total of Part F on Schedule II, In-Kind Contributions Detailed Summary Page, Section 2.						PAGE TOTAL \$ 0.00

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

Name of Filing Committee or Candidate	Reporting Period
LEANNE FOR PA	From <u>4/9/2024</u> To: <u>5/13/2024</u>

				DATE		AMOUNT		
To Whom Paid ACTBLUE				MO	DAY	YEAR	\$ 0.36	
Mailing Address				4	9	2024		
City	WEST SOMERVILLE	State	MA	Zip Code (Plus 4)	021440031			Description of Expenditure CREDIT CARD PROCESSING FEES
To Whom Paid ACTBLUE				MO	DAY	YEAR	\$ 0.61	
Mailing Address				4	10	2024		
City	WEST SOMERVILLE	State	MA	Zip Code (Plus 4)	021440031			Description of Expenditure CREDIT CARD PROCESSING FEES
To Whom Paid ACTBLUE				MO	DAY	YEAR	\$ 1.80	
Mailing Address				4	12	2024		
City	WEST SOMERVILLE	State	MA	Zip Code (Plus 4)	021440031			Description of Expenditure CREDIT CARD PROCESSING FEES
To Whom Paid ACTBLUE				MO	DAY	YEAR	\$ 1.50	
Mailing Address				4	16	2024		
City	WEST SOMERVILLE	State	MA	Zip Code (Plus 4)	021440031			Description of Expenditure CREDIT CARD PROCESSING FEES
To Whom Paid ACTBLUE				MO	DAY	YEAR	\$ 15.15	
Mailing Address				4	17	2024		
City	WEST SOMERVILLE	State	MA	Zip Code (Plus 4)	021440031			Description of Expenditure CREDIT CARD PROCESSING FEES
To Whom Paid ACTBLUE				MO	DAY	YEAR	\$ 15.00	
Mailing Address				4	18	2024		
City	WEST SOMERVILLE	State	MA	Zip Code (Plus 4)	021440031			Description of Expenditure CREDIT CARD PROCESSING FEES

To Whom Paid			MO	DAY	YEAR	\$ 1.88
ACTBLUE						
Mailing Address			4	22	2024	
City	WEST SOMERVILLE	State	Zip Code (Plus 4)		Description of Expenditure	
		MA	021440031		CREDIT CARD PROCESSING FEES	
To Whom Paid			MO	DAY	YEAR	\$ 3.00
ACTBLUE						
Mailing Address			4	23	2024	
City	WEST SOMERVILLE	State	Zip Code (Plus 4)		Description of Expenditure	
		MA	021440031		CREDIT CARD PROCESSING FEES	
To Whom Paid			MO	DAY	YEAR	\$ 10.21
ACTBLUE						
Mailing Address			4	24	2024	
City	WEST SOMERVILLE	State	Zip Code (Plus 4)		Description of Expenditure	
		MA	021440031		CREDIT CARD PROCESSING FEES	
To Whom Paid			MO	DAY	YEAR	\$ 0.38
ACTBLUE						
Mailing Address			4	26	2024	
City	WEST SOMERVILLE	State	Zip Code (Plus 4)		Description of Expenditure	
		MA	021440031		CREDIT CARD PROCESSING FEES	
To Whom Paid			MO	DAY	YEAR	\$ 0.30
ACTBLUE						
Mailing Address			4	30	2024	
City	WEST SOMERVILLE	State	Zip Code (Plus 4)		Description of Expenditure	
		MA	021440031		CREDIT CARD PROCESSING FEES	
To Whom Paid			MO	DAY	YEAR	\$ 8.27
ACTBLUE						
Mailing Address			5	1	2024	
City	WEST SOMERVILLE	State	Zip Code (Plus 4)		Description of Expenditure	
		MA	021440031		CREDIT CARD PROCESSING FEES	
To Whom Paid			MO	DAY	YEAR	\$ 23.41
ACTBLUE						
Mailing Address			5	2	2024	
City	WEST SOMERVILLE	State	Zip Code (Plus 4)		Description of Expenditure	
		MA	021440031		CREDIT CARD PROCESSING FEES	
To Whom Paid			MO	DAY	YEAR	\$ 7.50
ACTBLUE						
Mailing Address			5	6	2024	
City	WEST SOMERVILLE	State	Zip Code (Plus 4)		Description of Expenditure	
		MA	021440031		CREDIT CARD PROCESSING FEES	

