## **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 :	ler Identification 9400274 umber : ame of Filing Committee, Candidate or Lobbyist:						y :	CAI	NDI	DATE		СОМІ	MITTEE	<b>Y</b>	LOE	ю	131	
Name of Filing C	Committee, Candi	date or L	obbyist:	,	Planr	ned	Pare	nthoo	d P	A Advo	cate	s						
Street Address:																		
City:	Harrisburg							State	e:	PA			Zip Co	de: 17	7101			
TYPE OF REPORT	6TH TUESDAY PRE-PRIMARY	1.	2ND FRIDA PRIMARY	Y PRE-	- 2	. <b>X</b>	30 DA		F	POST-	3.		AMENDMENT REPORT?		Yes		No	<b>\</b>
(place X to the right of	6TH TUESDAY PRE-ELECTION	4.	2ND FRIDA ELECTION	Y PRE	- 5		30 DA		F	POST-	6.		TERMIN/ REPORT		Yes		No	<b>\</b>
report type)	ANNUAL REPORT	7.	<b>Year</b> 2013					NG ME					PAPER		$\mathbf{V}$	Di	ISKET	ΓΕ
Name of Office S	Sought by Candida	ate:			•			DAT	ΕO	F ELE	СТІС	N	District Number	Office Code	Pa	irty (	Code C	ounty ode
								МО		DAY	YI	AR		•				
									11		5	2013		(SEE IN	ISTRUCT	IONS	FOR CO	DES)
Summary of Expenditures	Receipts and	МО	DAY	YEAR				МО		DAY	YI	EAR	FC	R OFFI	CE US	E OI	NLY	
expenditures	6 Trom:		4 2	2 20	013	T	0		5		6	2013						
A. Amount Bro	ught Forward Fro	m Last R	eport				\$				33,6	585.71						
B. Total Monet	ary Contributions	And Rec	eipts (Fron	n Sche	dule :	I)	\$					0.00						
C. Total Funds	Available (Sum O	f Lines A	and B)				\$				33,6	585.71						
D. Total Expenditures (From Schedule III)						\$				2,0	)55.00							
E. Ending Cash Balance (Subtract Line D From Line C)						\$				31,6	30.71	-						
F. Value Of In-	Kind Contribution	s Receiv	ed (From S	chedu	le II)	)	\$					0.00	-					
G. Unpaid Debt	s And Obligations	s (From	Schedule I\	/)			\$					0.00						
				AFF	IDA'	VI	ΓSE	CTIC	NC									
	s a Committee rep	-	_									_		£ l				•
correct and comple	) that this report, inc ete.	cluaing th	e attached sc	neaules	s filea	on	paper	or by e	electi	ronic me	eaium	, are to	ine best o	т ту кпо	wieage	e and	i beller	, true
Sworn to and subs	cribed before me th day of	is	20								S	Signature	of Perso	n Submit	ting Re	eport	t	
	Signati	ure					-						Prin	ted Nam	e			
My Commission Ex	cpires						_						Ema	il				
	МО	D	AY	YR						Are	ea Cod	le	Daytin	e Telepi	none N	umb	er	
Part II- If this is	a report of a can	didate's	authorized	Comm	nittee	e, Ca	andid	ate sh	nall	sign he	ere.							
No 320) as amende		•	edge and bel	ief this	politi	cal	comm	ittee h	as n	ot viola	ted an	y provis	ions of th	e act of J	une 3,	1937	7 (P.L. 1	1333,
Sworn to and subsc	ribed before me this day of	•	20									s	ignature (	of Candid	ate			_
							-						Printe	ed Name				-
My Commission Exp	Signature pires						_						Ema	il				-
	My Commission Expires  MO DAY YR						•			Area	Code		D	aytime T	elepho	ne N	Number	

