

# 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. X	TERMINATION REPORT?	Yes		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				
									(SEE INSTRUCTIONS FOR CODES)			
<b>Summary of Receipts and Expenditures from:</b>		<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>TO</b>	<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	<b>FOR OFFICE USE ONLY</b>			
		10	19	2021		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> Leanne for Pa				<b>Reporting Period</b> From: <u>10/19/2021</u> To: <u>11/22/2021</u>			
				<b>DATE</b>		<b>AMOUNT</b>	
<b>Full Name of Contributor</b> Kathleen Adamson				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 250.00
<b>Mailing Address</b>				11	22	2021	
<b>City</b> Wallingford	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 190867214					
<b>Full Name of Contributor</b> Eleanor Clark				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b>				11	18	2021	
<b>City</b>	<b>State</b>	<b>Zip Code (Plus 4)</b>					
<b>Full Name of Contributor</b> Melissa Crawford				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b>				10	19	2021	
<b>City</b> Swarthmore	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 190812414					
<b>Full Name of Contributor</b> Sharon Daly				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b>				11	18	2021	
<b>City</b> Media	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 190631702					
<b>Full Name of Contributor</b> Linda Emory Healy				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b>				10	19	2021	
<b>City</b> Media	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 190632301					
<b>Full Name of Contributor</b> Christine Furry				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b>				10	25	2021	
<b>City</b> Lititz	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 175437327					
<b>Full Name of Contributor</b> Sarah Graden				<b>MO</b>	<b>DAY</b>	<b>YEAR</b>	\$ 100.00
<b>Mailing Address</b>				10	19	2021	
<b>City</b> Swarthmore	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 190812401					

Full Name of Contributor Isabeth Gross			MO	DAY	YEAR	\$ 100.00
Mailing Address			10	31	2021	
City Hartland	State VT	Zip Code (Plus 4) 050489545				
Full Name of Contributor Shirlee Howe			MO	DAY	YEAR	\$ 250.00
Mailing Address			10	25	2021	
City Philadelphia	State PA	Zip Code (Plus 4) 191232638				
Full Name of Contributor Kaitlin Mckenzie			MO	DAY	YEAR	\$ 200.00
Mailing Address			10	19	2021	
City Media	State PA	Zip Code (Plus 4) 190631715				
Full Name of Contributor Melissa Muroff			MO	DAY	YEAR	\$ 100.00
Mailing Address			10	19	2021	
City Media	State PA	Zip Code (Plus 4) 190632438				
Full Name of Contributor Helen Nadel			MO	DAY	YEAR	\$ 250.00
Mailing Address			10	22	2021	
City Swarthmore	State PA	Zip Code (Plus 4) 190811235				
Full Name of Contributor Vera K Orthlieb			MO	DAY	YEAR	\$ 75.00
Mailing Address			10	19	2021	
City Wallingford	State PA	Zip Code (Plus 4) 190866050				
Full Name of Contributor Erin Owen			MO	DAY	YEAR	\$ 100.00
Mailing Address			11	18	2021	
City Philadelphia	State PA	Zip Code (Plus 4) 191192428				
Full Name of Contributor Michael Speirs			MO	DAY	YEAR	\$ 100.00
Mailing Address			11	18	2021	
City Swarthmore	State PA	Zip Code (Plus 4) 190812404				
Full Name of Contributor William Turpin			MO	DAY	YEAR	\$ 100.00
Mailing Address			11	12	2021	
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	
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:	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.