To Whom Paid			MO	DAY	YEAR	\$	8.41
ACTBLUE							
Mailing Address			5	7	2024		
City	WEST SOMERVILLE	State	Zip Code (Plus 4)		Description of Expenditure		
	MA		021440031		CREDIT CARD PROCESSING FEES		
To Whom Paid			MO	DAY	YEAR	\$	14.84
ACTBLUE							
Mailing Address			5	8	2024		
City	WEST SOMERVILLE	State	Zip Code (Plus 4)		Description of Expenditure		
	MA		021440031		CREDIT CARD PROCESSING FEES		
To Whom Paid			MO	DAY	YEAR	\$	3.08
ACTBLUE							
Mailing Address			5	9	2024		
City	WEST SOMERVILLE	State	Zip Code (Plus 4)		Description of Expenditure		
	MA		021440031		CREDIT CARD PROCESSING FEES		
To Whom Paid			MO	DAY	YEAR	\$	6.90
ACTBLUE							
Mailing Address			5	10	2024		
City	WEST SOMERVILLE	State	Zip Code (Plus 4)		Description of Expenditure		
	MA		021440031		CREDIT CARD PROCESSING FEES		
To Whom Paid			MO	DAY	YEAR	\$	500.00
BROOKHAVEN BABE RUTH BASEBALL							
Mailing Address			5	4	2024		
City	BROOKHAVEN	State	Zip Code (Plus 4)		Description of Expenditure		
	PA		190150125		CONTRIBUTION		
To Whom Paid			MO	DAY	YEAR	\$	375.00
CHURCH OF THE OVERCOMER							
Mailing Address			5	12	2024		
City	CHESTER	State	Zip Code (Plus 4)		Description of Expenditure		
	PA		190132418		DONATION MADE		
To Whom Paid			MO	DAY	YEAR	\$	40.00
DELAWARE COUNTY COUNTY LABOR COUNCIL COPE							
Mailing Address			4	29	2024		
City	OXFORD	State	Zip Code (Plus 4)		Description of Expenditure		
	PA		19363		CLC BREAKFAST		
To Whom Paid			MO	DAY	YEAR	\$	152.45
DELUXE							
Mailing Address			4	16	2024		
City	CLEVELAND	State	Zip Code (Plus 4)		Description of Expenditure		
	OH		441818094		CHECKS ORDER		

To Whom Paid			MO	DAY	YEAR	\$ 5,450.18
EDGE HILL STRATEGIES, LLC						
Mailing Address			4	25	2024	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191102390	Description of Expenditure CANDIDATE EXPENSES REIMBURSEMENT			
To Whom Paid			MO	DAY	YEAR	\$ 3,000.00
EXACTING CHANGE, LLC						
Mailing Address			5	1	2024	
City MEDIA	State PA	Zip Code (Plus 4) 190631709	Description of Expenditure CONSULTING			
To Whom Paid			MO	DAY	YEAR	\$ 617.20
EXACTING CHANGE, LLC						
Mailing Address			5	1	2024	
City MEDIA	State PA	Zip Code (Plus 4) 190631709	Description of Expenditure OPERATING EXPENSES REIMBURSEMENT			
To Whom Paid			MO	DAY	YEAR	\$ 199.98
GODADDY						
Mailing Address			5	3	2024	
City SCOTTSDALE	State AZ	Zip Code (Plus 4) 852606993	Description of Expenditure SSL RENEWAL			
To Whom Paid			MO	DAY	YEAR	\$ 25,000.00
PENNSYLVANIA HOUSE DEMOCRATIC CAMPAIGN COMMITTEE						
Mailing Address			4	14	2024	
City HARRISBURG	State PA	Zip Code (Plus 4) 171022025	Description of Expenditure CONTRIBUTION			
To Whom Paid			MO	DAY	YEAR	\$ 132.50
STRASSHEIM GRAPHIC DESIGN AND PRESS CORP						
Mailing Address			4	22	2024	
City PHILADELPHIA	State PA	Zip Code (Plus 4) 191021034	Description of Expenditure ENVELOPES			
To Whom Paid			MO	DAY	YEAR	\$ 1.22
STRIPE						
Mailing Address			4	9	2024	
City SAN FRANCISCO	State CA	Zip Code (Plus 4) 94103	Description of Expenditure CREDIT CARD PROCESSING FEES			
To Whom Paid			MO	DAY	YEAR	\$ 1.57
STRIPE						
Mailing Address			4	10	2024	
City SAN FRANCISCO	State CA	Zip Code (Plus 4) 94103	Description of Expenditure CREDIT CARD PROCESSING FEES			

