

# 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> PO Box 22											
<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. X	TERMINATION REPORT?	Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/>		
	ANNUAL REPORT	7.	Year 2021	<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	2	2021				
<b>Summary of Receipts and Expenditures from:</b>					<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
					10	19	2021				<b>TO</b>
					11	22	2021				
<b>A. Amount Brought Forward From Last Report</b>					\$ 22,301.15						
<b>B. Total Monetary Contributions And Receipts (From Schedule I)</b>					\$ 5,385.00						
<b>C. Total Funds Available (Sum Of Lines A and B)</b>					\$ 27,686.15						
<b>D. Total Expenditures (From Schedule III)</b>					\$ 4,575.50						
<b>E. Ending Cash Balance (Subtract Line D From Line C)</b>					\$ 23,110.65						
<b>F. Value Of In-Kind Contributions Received (From Schedule II)</b>					\$ 0.00						
<b>G. Unpaid Debts And Obligations (From Schedule IV)</b>					\$ 50,700.00						

## 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**

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
Leanne for Pa	From: <u>10/19/2021</u> To: <u>11/22/2021</u>

<b>1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor</b>	
<b>TOTAL for the Reporting Period (1)</b>	\$ 510.00

<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>	\$ 0.00
<b>All Other Contributions (Part B)</b>	\$ 2,375.00
<b>TOTAL for the Reporting Period (2)</b>	\$ 2,375.00

<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>	\$ 2,500.00
<b>TOTAL for the Reporting Period (3)</b>	\$ 2,500.00

<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>	\$ 5,385.00
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**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>10/19/2021</u> <b>To:</b> <u>11/22/2021</u>

				DATE		AMOUNT	
Full Name of Contributor Kathleen Adamson				MO 11	DAY 22	YEAR 2021	\$  250.00
Mailing Address    5 Waterford Way							
City    Wallingford		State PA	Zip Code (Plus 4) 190867214				
Full Name of Contributor Eleanor Clark				MO 11	DAY 18	YEAR 2021	\$  100.00
Mailing Address							
City		State	Zip Code (Plus 4)				
Full Name of Contributor Melissa Crawford				MO 10	DAY 19	YEAR 2021	\$  100.00
Mailing Address    557 Juniata Ave							
City    Swarthmore		State PA	Zip Code (Plus 4) 190812414				
Full Name of Contributor Sharon Daly				MO 11	DAY 18	YEAR 2021	\$  100.00
Mailing Address    104 Beatty Rd							
City    Media		State PA	Zip Code (Plus 4) 190631702				
Full Name of Contributor Linda Emory Healy				MO 10	DAY 19	YEAR 2021	\$  100.00
Mailing Address    345 W Second St							
City    Media		State PA	Zip Code (Plus 4) 190632301				
Full Name of Contributor Christine Furry				MO 10	DAY 25	YEAR 2021	\$  100.00
Mailing Address    1084 Presidents Dr							
City    Lititz		State PA	Zip Code (Plus 4) 175437327				

