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 :	on	20140	0067				port ed B		CA	NDII	DATE		COMN	4ITTEE	✓ [LOB	BYIST		
Name of Filing C	ommitte	e, Candida	ate or Lo	obbyist:		Lea	nne	for Pa	a										
Street Address:																			
City:	Swar	thmore		_					State	e:	PA			Zip Code: 19081					
TYPE OF REPORT	6TH TUES		1.	2ND FRID PRIMARY	AY PRE	-	2.	30 DA		Р				AMENDMENT REPORT?		Yes	✓ N	0	
(place X to the right of	6TH TUES		4.	2ND FRID ELECTION		E-	5.	30 DA		Р	OST-	6.		TERMINA REPORT?		Yes	N)	\
report type)	ANNUAL	. REPORT	7. X	Year 201	5				NG ME CHEC					PAPER		\	DISK	ETTE	
Name of Office S	- Sought by	, Candidat	e:						DAT	E O	F ELE	CTIC	ON	District Number	Office Code	Pai	ty Code	Cour	
									МО		DAY	Y	EAR					23	
										11		3	2015		(SEE INS	TRUCTI	ONS FOR	CODES)
Summary of		s and	МО	DAY	YEAR	₹			МО		DAY	Y	EAR	FO	R OFFIC	E USE	ONLY		
Expenditures	from:		1	11 2	4 2	015	T	0		12		31	2015						
A. Amount Bro	ught Forv	ward From	ı Last R	eport				\$				18,	881.63						
B. Total Moneta	ary Contr	ibutions A	And Rec	eipts (Fro	m Sche	dule	e I)	\$			18,622.22								
C. Total Funds Available (Sum Of Lines A and B)								\$				37,	503.85						
D. Total Expenditures (From Schedule III)								\$				7,:	111.57						
E. Ending Cash	Balance	(Subtract	Line D	From Line	e C)			\$				30,3	392.28						
F. Value Of In-	Kind Con	tributions	Receive	ed (From	Schedu	le II	()	\$					0.00						
G. Unpaid Debt	s And Ob	ligations	(From S	chedule 1	IV)			\$			464.56								
					AFF	FIDA	٩VI	T SE	CTIC	N									
PART I - If this is	s a Comm	nittee repo	ort, trea	surer sigi	n here.	If th	is is	a Car	ndidat	e re	port, c	andi	date sig	ın here.					
I swear (or affirm) correct and comple		report, incl	uding the	attached s	chedule	s file	d on	paper	or by e	electr	onic m	edium	ı, are to t	he best of	my knov	rledge	and bel	ief , tr	ue
Sworn to and subs	cribed bef	ore me this		20									Signature	of Persor	1 Submitt	ing Re	oort		
	_			-				- -						Print	ed Name				_
My Commission Ex	cpires	Signatur	e											Emai	ı				-
		мо	DA	AY	YR			_			Are	ea Co	de	Daytim	e Teleph	one Nu	mber		
Part II- If this is	a report	of a cand	idate's	authorize	d Comr	nitte	e, C	andid	ate sl	nall s	sign he	ere.							
I swear (or affirm) No 320) as amende		ne best of m	y knowle	edge and be	elief this	s polit	tical	comm	ittee h	as no	ot viola	ted ar	ny provisi	ions of the	e act of Ju	ine 3,1	937 (P.	L. 133	3,
Sworn to and subsc		re me this											Si	ignature o	f Candida	te			-
	day of —							-						Printe	d Name				_
	:	Signature						-		_									_
My Commission Exp		-												Emai	il				
	_	МО	D	AY	YF	₹		•			Area Code Daytime Telephone Number					er	-		

SCHEDULE I CONTRIBUTIONS AND RECEIPTS

Detailed Summary Page

Detailed Julillary Lage				
Name of Filing Committee or Candidate	Reporting) Period		
Leanne for Pa	From:	11/24/20	<u>15</u> To:	12/31/2015
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	Period	(1)	\$	372.22
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	2,000.00
All Other Contributions (Part B)			\$	750.00
TOTAL for the Reporting	Period	(2)	\$	2,750.00
3. Contributions Received Over \$250.00 (From Part C and Part D)				
Contributions Received From Political Committees (Part C)			\$	15,000.00
All Other Contributions (Part D)			\$	500.00
TOTAL for the Reporting	Period	(3)	\$	15,500.00
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 totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pag			\$	18,622.22