# SCHEDULE I CONTRIBUTIONS AND RECEIPTS

**Detailed Summary Page** 

Name of Filing Committee or Candidate	Reporting	Period		
Planned Parenthood PA Advocates	From:	<u>4/2/201</u>	<u>.3</u> To:	<u>5/6/2013</u>
1. Unitemized Contributions Received - \$ 50.00 or Less Per Contributor				
TOTAL for the Reporting	g Period	(1)	\$	0.00
2. Contributions Received - \$ 50.01 To \$250.00 (From Part A and Part B)				
Contributions Received From Political Committees (Part A)			\$	0.00
All Other Contributions (Part B)			\$	0.00
TOTAL for the Reporting	g Period	(2)	\$	0.00
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	J Period	(3)	\$	0.00
4. Other Receipts, Refunds, Interest Earned, Returned Checks, Etc. (From Part E)				
TOTAL for the Reporting	g Period	(4)	\$	0.00
Total Monetary Contributions and Receipts During this Reporting Period (Add an totals from Boxes 1,2,3 and 4; also enter this amount on Page1, Report Cover Pa			\$	0.00

#### **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	Name of Filing Committee or Candidate				Reporting Period					
		F	rom:		То	:				
				DATE			AMOUNT			
Full Name of Contributing Committee			МО	DAY	YEAR					
Mailing Address						\$	0.00			
City	State	Zip Code (Plus 4)								

PAGE TOTAL
0.00

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

### **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.

From: To:    DATE   AMOUNT	Name of Filing Comm	nittee or Candidate		Rep	orting F	Period			
Full Name of Contributor  MO DAY YEAR  Mailing Address  \$ 0.				Froi	m:		To	o:	
MO DAY YEAR  Mailing Address \$ 0.			I.			DATE			AMOUNT
	Full Name of Contribut	or			мо	DAY	YEAR		
City State Zip Code (Plus 4)	Mailing Address							\$	0.00
	City	State	Zip Code (Plus 4)						
									PAGE TOTAL

0.00

#### **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:			То:			
				DA	TE		P	AMOUNT	
Full Name of Contributing Committee				мо	DAY	YEAR			0.00
Mailing Address							<b>-</b>   \$		0.00
City	State	Zip Cod	e (Plus 4)						
								PAGE TOTA	AL
Enter Grand Total of Part C on Sche	dule I, Detailed Sun	nmary P	age, Sectio	n 3.			\$	(	0.00

# 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 Candida	te			Rep	orting Pe	eriod			
				Fron	n:		To	<b>)</b> :	
					D	ATE		,	AMOUNT
Full Name of Contributor					МО	DAY	YEAR	\$	0.00
Mailing Address									
City	State	Z	ip Code (Plus	s 4)					
Employer Name	<b>'</b>				Occupa	ition		•	
Employer Mailing Address/Principal	Place of Business		City		•	State		Zip Co	de (Plus 4)
Enter Grand Total of Part C on So	hedule I, Detaile	d Sumi	mary Page,	Section	on 3.				PAGE TOTAL
								\$	0.00

# 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		Report	ing Peri	od			
			From:			To:		
		<b>'</b>			ATE			AMOUNT
Full Name				мо	DAY	YEAR	\$	0.00
Mailing Address							7	
City	State	Zip Code (P	Plus 4)					
Receipt Description	<b>'</b>						<u> </u>	
	- C		<b>.</b> .:	_				PAGE TOTAL
Enter Grand Total of Part	E on Schedule I, Detailed	Summary Page, S	Section	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 Period		
Planned Parenthood PA Advocates	From:	<u>4/2/2013</u> <b>To:</b>	5/6/2013
1. UNITEMIZED IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.00 OR LESS P	ER CONTRIBUTOR		
TOTAL for the Reporting Pe	eriod (1)	\$	0.00
2. IN-KIND CONTRIBUTIONS RECEIVED - VALUE OF \$50.01 TO \$250.00 (FROM PAR	T 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 Candidate			Reporting Period					
			From:			To:		
				DATE			AMOUNT	
Full Name of Contributor			мо	DAY	YEAR			
Mailing Address						<b> </b>		0.00
City	State	Zip Code (Plus 4)						
Description of Contribution:		•	•			•		
Enter Grand Total of Part F on Sche Section 2.	dule II, In-Kind (	Contributions Detai	iled Sum	mary Pag	je,		PAGE TOTAL	
						\$	(	0.00