Full Name of Contributor			MO	DAY	YEAR	\$ 100.00
Sarah Graden			10	19	2021	
Mailing Address	535 Cornell Ave					
City	Swarthmore	State	PA	Zip Code (Plus 4)		190812401
Full Name of Contributor			MO	DAY	YEAR	\$ 100.00
Isabeth Gross			10	31	2021	
Mailing Address	246 Clay Hill Rd					
City	Hartland	State	VT	Zip Code (Plus 4)		050489545
Full Name of Contributor			MO	DAY	YEAR	\$ 250.00
Shirlee Howe			10	25	2021	
Mailing Address	990 Spring Garden St Ste 200					
City	Philadelphia	State	PA	Zip Code (Plus 4)		191232638
Full Name of Contributor			MO	DAY	YEAR	\$ 200.00
Kaitlin Mckenzie			10	19	2021	
Mailing Address	871 Parkridge Dr					
City	Media	State	PA	Zip Code (Plus 4)		190631715
Full Name of Contributor			MO	DAY	YEAR	\$ 100.00
Melissa Muroff			10	19	2021	
Mailing Address	207 Avian Aly					
City	Media	State	PA	Zip Code (Plus 4)		190632438
Full Name of Contributor			MO	DAY	YEAR	\$ 250.00
Helen Nadel			10	22	2021	
Mailing Address	15 Woodbrook Ln					
City	Swarthmore	State	PA	Zip Code (Plus 4)		190811235
Full Name of Contributor			MO	DAY	YEAR	\$ 75.00
Vera K Orthlieb			10	19	2021	
Mailing Address	13 Green Valley Rd					
City	Wallingford	State	PA	Zip Code (Plus 4)		190866050
Full Name of Contributor			MO	DAY	YEAR	\$ 100.00
Erin Owen			11	18	2021	
Mailing Address	101 W Nippon St					
City	Philadelphia	State	PA	Zip Code (Plus 4)		191192428
Full Name of Contributor			MO	DAY	YEAR	\$ 100.00
Michael Speirs			11	18	2021	
Mailing Address	545 Strath Haven Ave					
City	Swarthmore	State	PA	Zip Code (Plus 4)		190812404

Full Name of Contributor				MO	DAY	YEAR	\$ 100.00
William Turpin							
Mailing Address				11	12	2021	
7 E Sylvan Ave							
City	Rutledge	State	PA	Zip Code (Plus 4)	190702122		

Full Name of Contributor				MO	DAY	YEAR	\$250.00
Flora Wolf							
Mailing Address				10	19	2021	
1737 Chestnut St Apt 1100							
City	Philadelphia	State	PA	Zip Code (Plus 4)	191034100		

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

<b>PAGE TOTAL</b>
\$ 2,375.00

**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: <span style="float: right;">To:</span>

DATE				AMOUNT
Full Name of Contributing Committee				
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
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**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.)**

<b>Name of Filing Committee or Candidate</b>  Leanne for Pa	<b>Reporting Period</b>  <b>From:</b> <u>10/19/2021</u> <b>To:</b> <u>11/22/2021</u>
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				DATE		AMOUNT	
Full Name of Contributor				MO	DAY	YEAR	\$500.00
Robert Scott				11	20	2021	
Mailing Address23 S Princeton Ave							
CitySwarthmore	StatePA	Zip Code (Plus 4)190811516					
Employer NameRobert W. Scott P. C.				OccupationAttorney			
Employer Mailing Address/Principal Place of Business			City		State		Zip Code (Plus 4)
205 N Monroe St			Media		PA		190633052
Full Name of Contributor				MO	DAY	YEAR	\$1,000.00
Leslie Anne Miller				10	25	2021	
Mailing Address1111 Barberry Rd							
CityBryn Mawr	StatePA	Zip Code (Plus 4)190101907					
Employer NameRetired				OccupationRetired			
Employer Mailing Address/Principal Place of Business			City		State		Zip Code (Plus 4)
1111 Barberry Rd			Bryn Mawr		PA		190101907
Full Name of Contributor				MO	DAY	YEAR	\$250.00
William H Ewing Esq.				10	19	2021	
Mailing Address510 E Mount Pleasant Ave							
CityPhiladelphia	StatePA	Zip Code (Plus 4)191191232					
Employer NameSelf				OccupationArbitrator			
Employer Mailing Address/Principal Place of Business			City		State		Zip Code (Plus 4)
510 E Mount Pleasant Ave			Philadelphia		PA		191191232
Full Name of Contributor				MO	DAY	YEAR	\$250.00
William H Ewing Esq.				10	19	2021	
Mailing Address510 E Mount Pleasant Ave							
CityPhiladelphia	StatePA	Zip Code (Plus 4)191191232					
Employer NameSelf				OccupationArbitrator			
Employer Mailing Address/Principal Place of Business			City		State		Zip Code (Plus 4)
510 E Mount Pleasant Ave			Philadelphia		PA		191191232