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 Candidat	e		Re	porting I				
Leanne for Pa			Fr	om:	11/24/2	<u>015</u> To :	1	12/31/2015
					DATE			AMOUNT
Full Name of Contributing Committee PSEA-PACE For State Elections				мо	DAY	YEAR		
Mailing Address							_	250.00
City Harrisburg	State	Zip Code (Plus	4)	12	16	2015	\$	230.00
or, Harrisburg	PA	171011346	.,					
Full Name of Contributing Committee				МО	DAY	VEAD		
Highmark PAC				МО	DAY	YEAR		
Mailing Address				12	21	2015	\$	250.00
City Camp Hill	State	Zip Code (Plus	4)					
	PA	170111702						
Full Name of Contributing Committee				МО	DAY	YEAR		
Markosek for State Legislature Mailing Address								250.00
City Monroeville	State	Zip Code (Plus	4)	12	15	2015	\$	250.00
rion devine	PA	151460193	•,					
	.,.	101.00170						
Full Name of Contributing Committee					DAY	YEAR		
Health Partners of Philadelphia PAC				МО	DAT	TEAR		
Mailing Address				12	29	2015	\$	250.00
City Philadelphia	State	Zip Code (Plus	4)					
	PA	191073144						
Full Name of Contributing Committee				мо	DAY	YEAR		
Pennsylvania Optometric Political Action	n Committee				27.1.	1 - 2 - 11		
Mailing Address		I		12	15	2015	\$	250.00
City Harrisburg	State	Zip Code (Plus	4)					
	PA	171011124						
Full Name of Contributing Committee				мо	DAY	YEAR		
Friends of Pat Krebs				1-10	DAI	ILAN		
Mailing Address		1		11	25	2015	\$	250.00
City Palmyra	State	Zip Code (Plus	4)					
	PA	170788956						
Full Name of Contributing Committee					D.C	V= 4=		
Planned Parenthood Pennsylvania PAC				МО	DAY	YEAR		
Mailing Address			12	15	2015	\$	250.00	
City Harrisburg	State	Zip Code (Plus	4)					
	PA	171022505						

Full Na	ame of Contributing Committee	мо	DAY	VEAD			
Wine & Spirits Brokers PAC				МО	DAY	YEAR	
Mailing Address				12	15	2015	\$ 250.00
City	Harrisburg	State	Zip Code (Plus 4)	12	15	2013	
		PA	171011363				

PAGE TOTAL\$ 2,000.00

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

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)

Nam	ne of Filing Committee or Candida	te		Rep	porting P	eriod			
Lea	nne for Pa			Fro	m:	11/24/	2015 T o):	12/31/2015
						AMOUNT			
Full Na	ame of Contributor				мо	DAY	YEAR		
Michae	el J Gretz					571.	12/11		
Mailin	g Address							\$	250.00
City	Wayne	State	Zip Code (Plus 4)	12	16	2015		
		PA	190873840						
Full Na	Full Name of Contributor				мо	DAY	YEAR		
Lawre	nce Ceisler								
Mailin	g Address	T	<u> </u>					\$	150.00
City	Philadelphia	State	Zip Code (Plus 4)	12	10	2015		
		PA	191023710						
Full Na	ame of Contributor				мо	DAY	YEAR		
Georg	e A. Mountford				110	DAI	ILAK		
Mailin	g Address							\$	100.00
City	Swarthmore	State	Zip Code (Plus 4)	12	10	2015		
		PA	190811813						
Full Na	ame of Contributor				мо	DAY	YEAR		
Williar	m H Ewing Esq.				MO	DAT	TEAR		
Mailin	g Address							\$	250.00
City	Philadelphia	State	Zip Code (Plus 4)	11	29	2015		
		PA	191191232						
									PAGE TOTAL