To Whom Paid			MO	DAY	YEAR	\$	3.33	
STRIPE								
Mailing Address			4	12	2024			
City	SAN FRANCISCO	State	Zip Code (Plus 4)	Description of Expenditure				
		CA	94103	CREDIT CARD PROCESSING FEES				
To Whom Paid			MO	DAY	YEAR	\$	2.43	
STRIPE								
Mailing Address			4	16	2024			
City	SAN FRANCISCO	State	Zip Code (Plus 4)	Description of Expenditure				
		CA	94103	CREDIT CARD PROCESSING FEES				
To Whom Paid			MO	DAY	YEAR	\$	22.91	
STRIPE								
Mailing Address			4	17	2024			
City	SAN FRANCISCO	State	Zip Code (Plus 4)	Description of Expenditure				
		CA	94103	CREDIT CARD PROCESSING FEES				
To Whom Paid			MO	DAY	YEAR	\$	22.23	
STRIPE								
Mailing Address			4	18	2024			
City	SAN FRANCISCO	State	Zip Code (Plus 4)	Description of Expenditure				
		CA	94103	CREDIT CARD PROCESSING FEES				
To Whom Paid			MO	DAY	YEAR	\$	3.21	
STRIPE								
Mailing Address			4	22	2024			
City	SAN FRANCISCO	State	Zip Code (Plus 4)	Description of Expenditure				
		CA	94103	CREDIT CARD PROCESSING FEES				
To Whom Paid			MO	DAY	YEAR	\$	4.86	
STRIPE								
Mailing Address			4	23	2024			
City	SAN FRANCISCO	State	Zip Code (Plus 4)	Description of Expenditure				
		CA	94103	CREDIT CARD PROCESSING FEES				
To Whom Paid			MO	DAY	YEAR	\$	16.35	
STRIPE								
Mailing Address			4	24	2024			
City	SAN FRANCISCO	State	Zip Code (Plus 4)	Description of Expenditure				
		CA	94103	CREDIT CARD PROCESSING FEES				
To Whom Paid			MO	DAY	YEAR	\$	0.78	
STRIPE								
Mailing Address			4	26	2024			
City	SAN FRANCISCO	State	Zip Code (Plus 4)	Description of Expenditure				
		CA	94103	CREDIT CARD PROCESSING FEES				

To Whom Paid			MO	DAY	YEAR	\$ 0.67
STRIPE						
Mailing Address			4	30	2024	
City	SAN FRANCISCO	State	Zip Code (Plus 4)	Description of Expenditure		
	CA		94103	CREDIT CARD PROCESSING FEES		
To Whom Paid			MO	DAY	YEAR	\$ 13.27
STRIPE						
Mailing Address			5	1	2024	
City	SAN FRANCISCO	State	Zip Code (Plus 4)	Description of Expenditure		
	CA		94103	CREDIT CARD PROCESSING FEES		
To Whom Paid			MO	DAY	YEAR	\$ 35.70
STRIPE						
Mailing Address			5	2	2024	
City	SAN FRANCISCO	State	Zip Code (Plus 4)	Description of Expenditure		
	CA		94103	CREDIT CARD PROCESSING FEES		
To Whom Paid			MO	DAY	YEAR	\$ 11.92
STRIPE						
Mailing Address			5	6	2024	
City	SAN FRANCISCO	State	Zip Code (Plus 4)	Description of Expenditure		
	CA		94103	CREDIT CARD PROCESSING FEES		
To Whom Paid			MO	DAY	YEAR	\$ 13.24
STRIPE						
Mailing Address			5	7	2024	
City	SAN FRANCISCO	State	Zip Code (Plus 4)	Description of Expenditure		
	CA		94103	CREDIT CARD PROCESSING FEES		
To Whom Paid			MO	DAY	YEAR	\$ 23.37
STRIPE						
Mailing Address			5	8	2024	
City	SAN FRANCISCO	State	Zip Code (Plus 4)	Description of Expenditure		
	CA		94103	CREDIT CARD PROCESSING FEES		
To Whom Paid			MO	DAY	YEAR	\$ 5.20
STRIPE						
Mailing Address			5	9	2024	
City	SAN FRANCISCO	State	Zip Code (Plus 4)	Description of Expenditure		
	CA		94103	CREDIT CARD PROCESSING FEES		
To Whom Paid			MO	DAY	YEAR	\$ 10.81
STRIPE						
Mailing Address			5	10	2024	
City	SAN FRANCISCO	State	Zip Code (Plus 4)	Description of Expenditure		
	CA		94103	CREDIT CARD PROCESSING FEES		

Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.

PAGE TOTAL

\$ 35,782.98

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>4/9/2024</u> To: <u>5/13/2024</u>
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				DATE		Outstanding Balance of Debt		
Name of Creditor				MO	DAY	YEAR	\$ 35,700.00	
EDGE HILL STRATEGIES, LLC								
Mailing Address				12	23	2019		
City	PHILADELPHIA	State	PA	Zip Code (Plus 4)	191102390			Description of Debt
							CONSULTING	
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							PAGE TOTAL	
							\$ 35,700.00	