<b>Full Name of Contributor</b> Tim Bak			<b>MO</b> 11	<b>DAY</b> 22	<b>YEAR</b> 2021	<b>\$</b> 500.00
<b>Mailing Address</b> 21 E State St						
<b>City</b> Media	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 190632917				
<b>Employer Name</b> J. Timothy Bak			<b>Occupation</b> Attorney			
<b>Employer Mailing Address/Principal Place of Business</b> 21 E State St		<b>City</b> Media	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 190632917		

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

<b>PAGE TOTAL</b>
<b>\$</b> 2,500.00

## 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>10/19/2021</u> To: <u>11/22/2021</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)	\$ 0.00
<b>3. IN-KIND CONTRIBUTION RECEIVED - 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.)			\$ 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: <span style="float: right;">To:</span>
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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.						<b>PAGE TOTAL</b>  \$ 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

<b>Name of Filing Committee or Candidate</b>	<b>Reporting Period</b>
Leanne for Pa	From <u>10/19/2021</u> To: <u>11/22/2021</u>

DATE				AMOUNT
To Whom Paid	MO	DAY	YEAR	
ActBlue				
<b>Mailing Address</b> PO Box 441146	11	4	2021	\$ 116.83
<b>City</b> West Somerville	<b>State</b> MA	<b>Zip Code (Plus 4)</b> 021440031	<b>Description of Expenditure</b> credit card processing fee	
To Whom Paid	MO	DAY	YEAR	
BCom Solutions, LLC				
<b>Mailing Address</b> 747 O St # 150	11	17	2021	\$ 1,200.00
<b>City</b> Lincoln	<b>State</b> NE	<b>Zip Code (Plus 4)</b> 685081449	<b>Description of Expenditure</b> Digital Consulting	
To Whom Paid	MO	DAY	YEAR	
Excellence in Education				
<b>Mailing Address</b> PO Box 1005	10	19	2021	\$ 125.00
<b>City</b> Brookhaven	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 190150005	<b>Description of Expenditure</b> Contribution	
To Whom Paid	MO	DAY	YEAR	
Laurie Friedman				
<b>Mailing Address</b> 707 Hemlock Rd	11	13	2021	\$ 600.00
<b>City</b> Media	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 190631709	<b>Description of Expenditure</b> Consulting	
To Whom Paid	MO	DAY	YEAR	
Friends of Gina H Curry				
<b>Mailing Address</b> PO Box 1241	10	25	2021	\$ 1,000.00
<b>City</b> Lansdowne	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 190508241	<b>Description of Expenditure</b> Contribution	
To Whom Paid	MO	DAY	YEAR	
NGP-VAN, Inc				
<b>Mailing Address</b> 1101 15th St NW Ste 500	11	15	2021	\$ 324.00
<b>City</b> Washington	<b>State</b> DC	<b>Zip Code (Plus 4)</b> 200055006	<b>Description of Expenditure</b> service fee	

To Whom Paid NGP-VAN, Inc			MO	DAY	YEAR	\$ 1,098.60
Mailing Address 1101 15th St NW Ste 500			11	19	2021	
City Washington	State DC	Zip Code (Plus 4) 200055006	Description of Expenditure service fee			

To Whom Paid Paragon Payment Solutions			MO	DAY	YEAR	\$ 22.50
Mailing Address 2141 E Broadway Rd Ste 202			11	1	2021	
City Tempe	State AZ	Zip Code (Plus 4) 852821895	Description of Expenditure Credit card processing fees			

To Whom Paid Vantiv.com			MO	DAY	YEAR	\$ 16.00
Mailing Address 8500 Governors Hill Dr			10	19	2021	
City Symmes Twp	State OH	Zip Code (Plus 4) 452491384	Description of Expenditure Credit Card Processing Fees			