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

PAGE TOTAL \$ 750.00

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 Can	didate		Reporting	Period				
Leanne for Pa			From:	11/2	<u>14/2015</u>	То:	12/31	./2015
				DA	TE		АМО	UNT
Full Name of Contributing Commi	ttee			мо	DAY	YEAR		
AFSCME Council 13							\$	1,000.00
Mailing Address				12	7	2015		
City Harrisburg	State	Zip Cod	e (Plus 4)			2013		
	PA	171111	171111507					
Full Name of Contributing Commi	ttee			мо	DAY	YEAR		
SEIU PA State Council					2711	1 = 1 11 1	\$	1,000.00
Mailing Address				12	16	2015		,
City Harrisburg	State	Zip Cod	e (Plus 4)	1 12		2013		
	PA	171022	527					
Full Name of Contributing Commi	ttee			мо	DAY	YEAR		
Painters and Allied Trades Distric	ct Council 21			1-10	DAI	ILAK	\$	2,500.00
Mailing Address				12	7	2015]	_,
City Philadelphia	State	Zip Code	e (Plus 4)	1 12	′	2013		
	PA	191541	202					
Full Name of Contributing Commi	ttee			мо	DAY	YEAR		
PFT Committee to Support Public	c Education			140		ILAK	 	1,000.00
Mailing Address				12	8	2015	1	,
City Philadelphia	State	Zip Code	e (Plus 4)	12		2013		
	PA	191034	902					
Full Name of Contributing Commi	ttee			мо	DAY	YEAR		
Plumbers Union Local 690 Election	on Political Action Fund						\$	5,000.00
Mailing Address				12	21	2015		
City Philadelphia	State	Zip Code	e (Plus 4)					
	PA	191541	211					
Full Name of Contributing Committee			МО	DAY	YEAR			
1776 PAC (UFCW)						\$	500.00	
Mailing Address	<u>-</u>			12	8	2015		
City Plymouth Meeting	State	Zip Code	e (Plus 4)					
	l PA	194622	369					

						1
Full Name of Contributing Committee			мо	DAY	YEAR	
United Steelworkers PAC Fund						\$ 1,000.00
Mailing Address			12	21	2015	,,,,,,,
City Pittsburgh	State	Zip Code (Plus 4)	12		2013	
	PA	152221256				
Full Name of Contributing Committee			мо	DAY	YEAR	
AFSCME Council 13						\$ 500.00
Mailing Address			12	15	2015	
City Harrisburg	State	Zip Code (Plus 4)	12		2013	
	PA	171111507				
Full Name of Contributing Committee				DAY	YEAR	
Dan Frankel for the 23rd District Committee			МО			\$ 500.00
Mailing Address		12	15	2015		
City Harrisburg	State	Zip Code (Plus 4)	12		2013	
	PA	171080391				
Full Name of Contributing Committee			мо	DAY	YEAR	
Pennsylvania AFL-CIO						\$ 1,000.00
Mailing Address			12	23	2015	_,
City Harrisburg	State	Zip Code (Plus 4)	12	23	2013	
	PA	171011092				
Full Name of Contributing Committee			МО	DAY	YEAR	
Food Driver Salesmen, Dairy Ice Cream	Workers Local 463		МО	DAY	TEAK	\$ 1,000.00
Mailing Address		12	4	2015	1,000.00	
City Fort Washington	State	Zip Code (Plus 4)	12	4	2013	
	PA	190343258				

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

PAGE TOTAL\$ 15,000.00

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			Rep	orting Pe	riod				
Leanne for Pa			Fror	n:	11/24/2	<u>015</u> To	:	<u>12/31/2015</u>	
				DATE AMOUNT					
Full Name of Contributor				мо	DAY	YEAR	\$	500.00	
David E Landau					_] *	300.00			
Mailing Address				12	30	2015			
City Wallingford	State	Zip Code (Plu	s 4)] 12	30	2013	Ī		
	PA	190866315							
Employer Name Not Employed				Occupation Not Employed					
Employer Mailing Address/Principal Plac	e of Business	City			State		Zip Code (Plus 4)		
		Wallingfo	rd		PA		190866315		
Enter Grand Total of Part C on Schedule I, Detailed Summary Page, Se						Г	PA	GE TOTAL	
Lines Grand Total of Part Con Schee	duie 1, Detaileu St	illillary Page	, secur	л э.		•	•	500.00	