<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.)**

<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
<b>Full Name of Contributor</b> Tim Bak				<b>MO</b>	<b>DAY</b>
<b>Mailing Address</b> City Media      State PA      Zip Code (Plus 4) 190632917				11	22
				2021	\$ 500.00
<b>Employer Name</b> J. Timothy Bak				<b>Occupation</b> Attorney	
<b>Employer Mailing Address/Principal Place of Business</b>				<b>City</b> Media	<b>State</b> PA
				<b>Zip Code (Plus 4)</b> 190632917	
<b>Full Name of Contributor</b> William H Ewing Esq.				<b>MO</b>	<b>DAY</b>
<b>Mailing Address</b> City Philadelphia      State PA      Zip Code (Plus 4) 191191232				10	19
				2021	\$ 250.00
<b>Employer Name</b> Self				<b>Occupation</b> Arbitrator	
<b>Employer Mailing Address/Principal Place of Business</b>				<b>City</b> Philadelphia	<b>State</b> PA
				<b>Zip Code (Plus 4)</b> 191191232	
<b>Full Name of Contributor</b> William H Ewing Esq.				<b>MO</b>	<b>DAY</b>
<b>Mailing Address</b> City Philadelphia      State PA      Zip Code (Plus 4) 191191232				10	19
				2021	\$ 250.00
<b>Employer Name</b> Self				<b>Occupation</b> Arbitrator	
<b>Employer Mailing Address/Principal Place of Business</b>				<b>City</b> Philadelphia	<b>State</b> PA
				<b>Zip Code (Plus 4)</b> 191191232	
<b>Full Name of Contributor</b> Leslie Anne Miller				<b>MO</b>	<b>DAY</b>
<b>Mailing Address</b> City Bryn Mawr      State PA      Zip Code (Plus 4) 190101907				10	25
				2021	\$ 1,000.00
<b>Employer Name</b> Retired				<b>Occupation</b> Retired	
<b>Employer Mailing Address/Principal Place of Business</b>				<b>City</b> Bryn Mawr	<b>State</b> PA
				<b>Zip Code (Plus 4)</b> 190101907	



<b>Full Name of Contributor</b> Robert Scott			<b>MO</b> 11	<b>DAY</b> 20	<b>YEAR</b> 2021	<b>\$</b> 500.00
<b>Mailing Address</b>						
<b>City</b> Swarthmore	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 190811516				
<b>Employer Name</b> Robert W. Scott P. C.			<b>Occupation</b> Attorney			
<b>Employer Mailing Address/Principal Place of Business</b>		<b>City</b> Media	<b>State</b> PA	<b>Zip Code (Plus 4)</b> 190633052		

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 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.)			\$ 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								
Mailing Address				11	4	2021	\$ 116.83	
City	West Somerville	State	MA	Zip Code (Plus 4)				021440031
				Description of Expenditure				credit card processing fee
To Whom Paid				MO	DAY	YEAR		
BCom Solutions, LLC								
Mailing Address				11	17	2021	\$ 1,200.00	
City	Lincoln	State	NE	Zip Code (Plus 4)				685081449
				Description of Expenditure				Digital Consulting
To Whom Paid				MO	DAY	YEAR		
Excellence in Education								
Mailing Address				10	19	2021	\$ 125.00	
City	Brookhaven	State	PA	Zip Code (Plus 4)				190150005
				Description of Expenditure				Contribution
To Whom Paid				MO	DAY	YEAR		
Laurie Friedman								
Mailing Address				11	13	2021	\$ 600.00	
City	Media	State	PA	Zip Code (Plus 4)				190631709
				Description of Expenditure				Consulting
To Whom Paid				MO	DAY	YEAR		
Friends of Gina H Curry								
Mailing Address				10	25	2021	\$ 1,000.00	
City	Lansdowne	State	PA	Zip Code (Plus 4)				190508241
				Description of Expenditure				Contribution
To Whom Paid				MO	DAY	YEAR		
NGP-VAN, Inc								
Mailing Address				11	15	2021	\$ 324.00	
City	Washington	State	DC	Zip Code (Plus 4)				200055006
				Description of Expenditure				service fee

To Whom Paid NGP-VAN, Inc			MO	DAY	YEAR	\$ 1,098.60
Mailing Address			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			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			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			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			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			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			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			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>			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>			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>			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>			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>			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	\$ 50,700.00	
Edge Hill Strategies, LLC								
Mailing Address				12	23	2019		
City	Philadelphia	State	PA	Zip Code (Plus 4)	191102390			Description of Debt
					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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