# SCHEDULE II PART G IN-KIND CONTRIBUTIONS RECEIVED

**VALUE OVER \$250.00** 

Name of Filing Committee or Candidate				Re	porting	Period				
				Fro	m:		To:			
						DATE			AMOUN	т
Full Name of Contributor					мо	DAY	YEAR			
Mailing Address								1	\$	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	p Code(Plus 4)	Descr	ipti	ion of Contribu	tion
Enter Grand Total of Part G on Sch	edule II, In-K	ind	Contributions D	etaile	ed				PAGE T	OTAL
Summary Page, Section 3.										0.00

### SCHEDULE III **STATEMENT OF EXPENDITURES**

Name of Filing Committee	or Candidate		Reporti	ng Period						
Planned Parenthood PA A	dvocates		From	<u>4/2</u>	2/2013	То:	5/6/2013			
				DATE			AMOUNT			
To Whom Paid			МО	DAY	YEAR					
Committe to Re-Elect Mike	e Stack									
Mailing Address			4	3	2013	\$	500.00			
<b>City</b> Unknown	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	1				
	PA	17102	Donation							
To Whom Paid			мо	DAY	YEAR					
DeLissio State House Cam	npaign		МО	DAI	ILAK					
Mailing Address	4	8	2013	\$	250.00					
<b>City</b> Philadelphia	Descrip	tion of Exp	enditure	1						
	Donatio	n								
To Whom Paid			мо	DAY	YEAR					
TransFirst LLC			MO	DAI	ILAK					
Mailing Address			4	10	2013	\$	5.00			
<b>City</b> Unknown	State	Zip Code (Plus 4)	Description of Expenditure							
	PA	17102	Bank Fee's							
To Whom Paid			мо	DAY	YEAR					
Leonie Cohen			1-10		ILAK					
Mailing Address			4	17	2013	\$	50.00			
City Swarthmore State Zip Code (Plus 4)				Description of Expenditure						
PA 19081				anvasser						
To Whom Paid			мо	DAY	YEAR					
Friends of Tina Davis	iends of Tina Davis			DAT	TEAK					
Mailing Address	ling Address				2013	\$	250.00			
Cit.						1				

Maiiin	g Address			4	3	2013	*	300.00
City	Unknown	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	1	
		PA	17102	Donatio	n			
To W	om Paid			мо	DAY	YEAR		
DeLis	sio State House Campaign			1-10		12/11		
Mailin	g Address			4	8	2013	\$	250.00
City	Philadelphia	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	19127	Donatio	n			
To Wh	om Paid			мо	DAY	YEAR		
Trans	First LLC			МО	DAI	ILAK		
Mailin	g Address			4	10	2013	\$	5.00
City	Unknown	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
		PA	17102	Bank Fe	ee's			
To Wh	om Paid			мо	DAY	YEAR		
Leonie	e Cohen	-1.0						
Mailing Address				4	17	2013	\$	50.00
City	ity Swarthmore State Zip Code (Plus 4)					enditure	•	
		PA	19081	2012 Ca	anvasser			
To Wh	om Paid			мо	DAY	YEAR		
Friend	ls of Tina Davis					1 = 1		
Mailin	g Address			4	22	2013	\$	250.00
City	Unknown	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure	•	
		PA	17102	Donatio	n			
To W	om Paid			мо	DAY	YEAR		
People	e for Peduto			MO	DAI	ILAK		
Mailin	g Address			5	1	2013	\$	1,000.00
City	Pittsburg	State	Zip Code (Plus 4)	Descrip	tion of Exp	enditure		
		PA	15206	Donatio	n			
						_		PAGE TOTAL
Enter	Grand Total of Expenditure	es on Page 1, Re	port Cover Page, Item D	).			\$	2,055.00
								,