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 MO DAY YEAR \$						
			From:			To:		
		•		C	ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (Plu	us 4)					
Receipt Description	•	•			•	•	•	
Futor Curred Total of Bout	Fan Cabadula I. Datailad	Summer Base S	! !	4				PAGE TOTAL
Enter Grand Total of Part	E ON Schedule 1, Detalled	Summary Page, Se	ection	4.			\$	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 Peri	od							
Leanne for Pa	From:	11/24/2015 To:	<u>12/31/2015</u>						
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS PER CONTRIBUTOR									
TOTAL for the Reporting Pe	eriod (1)	\$	0.00						
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PART F)									
TOTAL for the Reporting Pe	eriod (2)	\$	0.00						
3. IN-KIND CONTRIBUTION RECIEVED - VALUE OVER \$250.00 (FROM PART G)									
TOTAL for the Reporting Pe	eriod (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,		\$	0.00						

SCHEDULE II PART F IN-KIND CONTRIBUTIONS RECEIVED

VALUE OF \$50.01 TO \$250.00

Name of Filing Committee or Candi	idate		Reporting Period				
				From:			
				DATE			AMOUNT
Full Name of Contributor			МО	DAY	YEAR		
Mailing Address						7 \$	0.00
City	State	Zip Code (Plus 4)					
Description of Contribution:	•		•	•	•		
Enter Grand Total of Part F on	Schedule II, In-Ki	nd Contributions Detai	led Sum	mary Pag	ge,		PAGE TOTAL
Section 2.						\$	0.00

SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

VALUE OVER \$250.00

Name of Filing Committee or Candidate				Reporting Period						
				Fro	m:		To:			
						DATE			AMOUNT	-
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								\$	0.00	
City	State		Zip Code(Plus 4)							
Employer of Contributor					Occup	oation				
Employer Mailing Address/Principal Pla	ce of Business	Cit	ty	Stat	e Zi _l	p Code(Plus 4)	Descr	iptio	on of Contribut	ion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE TO	TAL
Summary Page, Section 3.										0.00

SCHEDULE III STATEMENT OF EXPENDITURES

Name of Filing Committee or Candidate	Reporting Period						
Leanne for Pa	From	11/24/2015	То:	12/31/2015			

					DATE	AMOUNT				
To Wh	nom Paid		DATE			AHOONI				
ActBlu				МО	DAY	YEAR				
	g Address			11	27	2015	\$	0.50		
City West Somerville State Zip Code (Plus 4)					l tion of Exp	l enditure				
		MA	021440031	Credit Card Processing Fee						
To Wh	nom Paid	•	·	l wa	DAY	VEAD				
Sage	Payment Solutions			МО	DAY	YEAR				
Mailin	g Address			12	2	2015	\$	134.53		
City	McLean	State	Zip Code (Plus 4)	Description of Expenditure						
		VA	221024304	Credit Card Processing						
To Wh	nom Paid			МО	DAY	YEAR				
ActBlu	ıe			140		ILAK				
Mailing Address					27	2015	\$	1.31		
City West Somerville State Zip Code (Plus 4)				Description of Expenditure						
		MA	021440031	Credit Card Processing Fee						
To Wh	nom Paid			МО	DAY	YEAR				
ActBlu	ıe			140		IZAK				
Mailin	g Address			11	30	2015	\$	0.89		
City	West Somerville	State	Zip Code (Plus 4)	Description of Expenditure						
		MA	021440031	Credit Card Processing Fee						
To Wh	nom Paid			МО	DAY	YEAR				
Edge	Hill Strategies, LLC			1-10		1 Z Aux				
Mailin	g Address			11	30	2015	\$	2,500.00		
City Philadelphia State Zip Code (Plus 4)					tion of Exp	enditure				
PA 191102390				Consulting						
To Wh	nom Paid			МО	DAY	YEAR				
ActBlu	Je			1-10		LAIN				
Mailin	g Address			12	21	2015	\$	0.50		
City	City West Somerville State Zip Code (Plus 4)			Description of Expenditure						
	MA 021440031				Card Proces					