To Whom Paid Vantiv.com			MO	DAY	YEAR	\$ 17.27
Mailing Address 8500 Governors Hill Dr			10	20	2021	
City Symmes Twp	State OH	Zip Code (Plus 4) 452491384	Description of Expenditure Credit Card Processing Fees			

To Whom Paid Vantiv.com			MO	DAY	YEAR	\$ 35.88
Mailing Address 8500 Governors Hill Dr			10	21	2021	
City Symmes Twp	State OH	Zip Code (Plus 4) 452491384	Description of Expenditure Credit Card Processing Fees			

To Whom Paid Vantiv.com			MO	DAY	YEAR	\$ 1.37
Mailing Address 8500 Governors Hill Dr			10	26	2021	
City Symmes Twp	State OH	Zip Code (Plus 4) 452491384	Description of Expenditure Credit Card Processing Fees			

To Whom Paid Vantiv.com			MO	DAY	YEAR	\$ 0.63
Mailing Address 8500 Governors Hill Dr			10	27	2021	
City Symmes Twp	State OH	Zip Code (Plus 4) 452491384	Description of Expenditure Credit Card Processing Fees			

To Whom Paid Vantiv.com			MO	DAY	YEAR	\$ 2.30
Mailing Address 8500 Governors Hill Dr			10	28	2021	
City Symmes Twp	State OH	Zip Code (Plus 4) 452491384	Description of Expenditure Credit Card Processing Fees			

<b>To Whom Paid</b> Vantiv.com			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 0.54
<b>Mailing Address</b> 8500 Governors Hill Dr			10	29	2021	
<b>City</b> Symmes Twp	<b>State</b> OH	<b>Zip Code (Plus 4)</b> 452491384	<b>Description of Expenditure</b> Credit Card Processing Fees			

<b>To Whom Paid</b> Vantiv.com			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 0.55
<b>Mailing Address</b> 8500 Governors Hill Dr			11	1	2021	
<b>City</b> Symmes Twp	<b>State</b> OH	<b>Zip Code (Plus 4)</b> 452491384	<b>Description of Expenditure</b> Credit Card Processing Fees			

<b>To Whom Paid</b> Vantiv.com			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 0.04
<b>Mailing Address</b> 8500 Governors Hill Dr			11	2	2021	
<b>City</b> Symmes Twp	<b>State</b> OH	<b>Zip Code (Plus 4)</b> 452491384	<b>Description of Expenditure</b> Credit Card Processing Fees			

<b>To Whom Paid</b> Vantiv.com			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 3.74
<b>Mailing Address</b> 8500 Governors Hill Dr			11	9	2021	
<b>City</b> Symmes Twp	<b>State</b> OH	<b>Zip Code (Plus 4)</b> 452491384	<b>Description of Expenditure</b> Credit Card Processing Fees			

<b>To Whom Paid</b> Vantiv.com			<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 10.25
<b>Mailing Address</b> 8500 Governors Hill Dr			11	10	2021	
<b>City</b> Symmes Twp	<b>State</b> OH	<b>Zip Code (Plus 4)</b> 452491384	<b>Description of Expenditure</b> Credit Card Processing Fees			

<b>Enter Grand Total of Expenditures on Page 1, Report Cover Page, Item D.</b>						<b>PAGE TOTAL</b>
						\$ 4,575.50



**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>10/19/2021</u> <b>To:</b> <u>11/22/2021</u>
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				DATE			Outstanding Balance of Debt
Name of Creditor				MO	DAY	YEAR	\$
Edge Hill Strategies, LLC							
Mailing Address				12	23	2019	
PO Box 22390							50,700.00
City	State		Zip Code (Plus 4)	Description of Debt			
Philadelphia	PA		191102390	Consulting			

<b>Enter Grand Total of Unpaid Debts on Page 1, Report Cover Page, Item G.</b>	<b>PAGE TOTAL</b>  \$              50,700.00
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