To Who	om Paid			МО	DAY	YEAR						
ActBlue												
Mailing Address					21	2015	\$	0.38				
City West Somerville State Zip Code (Plus 4) MA 021440031					Description of Expenditure							
					Credit Card Processing Fee							
To Who	om Paid			МО	DAY	YEAR						
Edge H	lill Strategies, LLC			140		ILAK						
Mailing	Address			12	1	2015	\$	2,500.00				
City Philadelphia State Zip Code (Descrip	tion of Exp	enditure						
		PA	191102390	Consulting								
To Who	om Paid			МО	DAY	YEAR						
Stock's	on Second			140		ILAK						
Mailing	Address			12	15	2015	\$	1,175.50				
City	Harrisburg	State	Zip Code (Plus 4)	Description of Expenditure								
		PA	171011420	Event C	atering							
To Who	om Paid			МО	DAY	YEAR						
NGP-V	AN, Inc			140		ILAK						
Mailing	Address			12	7	2015	\$	750.00				
City Washington State Zip Code (Plus 4) DC 200055006					Description of Expenditure							
					Database access							
To Who	om Paid			МО	DAY	YEAR						
ActBlue	е			1-10		I Z/IIX						
Mailing	Address			12	29	2015	\$	0.50				
City	West Somerville	State	Zip Code (Plus 4)	Description of Expenditure								
		MA	021440031	Credit Card Processing Fee								
To Who	om Paid			МО	DAY	YEAR						
Litle &	amp; Co.											
Mailing	Address			12	1	2015	\$	0.57				
City	Lowell	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure						
		MA	018518100	Credit Card Processing								
To Who	om Paid			МО	DAY	YEAR						
ActBlue	е			140		TEAK						
Mailing	Address			12	29	2015	\$	0.93				
City West Somerville State Zip Code (Plus 4)					tion of Exp	enditure						
MA 021440031				Credit C	Card Proces	ssing Fee						
To Whom Paid				МО	DAY	YEAR						
ActBlue												
Mailing Address					30	2015	\$	0.39				
City	City West Somerville State Zip Code (Plus 4)			Description of Expenditure								
	MA 021440031				Credit Card Processing Fee							
	MA 021440031				Credit Card Processing Fee							

To Whom Paid			МО	DAY	YEAR				
ActBlue	1-10		LAK						
Mailing Address	12	30	2015	\$	0.07				
City West Somerville State Zip Code (Plus 4)				Description of Expenditure					
MA 021440031				Credit Card Processing Fee					
To Whom Paid			МО	DAY	YEAR				
Beneficial Bank			1-10		LAK				
Mailing Address				16	2015	\$	45.00		
City Springfield State Zip Code (Plus 4)				Description of Expenditure					
	PA 190643839 Account Analysis Fee								
To Whom Paid				DAY	YEAR				
ActBlue			МО		ILAK				
Mailing Address			12	30	2015	\$	0.50		
City West Somerville State Zip Code (Plus 4) Description of Expend					enditure	•			
MA 021440031 Credit Card Processing Fee									
					_	PAGE TOTAL			
Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.					\$	7,111.57			

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 Repo				Reporting Period						
Leanne for Pa				From:	11/24/2015 To:				12/31/2015	
	DATE								Outstanding Balance of Debt	
Name of Creditor						МО	DAY	YEAR		
Verizo	on									
Mailin	ng Address					8	13	2014	\$	464.56
City Springfield State Zip Code (Plus 4) Description of Debt						t				
PA 190641232 Phone Services										
								PAGE TOTAL		
Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.							\$	464.56		